

SSB 5073 - H COMM AMD
By Committee on Appropriations

ADOPTED AND ENGROSSED 4/7/21

1 Strike everything after the enacting clause and insert the
2 following:

3 **"Sec. 1.** RCW 71.05.150 and 2020 c 302 s 13, 2020 c 256 s 302,
4 and 2020 c 5 s 2 are each reenacted and amended to read as follows:

5 (1) When a designated crisis responder receives information
6 alleging that a person, as a result of a behavioral health disorder,
7 presents a likelihood of serious harm or is gravely disabled, or that
8 a person is in need of assisted outpatient behavioral health
9 treatment; the designated crisis responder may, after investigation
10 and evaluation of the specific facts alleged and of the reliability
11 and credibility of any person providing information to initiate
12 detention or involuntary outpatient treatment, if satisfied that the
13 allegations are true and that the person will not voluntarily seek
14 appropriate treatment, file a petition for initial detention under
15 this section or a petition for involuntary outpatient behavioral
16 health treatment under RCW 71.05.148. Before filing the petition, the
17 designated crisis responder must personally interview the person,
18 unless the person refuses an interview, and determine whether the
19 person will voluntarily receive appropriate evaluation and treatment
20 at an evaluation and treatment facility, crisis stabilization unit,
21 triage facility, secure withdrawal management and stabilization
22 facility, or approved substance use disorder treatment program. As
23 part of the assessment, the designated crisis responder must attempt
24 to ascertain if the person has executed a mental health advance
25 directive under chapter 71.32 RCW. The interview performed by the
26 designated crisis responder may be conducted by video provided that a
27 licensed health care professional or professional person who can
28 adequately and accurately assist with obtaining any necessary
29 information is present with the person at the time of the interview.

30 (2) (a) A (~~written order of apprehension~~) superior court judge
31 may issue a warrant to detain a person with a behavioral health
32 disorder to a designated evaluation and treatment facility, a secure

1 withdrawal management and stabilization facility, or an approved
2 substance use disorder treatment program, for a period of not more
3 than one hundred twenty hours for evaluation and treatment (~~(, may be~~
4 ~~issued by a judge of the superior court)~~) upon request of a
5 designated crisis responder, subject to (d) of this subsection,
6 whenever it appears to the satisfaction of ((a)) the judge (~~(of the~~
7 ~~superior court)~~) that:

8 (i) (~~(That there)~~) There is probable cause to support the
9 petition; and

10 (ii) (~~(That the)~~) The person has refused or failed to accept
11 appropriate evaluation and treatment voluntarily.

12 (b) The petition for initial detention, signed under penalty of
13 perjury, or sworn telephonic testimony may be considered by the court
14 in determining whether there are sufficient grounds for issuing the
15 order.

16 (c) The order shall designate retained counsel or, if counsel is
17 appointed from a list provided by the court, the name, business
18 address, and telephone number of the attorney appointed to represent
19 the person.

20 (d) A court may not issue an order to detain a person to a secure
21 withdrawal management and stabilization facility or approved
22 substance use disorder treatment program unless there is an available
23 secure withdrawal management and stabilization facility or approved
24 substance use disorder treatment program that has adequate space for
25 the person.

26 (e) If the court does not issue an order to detain a person
27 pursuant to this subsection (2), the court shall issue an order to
28 dismiss the initial petition.

29 (3) The designated crisis responder shall then serve or cause to
30 be served on such person, his or her guardian, and conservator, if
31 any, a copy of the order together with a notice of rights, and a
32 petition for initial detention. After service on such person the
33 designated crisis responder shall file the return of service in court
34 and provide copies of all papers in the court file to the evaluation
35 and treatment facility, secure withdrawal management and
36 stabilization facility, or approved substance use disorder treatment
37 program, and the designated attorney. The designated crisis responder
38 shall notify the court and the prosecuting attorney that a probable
39 cause hearing will be held within one hundred twenty hours of the
40 date and time of outpatient evaluation or admission to the evaluation

1 and treatment facility, secure withdrawal management and
2 stabilization facility, or approved substance use disorder treatment
3 program. The person shall be permitted to be accompanied by one or
4 more of his or her relatives, friends, an attorney, a personal
5 physician, or other professional or religious advisor to the place of
6 evaluation. An attorney accompanying the person to the place of
7 evaluation shall be permitted to be present during the admission
8 evaluation. Any other individual accompanying the person may be
9 present during the admission evaluation. The facility may exclude the
10 individual if his or her presence would present a safety risk, delay
11 the proceedings, or otherwise interfere with the evaluation.

12 (4) The designated crisis responder may notify a peace officer to
13 take such person or cause such person to be taken into custody and
14 placed in an evaluation and treatment facility, secure withdrawal
15 management and stabilization facility, or approved substance use
16 disorder treatment program. At the time such person is taken into
17 custody there shall commence to be served on such person, his or her
18 guardian, and conservator, if any, a copy of the original order
19 together with a notice of rights and a petition for initial
20 detention.

21 ~~(5) ((An Indian tribe shall have jurisdiction exclusive to the~~
22 ~~state as to any involuntary commitment of an American Indian or~~
23 ~~Alaska Native to an evaluation and treatment facility located within~~
24 ~~the boundaries of that tribe, unless the tribe has consented to the~~
25 ~~state's concurrent jurisdiction, or the tribe has expressly declined~~
26 ~~to exercise its exclusive jurisdiction.~~

27 ~~(6))~~ Tribal court orders for involuntary commitment shall be
28 recognized and enforced in accordance with superior court civil rule
29 82.5.

30 ~~((7))~~ (6) In any investigation and evaluation of an individual
31 under RCW 71.05.150 or 71.05.153 in which the designated crisis
32 responder knows, or has reason to know, that the individual is an
33 American Indian or Alaska Native who receives medical or behavioral
34 health services from a tribe within this state, the designated crisis
35 responder shall notify the tribe ~~((or))~~ and Indian health care
36 provider regarding whether or not a petition for initial detention or
37 involuntary outpatient treatment will be filed. Notification shall be
38 made in person or by telephonic or electronic communication to the
39 tribal contact listed in the authority's tribal crisis coordination
40 plan as soon as possible but no later than three hours subject to the

1 requirements in RCW 70.02.230 (2) ~~((dd))~~ (ee) and (3). A designated
2 crisis responder may restrict the release of information as necessary
3 to comply with 42 C.F.R. Part 2.

4 **Sec. 2.** RCW 71.05.150 and 2020 c 302 s 14, 2020 c 256 s 303, and
5 2020 c 5 s 3 are each reenacted and amended to read as follows:

6 (1) When a designated crisis responder receives information
7 alleging that a person, as a result of a behavioral health disorder,
8 presents a likelihood of serious harm or is gravely disabled, or that
9 a person is in need of assisted outpatient behavioral health
10 treatment; the designated crisis responder may, after investigation
11 and evaluation of the specific facts alleged and of the reliability
12 and credibility of any person providing information to initiate
13 detention or involuntary outpatient treatment, if satisfied that the
14 allegations are true and that the person will not voluntarily seek
15 appropriate treatment, file a petition for initial detention under
16 this section or a petition for involuntary outpatient behavioral
17 health treatment under RCW 71.05.148. Before filing the petition, the
18 designated crisis responder must personally interview the person,
19 unless the person refuses an interview, and determine whether the
20 person will voluntarily receive appropriate evaluation and treatment
21 at an evaluation and treatment facility, crisis stabilization unit,
22 triage facility, secure withdrawal management and stabilization
23 facility, or approved substance use disorder treatment program. As
24 part of the assessment, the designated crisis responder must attempt
25 to ascertain if the person has executed a mental health advance
26 directive under chapter 71.32 RCW. The interview performed by the
27 designated crisis responder may be conducted by video provided that a
28 licensed health care professional or professional person who can
29 adequately and accurately assist with obtaining any necessary
30 information is present with the person at the time of the interview.

31 (2) (a) A ~~((written order of apprehension))~~ superior court judge
32 may issue a warrant to detain a person with a behavioral health
33 disorder to a designated evaluation and treatment facility, a secure
34 withdrawal management and stabilization facility, or an approved
35 substance use disorder treatment program, for a period of not more
36 than one hundred twenty hours for evaluation and treatment ~~((, may be~~
37 ~~issued by a judge of the superior court))~~ upon request of a
38 designated crisis responder whenever it appears to the satisfaction
39 of ~~((a))~~ the judge ~~((of the superior court))~~ that:

1 (i) (~~That—there~~) There is probable cause to support the
2 petition; and

3 (ii) (~~That—the~~) The person has refused or failed to accept
4 appropriate evaluation and treatment voluntarily.

5 (b) The petition for initial detention, signed under penalty of
6 perjury, or sworn telephonic testimony may be considered by the court
7 in determining whether there are sufficient grounds for issuing the
8 order.

9 (c) The order shall designate retained counsel or, if counsel is
10 appointed from a list provided by the court, the name, business
11 address, and telephone number of the attorney appointed to represent
12 the person.

13 (d) If the court does not issue an order to detain a person
14 pursuant to this subsection (2), the court shall issue an order to
15 dismiss the initial petition.

16 (3) The designated crisis responder shall then serve or cause to
17 be served on such person, his or her guardian, and conservator, if
18 any, a copy of the order together with a notice of rights, and a
19 petition for initial detention. After service on such person the
20 designated crisis responder shall file the return of service in court
21 and provide copies of all papers in the court file to the evaluation
22 and treatment facility, secure withdrawal management and
23 stabilization facility, or approved substance use disorder treatment
24 program, and the designated attorney. The designated crisis responder
25 shall notify the court and the prosecuting attorney that a probable
26 cause hearing will be held within one hundred twenty hours of the
27 date and time of outpatient evaluation or admission to the evaluation
28 and treatment facility, secure withdrawal management and
29 stabilization facility, or approved substance use disorder treatment
30 program. The person shall be permitted to be accompanied by one or
31 more of his or her relatives, friends, an attorney, a personal
32 physician, or other professional or religious advisor to the place of
33 evaluation. An attorney accompanying the person to the place of
34 evaluation shall be permitted to be present during the admission
35 evaluation. Any other individual accompanying the person may be
36 present during the admission evaluation. The facility may exclude the
37 individual if his or her presence would present a safety risk, delay
38 the proceedings, or otherwise interfere with the evaluation.

39 (4) The designated crisis responder may notify a peace officer to
40 take such person or cause such person to be taken into custody and

1 placed in an evaluation and treatment facility, secure withdrawal
2 management and stabilization facility, or approved substance use
3 disorder treatment program. At the time such person is taken into
4 custody there shall commence to be served on such person, his or her
5 guardian, and conservator, if any, a copy of the original order
6 together with a notice of rights and a petition for initial
7 detention.

8 ~~(5) ((An Indian tribe shall have jurisdiction exclusive to the
9 state as to any involuntary commitment of an American Indian or
10 Alaska Native to an evaluation and treatment facility located within
11 the boundaries of that tribe, unless the tribe has consented to the
12 state's concurrent jurisdiction, or the tribe has expressly declined
13 to exercise its exclusive jurisdiction.~~

14 ~~(6))~~ Tribal court orders for involuntary commitment shall be
15 recognized and enforced in accordance with superior court civil rule
16 82.5.

17 ~~((7))~~ (6) In any investigation and evaluation of an individual
18 under RCW 71.05.150 or 71.05.153 in which the designated crisis
19 responder knows, or has reason to know, that the individual is an
20 American Indian or Alaska Native who receives medical or behavioral
21 health services from a tribe within this state, the designated crisis
22 responder shall notify the tribe ~~((or))~~ and Indian health care
23 provider regarding whether or not a petition for initial detention or
24 involuntary outpatient treatment will be filed. Notification shall be
25 made in person or by telephonic or electronic communication to the
26 tribal contact listed in the authority's tribal crisis coordination
27 plan as soon as possible but no later than three hours subject to the
28 requirements in RCW 70.02.230 (2) ~~((dd))~~ (ee) and (3). A designated
29 crisis responder may restrict the release of information as necessary
30 to comply with 42 C.F.R. Part 2.

31 **Sec. 3.** RCW 71.05.153 and 2020 c 302 s 16 and 2020 c 5 s 4 are
32 each reenacted and amended to read as follows:

33 (1) When a designated crisis responder receives information
34 alleging that a person, as the result of a behavioral health
35 disorder, presents an imminent likelihood of serious harm, or is in
36 imminent danger because of being gravely disabled, after
37 investigation and evaluation of the specific facts alleged and of the
38 reliability and credibility of the person or persons providing the
39 information if any, the designated crisis responder may take such

1 person, or cause by oral or written order such person to be taken
2 into emergency custody in an evaluation and treatment facility,
3 secure withdrawal management and stabilization facility if available
4 with adequate space for the person, or approved substance use
5 disorder treatment program if available with adequate space for the
6 person, for not more than one hundred twenty hours as described in
7 RCW 71.05.180.

8 (2)(a) Subject to (b) of this subsection, a peace officer may
9 take or cause such person to be taken into custody and immediately
10 delivered to a triage facility, crisis stabilization unit, evaluation
11 and treatment facility, secure withdrawal management and
12 stabilization facility, approved substance use disorder treatment
13 program, or the emergency department of a local hospital under the
14 following circumstances:

15 (i) Pursuant to subsection (1) of this section; or

16 (ii) When he or she has reasonable cause to believe that such
17 person is suffering from a behavioral health disorder and presents an
18 imminent likelihood of serious harm or is in imminent danger because
19 of being gravely disabled.

20 (b) A peace officer's delivery of a person, to a secure
21 withdrawal management and stabilization facility or approved
22 substance use disorder treatment program is subject to the
23 availability of a secure withdrawal management and stabilization
24 facility or approved substance use disorder treatment program with
25 adequate space for the person.

26 (3) Persons delivered to a crisis stabilization unit, evaluation
27 and treatment facility, emergency department of a local hospital,
28 triage facility that has elected to operate as an involuntary
29 facility, secure withdrawal management and stabilization facility, or
30 approved substance use disorder treatment program by peace officers
31 pursuant to subsection (2) of this section may be held by the
32 facility for a period of up to twelve hours, not counting time
33 periods prior to medical clearance.

34 (4) Within three hours after arrival, not counting time periods
35 prior to medical clearance, the person must be examined by a mental
36 health professional or substance use disorder professional. Within
37 twelve hours of notice of the need for evaluation, not counting time
38 periods prior to medical clearance, the designated crisis responder
39 must determine whether the individual meets detention criteria. As
40 part of the assessment, the designated crisis responder must attempt

1 to ascertain if the person has executed a mental health advance
2 directive under chapter 71.32 RCW. The interview performed by the
3 designated crisis responder may be conducted by video provided that a
4 licensed health care professional or professional person who can
5 adequately and accurately assist with obtaining any necessary
6 information is present with the person at the time of the interview.
7 If the individual is detained, the designated crisis responder shall
8 file a petition for detention or a supplemental petition as
9 appropriate and commence service on the designated attorney for the
10 detained person. If the individual is released to the community, the
11 behavioral health service provider shall inform the peace officer of
12 the release within a reasonable period of time after the release if
13 the peace officer has specifically requested notification and
14 provided contact information to the provider.

15 (5) Dismissal of a commitment petition is not the appropriate
16 remedy for a violation of the timeliness requirements of this section
17 based on the intent of this chapter under RCW 71.05.010 except in the
18 few cases where the facility staff or designated crisis responder has
19 totally disregarded the requirements of this section.

20 **Sec. 4.** RCW 71.05.153 and 2020 c 302 s 17 and 2020 c 5 s 5 are
21 each reenacted and amended to read as follows:

22 (1) When a designated crisis responder receives information
23 alleging that a person, as the result of a behavioral health
24 disorder, presents an imminent likelihood of serious harm, or is in
25 imminent danger because of being gravely disabled, after
26 investigation and evaluation of the specific facts alleged and of the
27 reliability and credibility of the person or persons providing the
28 information if any, the designated crisis responder may take such
29 person, or cause by oral or written order such person to be taken
30 into emergency custody in an evaluation and treatment facility,
31 secure withdrawal management and stabilization facility, or approved
32 substance use disorder treatment program, for not more than one
33 hundred twenty hours as described in RCW 71.05.180.

34 (2) A peace officer may take or cause such person to be taken
35 into custody and immediately delivered to a triage facility, crisis
36 stabilization unit, evaluation and treatment facility, secure
37 withdrawal management and stabilization facility, approved substance
38 use disorder treatment program, or the emergency department of a
39 local hospital under the following circumstances:

1 (a) Pursuant to subsection (1) of this section; or

2 (b) When he or she has reasonable cause to believe that such
3 person is suffering from a behavioral health disorder and presents an
4 imminent likelihood of serious harm or is in imminent danger because
5 of being gravely disabled.

6 (3) Persons delivered to a crisis stabilization unit, evaluation
7 and treatment facility, emergency department of a local hospital,
8 triage facility that has elected to operate as an involuntary
9 facility, secure withdrawal management and stabilization facility, or
10 approved substance use disorder treatment program by peace officers
11 pursuant to subsection (2) of this section may be held by the
12 facility for a period of up to twelve hours, not counting time
13 periods prior to medical clearance.

14 (4) Within three hours after arrival, not counting time periods
15 prior to medical clearance, the person must be examined by a mental
16 health professional or substance use disorder professional. Within
17 twelve hours of notice of the need for evaluation, not counting time
18 periods prior to medical clearance, the designated crisis responder
19 must determine whether the individual meets detention criteria. As
20 part of the assessment, the designated crisis responder must attempt
21 to ascertain if the person has executed a mental health advance
22 directive under chapter 71.32 RCW. The interview performed by the
23 designated crisis responder may be conducted by video provided that a
24 licensed health care professional or professional person who can
25 adequately and accurately assist with obtaining any necessary
26 information is present with the person at the time of the interview.
27 If the individual is detained, the designated crisis responder shall
28 file a petition for detention or a supplemental petition as
29 appropriate and commence service on the designated attorney for the
30 detained person. If the individual is released to the community, the
31 behavioral health service provider shall inform the peace officer of
32 the release within a reasonable period of time after the release if
33 the peace officer has specifically requested notification and
34 provided contact information to the provider.

35 (5) Dismissal of a commitment petition is not the appropriate
36 remedy for a violation of the timeliness requirements of this section
37 based on the intent of this chapter under RCW 71.05.010 except in the
38 few cases where the facility staff or designated crisis responder has
39 totally disregarded the requirements of this section.

1 **Sec. 5.** RCW 71.05.203 and 2019 c 325 s 3006 are each amended to
2 read as follows:

3 (1) The authority and each behavioral health administrative
4 services organization or agency employing designated crisis
5 responders shall publish information in an easily accessible format
6 describing the process for an immediate family member, guardian, or
7 conservator, or a federally recognized Indian tribe if the person is
8 a member of such tribe, to petition for court review of a detention
9 decision under RCW 71.05.201.

10 (2) A designated crisis responder or designated crisis responder
11 agency that receives a request for investigation for possible
12 detention under this chapter must inquire whether the request comes
13 from an immediate family member, guardian, or conservator, or a
14 federally recognized Indian tribe if the person is a member of such
15 tribe, who would be eligible to petition under RCW 71.05.201. If the
16 designated crisis responder decides not to detain the person for
17 evaluation and treatment under RCW 71.05.150 or 71.05.153 or forty-
18 eight hours have elapsed since the request for investigation was
19 received and the designated crisis responder has not taken action to
20 have the person detained, the designated crisis responder or
21 designated crisis responder agency must inform the immediate family
22 member, guardian, or conservator, or a federally recognized Indian
23 tribe if the person is a member of such tribe, who made the request
24 for investigation about the process to petition for court review
25 under RCW 71.05.201 and, to the extent feasible, provide the
26 immediate family member, guardian, or conservator, or a federally
27 recognized Indian tribe if the person is a member of such tribe, with
28 written or electronic information about the petition process.
29 Information provided to a federally recognized Indian tribe shall be
30 sent to the tribal contact listed in the authority's tribal crisis
31 coordination plan. If provision of written or electronic information
32 is not feasible, the designated crisis responder or designated crisis
33 responder agency must refer the immediate family member, guardian, or
34 conservator, or a federally recognized Indian tribe if the person is
35 a member of such tribe, to a website where published information on
36 the petition process may be accessed. The designated crisis responder
37 or designated crisis responder agency must document the manner and
38 date on which the information required under this subsection was
39 provided to the immediate family member, guardian, or conservator, or

1 a federally recognized Indian tribe if the person is a member of such
2 tribe.

3 (3) A designated crisis responder or designated crisis responder
4 agency must, upon request, disclose the date of a designated crisis
5 responder investigation under this chapter to an immediate family
6 member, guardian, or conservator, or a federally recognized Indian
7 tribe if the person is a member of such tribe, of a person to assist
8 in the preparation of a petition under RCW 71.05.201.

9 **Sec. 6.** RCW 71.05.210 and 2020 c 302 s 26 are each amended to
10 read as follows:

11 (1) Each person involuntarily detained and accepted or admitted
12 at an evaluation and treatment facility, secure withdrawal management
13 and stabilization facility, or approved substance use disorder
14 treatment program:

15 (a) Shall, within twenty-four hours of his or her admission or
16 acceptance at the facility, not counting time periods prior to
17 medical clearance, be examined and evaluated by:

18 (i) One physician, physician assistant, or advanced registered
19 nurse practitioner; and

20 (ii) One mental health professional. If the person is detained
21 for substance use disorder evaluation and treatment, the person may
22 be examined by a substance use disorder professional instead of a
23 mental health professional; and

24 (b) Shall receive such treatment and care as his or her condition
25 requires including treatment on an outpatient basis for the period
26 that he or she is detained, except that, beginning twenty-four hours
27 prior to a trial or hearing pursuant to RCW 71.05.215, 71.05.240,
28 71.05.310, 71.05.320, 71.05.590, or 71.05.217, the individual may
29 refuse psychiatric medications, but may not refuse: (i) Any other
30 medication previously prescribed by a person licensed under Title 18
31 RCW; or (ii) emergency lifesaving treatment, and the individual shall
32 be informed at an appropriate time of his or her right of such
33 refusal. The person shall be detained up to one hundred twenty hours,
34 if, in the opinion of the professional person in charge of the
35 facility, or his or her professional designee, the person presents a
36 likelihood of serious harm, or is gravely disabled. A person who has
37 been detained for one hundred twenty hours shall no later than the
38 end of such period be released, unless referred for further care on a

1 voluntary basis, or detained pursuant to court order for further
2 treatment as provided in this chapter.

3 (2) If, (~~after~~) at any time during the involuntary treatment
4 hold and following the initial examination and evaluation, the mental
5 health professional or substance use disorder professional and
6 licensed physician, physician assistant, or psychiatric advanced
7 registered nurse practitioner determine that the initial needs of the
8 person, if detained to an evaluation and treatment facility, would be
9 better served by placement in a secure withdrawal management and
10 stabilization facility or approved substance use disorder treatment
11 program, or, if detained to a secure withdrawal management and
12 stabilization facility or approved substance use disorder treatment
13 program, would be better served in an evaluation and treatment
14 facility then the person shall be referred to the more appropriate
15 placement for the remainder of the current commitment period without
16 any need for further court review; however, a person may only be
17 referred to a secure withdrawal management and stabilization facility
18 or approved substance use disorder treatment program if there is an
19 available secure withdrawal management and stabilization facility or
20 approved substance use disorder treatment program with adequate space
21 for the person.

22 (3) An evaluation and treatment center, secure withdrawal
23 management and stabilization facility, or approved substance use
24 disorder treatment program admitting or accepting any person pursuant
25 to this chapter whose physical condition reveals the need for
26 hospitalization shall assure that such person is transferred to an
27 appropriate hospital for evaluation or admission for treatment.
28 Notice of such fact shall be given to the court, the designated
29 attorney, and the designated crisis responder and the court shall
30 order such continuance in proceedings under this chapter as may be
31 necessary, but in no event may this continuance be more than fourteen
32 days.

33 **Sec. 7.** RCW 71.05.210 and 2020 c 302 s 27 are each amended to
34 read as follows:

35 (1) Each person involuntarily detained and accepted or admitted
36 at an evaluation and treatment facility, secure withdrawal management
37 and stabilization facility, or approved substance use disorder
38 treatment program:

1 (a) Shall, within twenty-four hours of his or her admission or
2 acceptance at the facility, not counting time periods prior to
3 medical clearance, be examined and evaluated by:

4 (i) One physician, physician assistant, or advanced registered
5 nurse practitioner; and

6 (ii) One mental health professional. If the person is detained
7 for substance use disorder evaluation and treatment, the person may
8 be examined by a substance use disorder professional instead of a
9 mental health professional; and

10 (b) Shall receive such treatment and care as his or her condition
11 requires including treatment on an outpatient basis for the period
12 that he or she is detained, except that, beginning twenty-four hours
13 prior to a trial or hearing pursuant to RCW 71.05.215, 71.05.240,
14 71.05.310, 71.05.320, 71.05.590, or 71.05.217, the individual may
15 refuse psychiatric medications, but may not refuse: (i) Any other
16 medication previously prescribed by a person licensed under Title 18
17 RCW; or (ii) emergency lifesaving treatment, and the individual shall
18 be informed at an appropriate time of his or her right of such
19 refusal. The person shall be detained up to one hundred twenty hours,
20 if, in the opinion of the professional person in charge of the
21 facility, or his or her professional designee, the person presents a
22 likelihood of serious harm, or is gravely disabled. A person who has
23 been detained for one hundred twenty hours shall no later than the
24 end of such period be released, unless referred for further care on a
25 voluntary basis, or detained pursuant to court order for further
26 treatment as provided in this chapter.

27 (2) If, (~~after~~) at any time during the involuntary treatment
28 hold and following the initial examination and evaluation, the mental
29 health professional or substance use disorder professional and
30 licensed physician, physician assistant, or psychiatric advanced
31 registered nurse practitioner determine that the initial needs of the
32 person, if detained to an evaluation and treatment facility, would be
33 better served by placement in a secure withdrawal management and
34 stabilization facility or approved substance use disorder treatment
35 program, or, if detained to a secure withdrawal management and
36 stabilization facility or approved substance use disorder treatment
37 program, would be better served in an evaluation and treatment
38 facility then the person shall be referred to the more appropriate
39 placement for the remainder of the current commitment period without
40 any need for further court review.

1 (3) An evaluation and treatment center, secure withdrawal
2 management and stabilization facility, or approved substance use
3 disorder treatment program admitting or accepting any person pursuant
4 to this chapter whose physical condition reveals the need for
5 hospitalization shall assure that such person is transferred to an
6 appropriate hospital for evaluation or admission for treatment.
7 Notice of such fact shall be given to the court, the designated
8 attorney, and the designated crisis responder and the court shall
9 order such continuance in proceedings under this chapter as may be
10 necessary, but in no event may this continuance be more than fourteen
11 days.

12 **Sec. 8.** RCW 71.05.240 and 2020 c 302 s 39 are each amended to
13 read as follows:

14 (1) If a petition is filed for fourteen day involuntary treatment
15 or ninety days of less restrictive alternative treatment, the court
16 shall hold a probable cause hearing within one hundred twenty hours
17 of the initial detention of such person as determined in RCW
18 71.05.180, or at a time determined under RCW 71.05.148.

19 (2) If the petition is for mental health treatment, the court or
20 the prosecutor at the time of the probable cause hearing and before
21 an order of commitment is entered shall inform the person both orally
22 and in writing that the failure to make a good faith effort to seek
23 voluntary treatment as provided in RCW 71.05.230 will result in the
24 loss of his or her firearm rights if the person is subsequently
25 detained for involuntary treatment under this section.

26 (3) If the person or his or her attorney alleges, prior to the
27 commencement of the hearing, that the person has in good faith
28 volunteered for treatment, the petitioner must show, by preponderance
29 of the evidence, that the person has not in good faith volunteered
30 for appropriate treatment. In order to qualify as a good faith
31 volunteer, the person must abide by procedures and a treatment plan
32 as prescribed by a treatment facility and professional staff.

33 (4)(a) Subject to (b) of this subsection, at the conclusion of
34 the probable cause hearing, if the court finds by a preponderance of
35 the evidence that such person, as the result of a behavioral health
36 disorder, presents a likelihood of serious harm, or is gravely
37 disabled, and, after considering less restrictive alternatives to
38 involuntary detention and treatment, finds that no such alternatives
39 are in the best interests of such person or others, the court shall

1 order that such person be detained for involuntary treatment not to
2 exceed fourteen days in a facility licensed or certified to provide
3 treatment by the department or under RCW 71.05.745.

4 (b) A court may only order commitment to a secure withdrawal
5 management and stabilization facility or approved substance use
6 disorder treatment program if there is an available facility with
7 adequate space for the person.

8 (c) At the conclusion of the probable cause hearing, if the court
9 finds by a preponderance of the evidence that such person, as the
10 result of a behavioral health disorder, presents a likelihood of
11 serious harm or is gravely disabled, but that treatment in a less
12 restrictive setting than detention is in the best interest of such
13 person or others, the court shall order an appropriate less
14 restrictive alternative course of treatment for up to ninety days.

15 (d) If the court finds by a preponderance of the evidence that
16 such person, as the result of a behavioral health disorder, is in
17 need of assisted outpatient behavioral health treatment, and that the
18 person does not present a likelihood of serious harm and is not
19 gravely disabled, the court shall order an appropriate less
20 restrictive alternative course of treatment for up to ninety days.

21 (5) An order for less restrictive alternative treatment must name
22 the behavioral health service provider responsible for identifying
23 the services the person will receive in accordance with RCW
24 71.05.585, and must include a requirement that the person cooperate
25 with the treatment recommendations of the behavioral health service
26 provider.

27 (6) The court shall notify the person orally and in writing that
28 if involuntary treatment is sought beyond the fourteen-day inpatient
29 or ninety-day less restrictive treatment period, the person has the
30 right to a full hearing or jury trial under RCW 71.05.310. If the
31 commitment is for mental health treatment, the court shall also
32 notify the person orally and in writing that the person is barred
33 from the possession of firearms and that the prohibition remains in
34 effect until a court restores his or her right to possess a firearm
35 under RCW 9.41.047.

36 (7) If the court does not issue an order to detain a person under
37 this section, the court shall issue an order to dismiss the petition.

38 (8) Nothing in this section precludes the court from subsequently
39 modifying the terms of an order for less restrictive alternative
40 treatment under RCW 71.05.590(3).

1 **Sec. 9.** RCW 71.05.240 and 2020 c 302 s 40 are each amended to
2 read as follows:

3 (1) If a petition is filed for fourteen day involuntary treatment
4 or ninety days of less restrictive alternative treatment, the court
5 shall hold a probable cause hearing within one hundred twenty hours
6 of the initial detention of such person as determined in RCW
7 71.05.180, or at a time determined under RCW 71.05.148.

8 (2) If the petition is for mental health treatment, the court or
9 the prosecutor at the time of the probable cause hearing and before
10 an order of commitment is entered shall inform the person both orally
11 and in writing that the failure to make a good faith effort to seek
12 voluntary treatment as provided in RCW 71.05.230 will result in the
13 loss of his or her firearm rights if the person is subsequently
14 detained for involuntary treatment under this section.

15 (3) If the person or his or her attorney alleges, prior to the
16 commencement of the hearing, that the person has in good faith
17 volunteered for treatment, the petitioner must show, by preponderance
18 of the evidence, that the person has not in good faith volunteered
19 for appropriate treatment. In order to qualify as a good faith
20 volunteer, the person must abide by procedures and a treatment plan
21 as prescribed by a treatment facility and professional staff.

22 (4)(a) At the conclusion of the probable cause hearing, if the
23 court finds by a preponderance of the evidence that such person, as
24 the result of a behavioral health disorder, presents a likelihood of
25 serious harm, or is gravely disabled, and, after considering less
26 restrictive alternatives to involuntary detention and treatment,
27 finds that no such alternatives are in the best interests of such
28 person or others, the court shall order that such person be detained
29 for involuntary treatment not to exceed fourteen days in a facility
30 licensed or certified to provide treatment by the department or under
31 RCW 71.05.745.

32 (b) At the conclusion of the probable cause hearing, if the court
33 finds by a preponderance of the evidence that such person, as the
34 result of a behavioral health disorder, presents a likelihood of
35 serious harm or is gravely disabled, but that treatment in a less
36 restrictive setting than detention is in the best interest of such
37 person or others, the court shall order an appropriate less
38 restrictive alternative course of treatment for up to ninety days.

39 (c) If the court finds by a preponderance of the evidence that
40 such person, as the result of a behavioral health disorder, is in

1 need of assisted outpatient behavioral health treatment, and that the
2 person does not present a likelihood of serious harm and is not
3 gravely disabled, the court shall order an appropriate less
4 restrictive alternative course of treatment for up to ninety days.

5 (5) An order for less restrictive alternative treatment must name
6 the behavioral health service provider responsible for identifying
7 the services the person will receive in accordance with RCW
8 71.05.585, and must include a requirement that the person cooperate
9 with the treatment recommendations of the behavioral health service
10 provider.

11 (6) The court shall notify the person orally and in writing that
12 if involuntary treatment is sought beyond the fourteen-day inpatient
13 or ninety-day less restrictive treatment period, such person has the
14 right to a full hearing or jury trial under RCW 71.05.310. If the
15 commitment is for mental health treatment, the court shall also
16 notify the person orally and in writing that the person is barred
17 from the possession of firearms and that the prohibition remains in
18 effect until a court restores his or her right to possess a firearm
19 under RCW 9.41.047.

20 (7) If the court does not issue an order to detain a person under
21 this section, the court shall issue an order to dismiss the petition.

22 (8) Nothing in this section precludes the court from subsequently
23 modifying the terms of an order for less restrictive alternative
24 treatment under RCW 71.05.590(3).

25 **Sec. 10.** RCW 71.05.320 and 2020 c 302 s 45 are each amended to
26 read as follows:

27 (1)(a) Subject to (b) of this subsection, if the court or jury
28 finds that grounds set forth in RCW 71.05.280 have been proven and
29 that the best interests of the person or others will not be served by
30 a less restrictive treatment which is an alternative to detention,
31 the court shall remand him or her to the custody of the department of
32 social and health services or to a facility certified for ninety day
33 treatment by the department for a further period of intensive
34 treatment not to exceed ninety days from the date of judgment.

35 (b) If the order for inpatient treatment is based on a substance
36 use disorder, treatment must take place at an approved substance use
37 disorder treatment program. The court may only enter an order for
38 commitment based on a substance use disorder if there is an available

1 approved substance use disorder treatment program with adequate space
2 for the person.

3 (c) If the grounds set forth in RCW 71.05.280(3) are the basis of
4 commitment, then the period of treatment may be up to but not exceed
5 one hundred eighty days from the date of judgment to the custody of
6 the department of social and health services or to a facility
7 certified for one hundred eighty-day treatment by the department or
8 under RCW 71.05.745.

9 (2) If the court or jury finds that grounds set forth in RCW
10 71.05.280 have been proven, but finds that treatment less restrictive
11 than detention will be in the best interest of the person or others,
12 then the court shall remand him or her to the custody of the
13 department of social and health services or to a facility certified
14 for ninety day treatment by the department or to a less restrictive
15 alternative for a further period of less restrictive treatment not to
16 exceed ninety days from the date of judgment. If the grounds set
17 forth in RCW 71.05.280(3) are the basis of commitment, then the
18 period of treatment may be up to but not exceed one hundred eighty
19 days from the date of judgment. If the court or jury finds that the
20 grounds set forth in RCW 71.05.280(5) have been proven, and provide
21 the only basis for commitment, the court must enter an order for less
22 restrictive alternative treatment for up to ninety days from the date
23 of judgment and may not order inpatient treatment.

24 (3) An order for less restrictive alternative treatment entered
25 under subsection (2) of this section must name the behavioral health
26 service provider responsible for identifying the services the person
27 will receive in accordance with RCW 71.05.585, and must include a
28 requirement that the person cooperate with the services planned by
29 the behavioral health service provider.

30 (4) The person shall be released from involuntary treatment at
31 the expiration of the period of commitment imposed under subsection
32 (1) or (2) of this section unless the superintendent or professional
33 person in charge of the facility in which he or she is confined, or
34 in the event of a less restrictive alternative, the designated crisis
35 responder, files a new petition for involuntary treatment on the
36 grounds that the committed person:

37 (a) During the current period of court ordered treatment: (i) Has
38 threatened, attempted, or inflicted physical harm upon the person of
39 another, or substantial damage upon the property of another, and (ii)

1 as a result of a behavioral health disorder or developmental
2 disability presents a likelihood of serious harm; or

3 (b) Was taken into custody as a result of conduct in which he or
4 she attempted or inflicted serious physical harm upon the person of
5 another, and continues to present, as a result of a behavioral health
6 disorder or developmental disability, a likelihood of serious harm;
7 or

8 (c) (i) Is in custody pursuant to RCW 71.05.280(3) and as a result
9 of a behavioral health disorder or developmental disability continues
10 to present a substantial likelihood of repeating acts similar to the
11 charged criminal behavior, when considering the person's life
12 history, progress in treatment, and the public safety.

13 (ii) In cases under this subsection where the court has made an
14 affirmative special finding under RCW 71.05.280(3)(b), the commitment
15 shall continue for up to an additional one hundred eighty-day period
16 whenever the petition presents prima facie evidence that the person
17 continues to suffer from a behavioral health disorder or
18 developmental disability that results in a substantial likelihood of
19 committing acts similar to the charged criminal behavior, unless the
20 person presents proof through an admissible expert opinion that the
21 person's condition has so changed such that the behavioral health
22 disorder or developmental disability no longer presents a substantial
23 likelihood of the person committing acts similar to the charged
24 criminal behavior. The initial or additional commitment period may
25 include transfer to a specialized program of intensive support and
26 treatment, which may be initiated prior to or after discharge from
27 the state hospital; or

28 (d) Continues to be gravely disabled; or

29 (e) Is in need of assisted outpatient behavioral health
30 treatment.

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

34 If less restrictive alternative treatment is sought, the petition
35 shall set forth any recommendations for less restrictive alternative
36 treatment services.

37 (5) A new petition for involuntary treatment filed under
38 subsection (4) of this section shall be filed and heard in the
39 superior court of the county of the facility which is filing the new
40 petition for involuntary treatment unless good cause is shown for a

1 change of venue. The cost of the proceedings shall be borne by the
2 state.

3 (6) (a) The hearing shall be held as provided in RCW 71.05.310,
4 and if the court or jury finds that the grounds for additional
5 confinement as set forth in this section are present, subject to
6 subsection (1) (b) of this section, the court may order the committed
7 person returned for an additional period of treatment not to exceed
8 one hundred eighty days from the date of judgment, except as provided
9 in subsection (7) of this section. If the court's order is based
10 solely on the grounds identified in subsection (4) (e) of this
11 section, the court may enter an order for less restrictive
12 alternative treatment not to exceed one hundred eighty days from the
13 date of judgment, and may not enter an order for inpatient treatment.
14 An order for less restrictive alternative treatment must name the
15 behavioral health service provider responsible for identifying the
16 services the person will receive in accordance with RCW 71.05.585,
17 and must include a requirement that the person cooperate with the
18 services planned by the behavioral health service provider.

19 (b) At the end of the one hundred eighty-day period of
20 commitment, or one-year period of commitment if subsection (7) of
21 this section applies, the committed person shall be released unless a
22 petition for an additional one hundred eighty-day period of continued
23 treatment is filed and heard in the same manner as provided in this
24 section. Successive one hundred eighty-day commitments are
25 permissible on the same grounds and pursuant to the same procedures
26 as the original one hundred eighty-day commitment.

27 (7) An order for less restrictive treatment entered under
28 subsection (6) of this section may be for up to one year when the
29 person's previous commitment term was for intensive inpatient
30 treatment in a state hospital.

31 (8) No person committed as provided in this section may be
32 detained unless a valid order of commitment is in effect. No order of
33 commitment can exceed one hundred eighty days in length except as
34 provided in subsection (7) of this section.

35 (9) Nothing in this section precludes the court from subsequently
36 modifying the terms of an order for less restrictive alternative
37 treatment under RCW 71.05.590(3).

38 **Sec. 11.** RCW 71.05.320 and 2020 c 302 s 46 are each amended to
39 read as follows:

1 (1) If the court or jury finds that grounds set forth in RCW
2 71.05.280 have been proven and that the best interests of the person
3 or others will not be served by a less restrictive treatment which is
4 an alternative to detention, the court shall remand him or her to the
5 custody of the department of social and health services or to a
6 facility certified for ninety day treatment by the department for a
7 further period of intensive treatment not to exceed ninety days from
8 the date of judgment.

9 If the order for inpatient treatment is based on a substance use
10 disorder, treatment must take place at an approved substance use
11 disorder treatment program. If the grounds set forth in RCW
12 71.05.280(3) are the basis of commitment, then the period of
13 treatment may be up to but not exceed one hundred eighty days from
14 the date of judgment to the custody of the department of social and
15 health services or to a facility certified for one hundred eighty-day
16 treatment by the department or under RCW 71.05.745.

17 (2) If the court or jury finds that grounds set forth in RCW
18 71.05.280 have been proven, but finds that treatment less restrictive
19 than detention will be in the best interest of the person or others,
20 then the court shall remand him or her to the custody of the
21 department of social and health services or to a facility certified
22 for ninety day treatment by the department or to a less restrictive
23 alternative for a further period of less restrictive treatment not to
24 exceed ninety days from the date of judgment. If the grounds set
25 forth in RCW 71.05.280(3) are the basis of commitment, then the
26 period of treatment may be up to but not exceed one hundred eighty
27 days from the date of judgment. If the court or jury finds that the
28 grounds set forth in RCW 71.05.280(5) have been proven, and provide
29 the only basis for commitment, the court must enter an order for less
30 restrictive alternative treatment for up to ninety days from the date
31 of judgment and may not order inpatient treatment.

32 (3) An order for less restrictive alternative treatment entered
33 under subsection (2) of this section must name the behavioral health
34 service provider responsible for identifying the services the person
35 will receive in accordance with RCW 71.05.585, and must include a
36 requirement that the person cooperate with the services planned by
37 the behavioral health service provider.

38 (4) The person shall be released from involuntary treatment at
39 the expiration of the period of commitment imposed under subsection
40 (1) or (2) of this section unless the superintendent or professional

1 person in charge of the facility in which he or she is confined, or
2 in the event of a less restrictive alternative, the designated crisis
3 responder, files a new petition for involuntary treatment on the
4 grounds that the committed person:

5 (a) During the current period of court ordered treatment: (i) Has
6 threatened, attempted, or inflicted physical harm upon the person of
7 another, or substantial damage upon the property of another, and (ii)
8 as a result of a behavioral health disorder or developmental
9 disability presents a likelihood of serious harm; or

10 (b) Was taken into custody as a result of conduct in which he or
11 she attempted or inflicted serious physical harm upon the person of
12 another, and continues to present, as a result of a behavioral health
13 disorder or developmental disability, a likelihood of serious harm;
14 or

15 (c) (i) Is in custody pursuant to RCW 71.05.280(3) and as a result
16 of a behavioral health disorder or developmental disability continues
17 to present a substantial likelihood of repeating acts similar to the
18 charged criminal behavior, when considering the person's life
19 history, progress in treatment, and the public safety.

20 (ii) In cases under this subsection where the court has made an
21 affirmative special finding under RCW 71.05.280(3)(b), the commitment
22 shall continue for up to an additional one hundred eighty-day period
23 whenever the petition presents prima facie evidence that the person
24 continues to suffer from a behavioral health disorder or
25 developmental disability that results in a substantial likelihood of
26 committing acts similar to the charged criminal behavior, unless the
27 person presents proof through an admissible expert opinion that the
28 person's condition has so changed such that the behavioral health
29 disorder or developmental disability no longer presents a substantial
30 likelihood of the person committing acts similar to the charged
31 criminal behavior. The initial or additional commitment period may
32 include transfer to a specialized program of intensive support and
33 treatment, which may be initiated prior to or after discharge from
34 the state hospital; or

35 (d) Continues to be gravely disabled; or

36 (e) Is in need of assisted outpatient behavioral health
37 treatment.

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

1 If less restrictive alternative treatment is sought, the petition
2 shall set forth any recommendations for less restrictive alternative
3 treatment services.

4 (5) A new petition for involuntary treatment filed under
5 subsection (4) of this section shall be filed and heard in the
6 superior court of the county of the facility which is filing the new
7 petition for involuntary treatment unless good cause is shown for a
8 change of venue. The cost of the proceedings shall be borne by the
9 state.

10 (6) (a) The hearing shall be held as provided in RCW 71.05.310,
11 and if the court or jury finds that the grounds for additional
12 confinement as set forth in this section are present, the court may
13 order the committed person returned for an additional period of
14 treatment not to exceed one hundred eighty days from the date of
15 judgment, except as provided in subsection (7) of this section. If
16 the court's order is based solely on the grounds identified in
17 subsection (4) (e) of this section, the court may enter an order for
18 less restrictive alternative treatment not to exceed one hundred
19 eighty days from the date of judgment, and may not enter an order for
20 inpatient treatment. An order for less restrictive alternative
21 treatment must name the behavioral health service provider
22 responsible for identifying the services the person will receive in
23 accordance with RCW 71.05.585, and must include a requirement that
24 the person cooperate with the services planned by the behavioral
25 health service provider.

26 (b) At the end of the one hundred eighty-day period of
27 commitment, or one-year period of commitment if subsection (7) of
28 this section applies, the committed person shall be released unless a
29 petition for an additional one hundred eighty-day period of continued
30 treatment is filed and heard in the same manner as provided in this
31 section. Successive one hundred eighty-day commitments are
32 permissible on the same grounds and pursuant to the same procedures
33 as the original one hundred eighty-day commitment.

34 (7) An order for less restrictive treatment entered under
35 subsection (6) of this section may be for up to one year when the
36 person's previous commitment term was for intensive inpatient
37 treatment in a state hospital.

38 (8) No person committed as provided in this section may be
39 detained unless a valid order of commitment is in effect. No order of

1 commitment can exceed one hundred eighty days in length except as
2 provided in subsection (7) of this section.

3 (9) Nothing in this section precludes the court from subsequently
4 modifying the terms of an order for less restrictive alternative
5 treatment under RCW 71.05.590(3).

6 **Sec. 12.** RCW 71.05.340 and 2018 c 201 s 3017 are each amended to
7 read as follows:

8 (1)(a) When, in the opinion of the superintendent or the
9 professional person in charge of the hospital or facility providing
10 involuntary treatment, the committed person can be appropriately
11 served by outpatient treatment prior to or at the expiration of the
12 period of commitment, then such outpatient care may be required as a
13 term of conditional release for a period which, when ~~((added to the))~~
14 combined with the number of days the person has spent in inpatient
15 treatment ~~((period))~~, shall not exceed ~~((the period of commitment))~~
16 90 days if the underlying commitment was for a period of 14 or 90
17 days, or 180 days if the underlying commitment was for a period of
18 180 days. If the facility or agency designated to provide outpatient
19 treatment is other than the facility providing involuntary treatment,
20 the outpatient facility so designated must agree in writing to assume
21 such responsibility. A copy of the terms of conditional release shall
22 be given to the patient, the designated crisis responder in the
23 county in which the patient is to receive outpatient treatment, and
24 to the court of original commitment.

25 (b) Before a person committed under grounds set forth in RCW
26 71.05.280(3) or 71.05.320(4)(c) is conditionally released under (a)
27 of this subsection, the superintendent or professional person in
28 charge of the hospital or facility providing involuntary treatment
29 shall in writing notify the prosecuting attorney of the county in
30 which the criminal charges against the committed person were
31 dismissed, of the decision to conditionally release the person.
32 Notice and a copy of the terms of conditional release shall be
33 provided at least thirty days before the person is released from
34 inpatient care. Within twenty days after receiving notice, the
35 prosecuting attorney may petition the court in the county that issued
36 the commitment order to hold a hearing to determine whether the
37 person may be conditionally released and the terms of the conditional
38 release. The prosecuting attorney shall provide a copy of the
39 petition to the superintendent or professional person in charge of

1 the hospital or facility providing involuntary treatment, the
2 attorney, if any, and guardian or conservator of the committed
3 person, and the court of original commitment. If the county in which
4 the committed person is to receive outpatient treatment is the same
5 county in which the criminal charges against the committed person
6 were dismissed, then the court shall, upon the motion of the
7 prosecuting attorney, transfer the proceeding to the court in that
8 county. The court shall conduct a hearing on the petition within ten
9 days of the filing of the petition. The committed person shall have
10 the same rights with respect to notice, hearing, and counsel as for
11 an involuntary treatment proceeding, except as set forth in this
12 subsection and except that there shall be no right to jury trial. The
13 issue to be determined at the hearing is whether or not the person
14 may be conditionally released without substantial danger to other
15 persons, or substantial likelihood of committing criminal acts
16 jeopardizing public safety or security. If the court disapproves of
17 the conditional release, it may do so only on the basis of
18 substantial evidence. Pursuant to the determination of the court upon
19 the hearing, the conditional release of the person shall be approved
20 by the court on the same or modified conditions or the person shall
21 be returned for involuntary treatment on an inpatient basis subject
22 to release at the end of the period for which he or she was
23 committed, or otherwise in accordance with the provisions of this
24 chapter.

25 (2) The facility or agency designated to provide outpatient care
26 or the secretary of the department of social and health services may
27 modify the conditions for continued release when such modification is
28 in the best interest of the person. Notification of such changes
29 shall be sent to all persons receiving a copy of the original
30 conditions. Enforcement or revocation proceedings related to a
31 conditional release (~~order~~) may occur as provided under RCW
32 71.05.590.

33 **Sec. 13.** RCW 71.05.585 and 2020 c 302 s 53 are each amended to
34 read as follows:

35 (1) Less restrictive alternative treatment, at a minimum,
36 includes the following services:

37 (a) Assignment of a care coordinator;

38 (b) An intake evaluation with the provider of the less
39 restrictive alternative treatment;

1 (c) A psychiatric evaluation, a substance use disorder
2 evaluation, or both;

3 (d) A schedule of regular contacts with the provider of the
4 (~~less restrictive alternative~~) treatment services for the duration
5 of the order;

6 (e) A transition plan addressing access to continued services at
7 the expiration of the order;

8 (f) An individual crisis plan; (~~and~~)

9 (g) Consultation about the formation of a mental health advance
10 directive under chapter 71.32 RCW; and

11 (h) Notification to the care coordinator assigned in (a) of this
12 subsection if reasonable efforts to engage the client fail to produce
13 substantial compliance with court-ordered treatment conditions.

14 (2) Less restrictive alternative treatment may additionally
15 include requirements to participate in the following services:

16 (a) Medication management;

17 (b) Psychotherapy;

18 (c) Nursing;

19 (d) Substance (~~abuse~~) use disorder counseling;

20 (e) Residential treatment; (~~and~~)

21 (f) Support for housing, benefits, education, and employment; and

22 (g) Periodic court review.

23 (3) If the person was provided with involuntary medication under
24 RCW 71.05.215 or pursuant to a judicial order during the involuntary
25 commitment period, the less restrictive alternative treatment order
26 may authorize the less restrictive alternative treatment provider or
27 its designee to administer involuntary antipsychotic medication to
28 the person if the provider has attempted and failed to obtain the
29 informed consent of the person and there is a concurring medical
30 opinion approving the medication by a psychiatrist, physician
31 assistant working with a supervising psychiatrist, psychiatric
32 advanced registered nurse practitioner, or physician or physician
33 assistant in consultation with an independent mental health
34 professional with prescribing authority.

35 (4) Less restrictive alternative treatment must be administered
36 by a provider that is certified or licensed to provide or coordinate
37 the full scope of services required under the less restrictive
38 alternative order and that has agreed to assume this responsibility.

39 (5) The care coordinator assigned to a person ordered to less
40 restrictive alternative treatment must submit an individualized plan

1 for the person's treatment services to the court that entered the
2 order. An initial plan must be submitted as soon as possible
3 following the intake evaluation and a revised plan must be submitted
4 upon any subsequent modification in which a type of service is
5 removed from or added to the treatment plan.

6 (6) A care coordinator may disclose information and records
7 related to mental health services pursuant to RCW 70.02.230(2)(k) for
8 purposes of implementing less restrictive alternative treatment.

9 (7) For the purpose of this section, "care coordinator" means a
10 clinical practitioner who coordinates the activities of less
11 restrictive alternative treatment. The care coordinator coordinates
12 activities with the designated crisis responders that are necessary
13 for enforcement and continuation of less restrictive alternative
14 orders and is responsible for coordinating service activities with
15 other agencies and establishing and maintaining a therapeutic
16 relationship with the individual on a continuing basis.

17 **Sec. 14.** RCW 71.05.590 and 2020 c 302 s 55 are each amended to
18 read as follows:

19 (1) Either an agency or facility designated to monitor or provide
20 services under a less restrictive alternative order or conditional
21 release (~~(order)~~), or a designated crisis responder, may take action
22 to enforce, modify, or revoke a less restrictive alternative or
23 conditional release (~~(order)~~). The agency, facility, or designated
24 crisis responder must determine that:

25 (a) The person is failing to adhere to the terms and conditions
26 of the court order;

27 (b) Substantial deterioration in the person's functioning has
28 occurred;

29 (c) There is evidence of substantial decompensation with a
30 reasonable probability that the decompensation can be reversed by
31 further evaluation, intervention, or treatment; or

32 (d) The person poses a likelihood of serious harm.

33 (2) Actions taken under this section must include a flexible
34 range of responses of varying levels of intensity appropriate to the
35 circumstances and consistent with the interests of the individual and
36 the public in personal autonomy, safety, recovery, and compliance.
37 Available actions may include, but are not limited to, any of the
38 following:

1 (a) To counsel or advise the person as to their rights and
2 responsibilities under the court order, and to offer appropriate
3 incentives to motivate compliance;

4 (b) To increase the intensity of outpatient services provided to
5 the person by increasing the frequency of contacts with the provider,
6 referring the person for an assessment for assertive community
7 services, or by other means;

8 (c) To request a court hearing for review and modification of the
9 court order. The request must be made to or by the court with
10 jurisdiction over the order and specify the circumstances that give
11 rise to the request and what modification is being sought. The county
12 prosecutor shall assist the agency or facility in requesting this
13 hearing and issuing an appropriate summons to the person. This
14 subsection does not limit the inherent authority of a treatment
15 provider to alter conditions of treatment for clinical reasons, and
16 is intended to be used only when court intervention is necessary or
17 advisable to secure the person's compliance and prevent
18 decompensation or deterioration;

19 (d) To cause the person to be transported by a peace officer,
20 designated crisis responder, or other means to the agency or facility
21 monitoring or providing services under the court order, or to a
22 triage facility, crisis stabilization unit, emergency department,
23 evaluation and treatment facility, secure withdrawal management and
24 stabilization facility with available space, or an approved substance
25 use disorder treatment program with available space. The person may
26 be detained at the facility for up to twelve hours for the purpose of
27 an evaluation to determine whether modification, revocation, or
28 commitment proceedings are necessary and appropriate to stabilize the
29 person and prevent decompensation, deterioration, or physical harm.
30 Temporary detention for evaluation under this subsection is intended
31 to occur only following a pattern of noncompliance or the failure of
32 reasonable attempts at outreach and engagement, and may occur only
33 when in the clinical judgment of a designated crisis responder or the
34 professional person in charge of an agency or facility designated to
35 monitor less restrictive alternative services temporary detention is
36 appropriate. This subsection does not limit the ability or obligation
37 to pursue revocation procedures under subsection ~~((4))~~ (5) of this
38 section in appropriate circumstances; and

39 (e) To initiate revocation procedures under subsection ~~((4))~~
40 (5) of this section or, if the current commitment is solely based on

1 the person being in need of assisted outpatient behavioral health
2 treatment as defined in RCW 71.05.020, initiate initial inpatient
3 detention procedures under subsection ~~((6))~~ (7) of this section.

4 (3) A court may supervise a person on an order for less
5 restrictive alternative treatment or a conditional release. While the
6 person is under the order, the court may:

7 (a) Require appearance in court for periodic reviews; and

8 (b) Modify the order after considering input from the agency or
9 facility designated to provide or facilitate services. The court may
10 not remand the person into inpatient treatment except as provided
11 under subsection (5) of this section, but may take actions under
12 subsection (2)(a) through (d) of this section.

13 (4) The facility or agency designated to provide outpatient
14 treatment shall notify the secretary of the department of social and
15 health services or designated crisis responder when a person fails to
16 adhere to terms and conditions of court ordered treatment or
17 experiences substantial deterioration in his or her condition and, as
18 a result, presents an increased likelihood of serious harm.

19 ~~((4))~~ (5)(a) Except as provided in subsection ~~((6))~~ (7) of
20 this section, a designated crisis responder or the secretary of the
21 department of social and health services may upon their own motion or
22 notification by the facility or agency designated to provide
23 outpatient care order a person subject to a court order under this
24 chapter to be apprehended and taken into custody and temporary
25 detention in an evaluation and treatment facility, an available
26 secure withdrawal management and stabilization facility with adequate
27 space, or an available approved substance use disorder treatment
28 program with adequate space, in or near the county in which he or she
29 is receiving outpatient treatment. Proceedings under this subsection
30 ~~((4))~~ (5) may be initiated without ordering the apprehension and
31 detention of the person.

32 (b) Except as provided in subsection ~~((6))~~ (7) of this section,
33 a person detained under this subsection ~~((4))~~ (5) must be held
34 until such time, not exceeding five days, as a hearing can be
35 scheduled to determine whether or not the person should be returned
36 to the hospital or facility from which he or she had been released.
37 If the person is not detained, the hearing must be scheduled within
38 five days of service on the person. The designated crisis responder
39 or the secretary of the department of social and health services may

1 modify or rescind the order at any time prior to commencement of the
2 court hearing.

3 (c) The designated crisis responder or secretary of the
4 department of social and health services shall file a revocation
5 petition and order of apprehension and detention with the court of
6 the county where the person is currently located or being detained.
7 The designated crisis responder shall serve the person and their
8 attorney, guardian, and conservator, if any. The person has the same
9 rights with respect to notice, hearing, and counsel as in any
10 involuntary treatment proceeding, except as specifically set forth in
11 this section. There is no right to jury trial. The venue for
12 proceedings is the county where the petition is filed. Notice of the
13 filing must be provided to the court that originally ordered
14 commitment, if different from the court where the petition for
15 revocation is filed, within two judicial days of the person's
16 detention.

17 (d) Except as provided in subsection (~~(6)~~) (7) of this section,
18 the issues for the court to determine are whether: (i) The person
19 adhered to the terms and conditions of the court order; (ii)
20 substantial deterioration in the person's functioning has occurred;
21 (iii) there is evidence of substantial decompensation with a
22 reasonable probability that the decompensation can be reversed by
23 further inpatient treatment; or (iv) there is a likelihood of serious
24 harm; and, if any of the above conditions apply, whether the court
25 should reinstate or modify the person's less restrictive alternative
26 or conditional release (~~order~~) or order the person's detention for
27 inpatient treatment. The person may waive the court hearing and allow
28 the court to enter a stipulated order upon the agreement of all
29 parties. If the court orders detention for inpatient treatment, the
30 treatment period must be for fourteen days from the revocation
31 hearing if the outpatient order was based on a petition under RCW
32 71.05.160 or 71.05.230. If the court orders detention for inpatient
33 treatment and the outpatient order was based on a petition under RCW
34 71.05.290 or 71.05.320, the number of days remaining on the
35 outpatient order must be converted to days of inpatient treatment
36 authorized in the original court order. A court may not issue an
37 order to detain a person for inpatient treatment in a secure
38 withdrawal management and stabilization facility or approved
39 substance use disorder treatment program under this subsection unless
40 there is a secure withdrawal management and stabilization facility or

1 approved substance use disorder treatment program available and with
2 adequate space for the person.

3 ~~((5))~~ (6) In determining whether or not to take action under
4 this section the designated crisis responder, agency, or facility
5 must consider the factors specified under RCW 71.05.212 and the court
6 must consider the factors specified under RCW 71.05.245 as they apply
7 to the question of whether to enforce, modify, or revoke a court
8 order for involuntary treatment.

9 ~~((6))~~ (7)(a) If the current commitment is solely based on the
10 person being in need of assisted outpatient behavioral health
11 treatment as defined in RCW 71.05.020, a designated crisis responder
12 may initiate inpatient detention procedures under RCW 71.05.150 or
13 71.05.153 when appropriate. A designated crisis responder or the
14 secretary may, upon their own motion or notification by the facility
15 or agency designated to provide outpatient care to a person subject
16 to a less restrictive alternative treatment order under RCW 71.05.320
17 subsequent to an order for assisted outpatient behavioral health
18 treatment entered under RCW 71.05.148, order the person to be
19 apprehended and taken into custody and temporary detention for
20 inpatient evaluation in an evaluation and treatment facility, secure
21 withdrawal management and stabilization facility, or in an approved
22 substance use disorder treatment program, in or near the county in
23 which he or she is receiving outpatient treatment. Proceedings under
24 this subsection may be initiated without ordering the apprehension
25 and detention of the person.

26 (b) A person detained under this subsection may be held for
27 evaluation for up to one hundred twenty hours, excluding weekends and
28 holidays, pending a court hearing. If the person is not detained, the
29 hearing must be scheduled within one hundred twenty hours of service
30 on the person. The designated crisis responder or the secretary may
31 modify or rescind the order at any time prior to commencement of the
32 court hearing.

33 (c) The issues for the court to determine are whether to continue
34 the detention of the person for inpatient treatment or whether the
35 court should reinstate or modify the person's less restrictive
36 alternative order or order the person's detention for inpatient
37 treatment. To continue detention after the one hundred twenty hour
38 period, the court must find that the person, as a result of a
39 behavioral health disorder, presents a likelihood of serious harm or
40 is gravely disabled and, after considering less restrictive

1 alternatives to involuntary detention and treatment, that no such
2 alternatives are in the best interest of the person or others.

3 (d) A court may not issue an order to detain a person for
4 inpatient treatment in a secure withdrawal management and
5 stabilization facility or approved substance use disorder program
6 under this subsection unless there is a secure withdrawal management
7 and stabilization facility or approved substance use disorder
8 treatment program available and with adequate space for the person.

9 **Sec. 15.** RCW 71.05.590 and 2020 c 302 s 56 are each amended to
10 read as follows:

11 (1) Either an agency or facility designated to monitor or provide
12 services under a less restrictive alternative order or conditional
13 release (~~order~~), or a designated crisis responder, may take action
14 to enforce, modify, or revoke a less restrictive alternative or
15 conditional release (~~order~~). The agency, facility, or designated
16 crisis responder must determine that:

17 (a) The person is failing to adhere to the terms and conditions
18 of the court order;

19 (b) Substantial deterioration in the person's functioning has
20 occurred;

21 (c) There is evidence of substantial decompensation with a
22 reasonable probability that the decompensation can be reversed by
23 further evaluation, intervention, or treatment; or

24 (d) The person poses a likelihood of serious harm.

25 (2) Actions taken under this section must include a flexible
26 range of responses of varying levels of intensity appropriate to the
27 circumstances and consistent with the interests of the individual and
28 the public in personal autonomy, safety, recovery, and compliance.
29 Available actions may include, but are not limited to, any of the
30 following:

31 (a) To counsel or advise the person as to their rights and
32 responsibilities under the court order, and to offer appropriate
33 incentives to motivate compliance;

34 (b) To increase the intensity of outpatient services provided to
35 the person by increasing the frequency of contacts with the provider,
36 referring the person for an assessment for assertive community
37 services, or by other means;

38 (c) To request a court hearing for review and modification of the
39 court order. The request must be made to or by the court with

1 jurisdiction over the order and specify the circumstances that give
2 rise to the request and what modification is being sought. The county
3 prosecutor shall assist the agency or facility in requesting this
4 hearing and issuing an appropriate summons to the person. This
5 subsection does not limit the inherent authority of a treatment
6 provider to alter conditions of treatment for clinical reasons, and
7 is intended to be used only when court intervention is necessary or
8 advisable to secure the person's compliance and prevent
9 decompensation or deterioration;

10 (d) To cause the person to be transported by a peace officer,
11 designated crisis responder, or other means to the agency or facility
12 monitoring or providing services under the court order, or to a
13 triage facility, crisis stabilization unit, emergency department,
14 evaluation and treatment facility, secure withdrawal management and
15 stabilization facility, or an approved substance use disorder
16 treatment program. The person may be detained at the facility for up
17 to twelve hours for the purpose of an evaluation to determine whether
18 modification, revocation, or commitment proceedings are necessary and
19 appropriate to stabilize the person and prevent decompensation,
20 deterioration, or physical harm. Temporary detention for evaluation
21 under this subsection is intended to occur only following a pattern
22 of noncompliance or the failure of reasonable attempts at outreach
23 and engagement, and may occur only when in the clinical judgment of a
24 designated crisis responder or the professional person in charge of
25 an agency or facility designated to monitor less restrictive
26 alternative services temporary detention is appropriate. This
27 subsection does not limit the ability or obligation to pursue
28 revocation procedures under subsection (~~((4))~~) (5) of this section in
29 appropriate circumstances; and

30 (e) To initiate revocation procedures under subsection (~~((4))~~)
31 (5) of this section or, if the current commitment is solely based on
32 the person being in need of assisted outpatient behavioral health
33 treatment as defined in RCW 71.05.020, initial inpatient detention
34 procedures under subsection (~~((6))~~) (7) of this section.

35 (3) A court may supervise a person on an order for less
36 restrictive alternative treatment or a conditional release. While the
37 person is under the order, the court may:

38 (a) Require appearance in court for periodic reviews; and

39 (b) Modify the order after considering input from the agency or
40 facility designated to provide or facilitate services. The court may

1 not remand the person into inpatient treatment except as provided
2 under subsection (5) of this section, but may take actions under
3 subsection (2)(a) through (d) of this section.

4 (4) The facility or agency designated to provide outpatient
5 treatment shall notify the secretary of the department of social and
6 health services or designated crisis responder when a person fails to
7 adhere to terms and conditions of court ordered treatment or
8 experiences substantial deterioration in his or her condition and, as
9 a result, presents an increased likelihood of serious harm.

10 ~~((4))~~ (5)(a) Except as provided in subsection ~~((6))~~ (7) of
11 this section, a designated crisis responder or the secretary of the
12 department of social and health services may upon their own motion or
13 notification by the facility or agency designated to provide
14 outpatient care order a person subject to a court order under this
15 chapter to be apprehended and taken into custody and temporary
16 detention in an evaluation and treatment facility, in a secure
17 withdrawal management and stabilization facility, or in an approved
18 substance use disorder treatment program, in or near the county in
19 which he or she is receiving outpatient treatment. Proceedings under
20 this subsection ~~((4))~~ (5) may be initiated without ordering the
21 apprehension and detention of the person.

22 (b) Except as provided in subsection ~~((6))~~ (7) of this section,
23 a person detained under this subsection ~~((4))~~ (5) must be held
24 until such time, not exceeding five days, as a hearing can be
25 scheduled to determine whether or not the person should be returned
26 to the hospital or facility from which he or she had been released.
27 If the person is not detained, the hearing must be scheduled within
28 five days of service on the person. The designated crisis responder
29 or the secretary of the department of social and health services may
30 modify or rescind the order at any time prior to commencement of the
31 court hearing.

32 (c) The designated crisis responder or secretary of the
33 department of social and health services shall file a revocation
34 petition and order of apprehension and detention with the court of
35 the county where the person is currently located or being detained.
36 The designated crisis responder shall serve the person and their
37 attorney, guardian, and conservator, if any. The person has the same
38 rights with respect to notice, hearing, and counsel as in any
39 involuntary treatment proceeding, except as specifically set forth in
40 this section. There is no right to jury trial. The venue for

1 proceedings is the county where the petition is filed. Notice of the
2 filing must be provided to the court that originally ordered
3 commitment, if different from the court where the petition for
4 revocation is filed, within two judicial days of the person's
5 detention.

6 (d) Except as provided in subsection (~~((6))~~) (7) of this section,
7 the issues for the court to determine are whether: (i) The person
8 adhered to the terms and conditions of the court order; (ii)
9 substantial deterioration in the person's functioning has occurred;
10 (iii) there is evidence of substantial decompensation with a
11 reasonable probability that the decompensation can be reversed by
12 further inpatient treatment; or (iv) there is a likelihood of serious
13 harm; and, if any of the above conditions apply, whether the court
14 should reinstate or modify the person's less restrictive alternative
15 or conditional release (~~(order)~~) or order the person's detention for
16 inpatient treatment. The person may waive the court hearing and allow
17 the court to enter a stipulated order upon the agreement of all
18 parties. If the court orders detention for inpatient treatment, the
19 treatment period must be for fourteen days from the revocation
20 hearing if the outpatient order was based on a petition under RCW
21 71.05.160 or 71.05.230. If the court orders detention for inpatient
22 treatment and the outpatient order was based on a petition under RCW
23 71.05.290 or 71.05.320, the number of days remaining on the
24 outpatient order must be converted to days of inpatient treatment
25 authorized in the original court order.

26 (~~((5))~~) (6) In determining whether or not to take action under
27 this section the designated crisis responder, agency, or facility
28 must consider the factors specified under RCW 71.05.212 and the court
29 must consider the factors specified under RCW 71.05.245 as they apply
30 to the question of whether to enforce, modify, or revoke a court
31 order for involuntary treatment.

32 (~~((6))~~) (7)(a) If the current commitment is solely based on the
33 person being in need of assisted outpatient behavioral health
34 treatment as defined in RCW 71.05.020, a designated crisis responder
35 may initiate inpatient detention procedures under RCW 71.05.150 or
36 71.05.153 when appropriate. A designated crisis responder or the
37 secretary may, upon their own motion or notification by the facility
38 or agency designated to provide outpatient care to a person subject
39 to a less restrictive alternative treatment order under RCW 71.05.320
40 subsequent to an order for assisted outpatient behavioral health

1 treatment entered under RCW 71.05.148, order the person to be
2 apprehended and taken into custody and temporary detention for
3 inpatient evaluation in an evaluation and treatment facility, in a
4 secure withdrawal management and stabilization facility, or in an
5 approved substance use disorder treatment program, in or near the
6 county in which he or she is receiving outpatient treatment.
7 Proceedings under this subsection may be initiated without ordering
8 the apprehension and detention of the person.

9 (b) A person detained under this subsection may be held for
10 evaluation for up to one hundred twenty hours, excluding weekends and
11 holidays, pending a court hearing. The designated crisis responder or
12 the secretary may modify or rescind the order at any time prior to
13 commencement of the court hearing.

14 (c) The issues for the court to determine are whether to continue
15 the detention of the person for inpatient treatment or whether the
16 court should reinstate or modify the person's less restrictive
17 alternative order or order the person's detention for inpatient
18 treatment. To continue detention after the one hundred twenty hour
19 period, the court must find that the person, as a result of a
20 behavioral health disorder, presents a likelihood of serious harm or
21 is gravely disabled and, after considering less restrictive
22 alternatives to involuntary detention and treatment, that no such
23 alternatives are in the best interest of the person or others.

24 **Sec. 16.** RCW 71.34.755 and 2020 c 302 s 96 are each amended to
25 read as follows:

26 (1) Less restrictive alternative treatment, at a minimum, must
27 include the following services:

28 (a) Assignment of a care coordinator;

29 (b) An intake evaluation with the provider of the less
30 restrictive alternative treatment;

31 (c) A psychiatric evaluation, a substance use disorder
32 evaluation, or both;

33 (d) A schedule of regular contacts with the provider of the less
34 restrictive alternative treatment services for the duration of the
35 order;

36 (e) A transition plan addressing access to continued services at
37 the expiration of the order;

38 (f) An individual crisis plan; and

1 (g) Notification to the care coordinator assigned in (a) of this
2 subsection if reasonable efforts to engage the client fail to produce
3 substantial compliance with court-ordered treatment conditions.

4 (2) Less restrictive alternative treatment may include the
5 following additional services:

6 (a) Medication management;

7 (b) Psychotherapy;

8 (c) Nursing;

9 (d) Substance (~~abuse~~) use disorder counseling;

10 (e) Residential treatment; (~~and~~)

11 (f) Support for housing, benefits, education, and employment; and

12 (g) Periodic court review.

13 (3) If the minor was provided with involuntary medication during
14 the involuntary commitment period, the less restrictive alternative
15 treatment order may authorize the less restrictive alternative
16 treatment provider or its designee to administer involuntary
17 antipsychotic medication to the person if the provider has attempted
18 and failed to obtain the informed consent of the person and there is
19 a concurring medical opinion approving the medication by a
20 psychiatrist, physician assistant working with a supervising
21 psychiatrist, psychiatric advanced registered nurse practitioner, or
22 physician or physician assistant in consultation with an independent
23 mental health professional with prescribing authority.

24 (4) Less restrictive alternative treatment must be administered
25 by a provider that is certified or licensed to provide or coordinate
26 the full scope of services required under the less restrictive
27 alternative order and that has agreed to assume this responsibility.

28 (5) The care coordinator assigned to a minor ordered to less
29 restrictive alternative treatment must submit an individualized plan
30 for the minor's treatment services to the court that entered the
31 order. An initial plan must be submitted as soon as possible
32 following the intake evaluation and a revised plan must be submitted
33 upon any subsequent modification in which a type of service is
34 removed from or added to the treatment plan.

35 (6) A care coordinator may disclose information and records
36 related to mental health services pursuant to RCW 70.02.230(2)(k) for
37 purposes of implementing less restrictive alternative treatment.

38 (7) For the purpose of this section, "care coordinator" means a
39 clinical practitioner who coordinates the activities of less
40 restrictive alternative treatment. The care coordinator coordinates

1 activities with the designated crisis responders that are necessary
2 for enforcement and continuation of less restrictive alternative
3 treatment orders and is responsible for coordinating service
4 activities with other agencies and establishing and maintaining a
5 therapeutic relationship with the individual on a continuing basis.

6 **Sec. 17.** RCW 70.02.230 and 2020 c 256 s 402 are each amended to
7 read as follows:

8 (1) (~~Except as provided in this section, RCW 70.02.050,~~
9 ~~71.05.445, 74.09.295, 70.02.210, 70.02.240, 70.02.250, 70.02.260, and~~
10 ~~70.02.265, or pursuant to a valid authorization under RCW 70.02.030,~~
11 ~~the~~) The fact of admission to a provider for mental health services
12 and all information and records compiled, obtained, or maintained in
13 the course of providing mental health services to either voluntary or
14 involuntary recipients of services at public or private agencies
15 ((must be confidential)) may not be disclosed except as provided in
16 this section, RCW 70.02.050, 71.05.445, 74.09.295, 70.02.210,
17 70.02.240, 70.02.250, 70.02.260, and 70.02.265, or under a valid
18 authorization under RCW 70.02.030.

19 (2) Information and records related to mental health services,
20 other than those obtained through treatment under chapter 71.34 RCW,
21 may be disclosed (~~only~~):

22 (a) In communications between qualified professional persons to
23 meet the requirements of chapter 71.05 RCW, including Indian health
24 care providers, in the provision of services or appropriate
25 referrals, or in the course of guardianship proceedings if provided
26 to a professional person:

- 27 (i) Employed by the facility;
28 (ii) Who has medical responsibility for the patient's care;
29 (iii) Who is a designated crisis responder;
30 (iv) Who is providing services under chapter 71.24 RCW;
31 (v) Who is employed by a state or local correctional facility
32 where the person is confined or supervised; or
33 (vi) Who is providing evaluation, treatment, or follow-up
34 services under chapter 10.77 RCW;

35 (b) When the communications regard the special needs of a patient
36 and the necessary circumstances giving rise to such needs and the
37 disclosure is made by a facility providing services to the operator
38 of a facility in which the patient resides or will reside;

1 (c)(i) When the person receiving services, or his or her
2 guardian, designates persons to whom information or records may be
3 released, or if the person is a minor, when his or her parents make
4 such a designation;

5 (ii) A public or private agency shall release to a person's next
6 of kin, attorney, personal representative, guardian, or conservator,
7 if any:

8 (A) The information that the person is presently a patient in the
9 facility or that the person is seriously physically ill;

10 (B) A statement evaluating the mental and physical condition of
11 the patient, and a statement of the probable duration of the
12 patient's confinement, if such information is requested by the next
13 of kin, attorney, personal representative, guardian, or conservator;
14 and

15 (iii) Other information requested by the next of kin or attorney
16 as may be necessary to decide whether or not proceedings should be
17 instituted to appoint a guardian or conservator;

18 (d)(i) To the courts, including tribal courts, as necessary to
19 the administration of chapter 71.05 RCW or to a court ordering an
20 evaluation or treatment under chapter 10.77 RCW solely for the
21 purpose of preventing the entry of any evaluation or treatment order
22 that is inconsistent with any order entered under chapter 71.05 RCW.

23 (ii) To a court or its designee in which a motion under chapter
24 10.77 RCW has been made for involuntary medication of a defendant for
25 the purpose of competency restoration.

26 (iii) Disclosure under this subsection is mandatory for the
27 purpose of the federal health insurance portability and
28 accountability act;

29 (e)(i) When a mental health professional or designated crisis
30 responder is requested by a representative of a law enforcement or
31 corrections agency, including a police officer, sheriff, community
32 corrections officer, a municipal attorney, or prosecuting attorney to
33 undertake an investigation or provide treatment under RCW 71.05.150,
34 10.31.110, or 71.05.153, the mental health professional or designated
35 crisis responder shall, if requested to do so, advise the
36 representative in writing of the results of the investigation
37 including a statement of reasons for the decision to detain or
38 release the person investigated. The written report must be submitted
39 within seventy-two hours of the completion of the investigation or

1 the request from the law enforcement or corrections representative,
2 whichever occurs later.

3 (ii) Disclosure under this subsection is mandatory for the
4 purposes of the federal health insurance portability and
5 accountability act;

6 (f) To the attorney of the detained person;

7 (g) To the prosecuting attorney as necessary to carry out the
8 responsibilities of the office under RCW 71.05.330(2),
9 71.05.340(1)(b), and 71.05.335. The prosecutor must be provided
10 access to records regarding the committed person's treatment and
11 prognosis, medication, behavior problems, and other records relevant
12 to the issue of whether treatment less restrictive than inpatient
13 treatment is in the best interest of the committed person or others.
14 Information must be disclosed only after giving notice to the
15 committed person and the person's counsel;

16 (h)(i) To appropriate law enforcement agencies and to a person,
17 when the identity of the person is known to the public or private
18 agency, whose health and safety has been threatened, or who is known
19 to have been repeatedly harassed, by the patient. The person may
20 designate a representative to receive the disclosure. The disclosure
21 must be made by the professional person in charge of the public or
22 private agency or his or her designee and must include the dates of
23 commitment, admission, discharge, or release, authorized or
24 unauthorized absence from the agency's facility, and only any other
25 information that is pertinent to the threat or harassment. The agency
26 or its employees are not civilly liable for the decision to disclose
27 or not, so long as the decision was reached in good faith and without
28 gross negligence.

29 (ii) Disclosure under this subsection is mandatory for the
30 purposes of the federal health insurance portability and
31 accountability act;

32 (i)(i) To appropriate corrections and law enforcement agencies
33 all necessary and relevant information in the event of a crisis or
34 emergent situation that poses a significant and imminent risk to the
35 public. The mental health service agency or its employees are not
36 civilly liable for the decision to disclose or not so long as the
37 decision was reached in good faith and without gross negligence.

38 (ii) Disclosure under this subsection is mandatory for the
39 purposes of the health insurance portability and accountability act;

1 (j) To the persons designated in RCW 71.05.425 for the purposes
2 described in those sections;

3 (k) By a care coordinator under RCW 71.05.585 assigned to a
4 person ordered to receive less restrictive alternative treatment for
5 the purpose of sharing information to parties necessary for the
6 implementation of proceedings under chapter 71.05 RCW;

7 (l) Upon the death of a person. The person's next of kin,
8 personal representative, guardian, or conservator, if any, must be
9 notified. Next of kin who are of legal age and competent must be
10 notified under this section in the following order: Spouse, parents,
11 children, brothers and sisters, and other relatives according to the
12 degree of relation. Access to all records and information compiled,
13 obtained, or maintained in the course of providing services to a
14 deceased patient are governed by RCW 70.02.140;

15 (~~(l)~~) (m) To mark headstones or otherwise memorialize patients
16 interred at state hospital cemeteries. The department of social and
17 health services shall make available the name, date of birth, and
18 date of death of patients buried in state hospital cemeteries fifty
19 years after the death of a patient;

20 (~~(m)~~) (n) To law enforcement officers and to prosecuting
21 attorneys as are necessary to enforce RCW 9.41.040(2)(a)(iv). The
22 extent of information that may be released is limited as follows:

23 (i) Only the fact, place, and date of involuntary commitment, an
24 official copy of any order or orders of commitment, and an official
25 copy of any written or oral notice of ineligibility to possess a
26 firearm that was provided to the person pursuant to RCW 9.41.047(1),
27 must be disclosed upon request;

28 (ii) The law enforcement and prosecuting attorneys may only
29 release the information obtained to the person's attorney as required
30 by court rule and to a jury or judge, if a jury is waived, that
31 presides over any trial at which the person is charged with violating
32 RCW 9.41.040(2)(a)(iv);

33 (iii) Disclosure under this subsection is mandatory for the
34 purposes of the federal health insurance portability and
35 accountability act;

36 (~~(n)~~) (o) When a patient would otherwise be subject to the
37 provisions of this section and disclosure is necessary for the
38 protection of the patient or others due to his or her unauthorized
39 disappearance from the facility, and his or her whereabouts is
40 unknown, notice of the disappearance, along with relevant

1 information, may be made to relatives, the department of corrections
2 when the person is under the supervision of the department, and
3 governmental law enforcement agencies designated by the physician or
4 psychiatric advanced registered nurse practitioner in charge of the
5 patient or the professional person in charge of the facility, or his
6 or her professional designee;

7 ~~((+o))~~ (p) Pursuant to lawful order of a court, including a
8 tribal court;

9 ~~((+p))~~ (q) To qualified staff members of the department, to the
10 authority, to behavioral health administrative services
11 organizations, to managed care organizations, to resource management
12 services responsible for serving a patient, or to service providers
13 designated by resource management services as necessary to determine
14 the progress and adequacy of treatment and to determine whether the
15 person should be transferred to a less restrictive or more
16 appropriate treatment modality or facility;

17 ~~((+q))~~ (r) Within the mental health service agency or Indian
18 health care provider facility where the patient is receiving
19 treatment, confidential information may be disclosed to persons
20 employed, serving in bona fide training programs, or participating in
21 supervised volunteer programs, at the facility when it is necessary
22 to perform their duties;

23 ~~((+r))~~ (s) Within the department and the authority as necessary
24 to coordinate treatment for mental illness, developmental
25 disabilities, ~~((alcoholism,))~~ or substance use disorder of persons
26 who are under the supervision of the department;

27 ~~((+s))~~ (t) Between the department of social and health services,
28 the department of children, youth, and families, and the health care
29 authority as necessary to coordinate treatment for mental illness,
30 developmental disabilities, ~~((alcoholism, or drug abuse))~~ or
31 substance use disorder of persons who are under the supervision of
32 the department of social and health services or the department of
33 children, youth, and families;

34 ~~((+t))~~ (u) To a licensed physician or psychiatric advanced
35 registered nurse practitioner who has determined that the life or
36 health of the person is in danger and that treatment without the
37 information and records related to mental health services could be
38 injurious to the patient's health. Disclosure must be limited to the
39 portions of the records necessary to meet the medical emergency;

1 (~~(u)~~) (v) (i) Consistent with the requirements of the federal
2 health insurance portability and accountability act, to:

3 (A) A health care provider, including an Indian health care
4 provider, who is providing care to a patient, or to whom a patient
5 has been referred for evaluation or treatment; or

6 (B) Any other person who is working in a care coordinator role
7 for a health care facility, health care provider, or Indian health
8 care provider, or is under an agreement pursuant to the federal
9 health insurance portability and accountability act with a health
10 care facility or a health care provider and requires the information
11 and records to assure coordinated care and treatment of that patient.

12 (ii) A person authorized to use or disclose information and
13 records related to mental health services under this subsection (2)
14 (~~(u)~~) (v) must take appropriate steps to protect the information
15 and records relating to mental health services.

16 (iii) Psychotherapy notes may not be released without
17 authorization of the patient who is the subject of the request for
18 release of information;

19 (~~(v)~~) (w) To administrative and office support staff designated
20 to obtain medical records for those licensed professionals listed in
21 (~~(u)~~) (v) of this subsection;

22 (~~(w)~~) (x) To a facility that is to receive a person who is
23 involuntarily committed under chapter 71.05 RCW, or upon transfer of
24 the person from one evaluation and treatment facility to another. The
25 release of records under this subsection is limited to the
26 information and records related to mental health services required by
27 law, a record or summary of all somatic treatments, and a discharge
28 summary. The discharge summary may include a statement of the
29 patient's problem, the treatment goals, the type of treatment which
30 has been provided, and recommendation for future treatment, but may
31 not include the patient's complete treatment record;

32 (~~(x)~~) (y) To the person's counsel or guardian ad litem, without
33 modification, at any time in order to prepare for involuntary
34 commitment or recommitment proceedings, reexaminations, appeals, or
35 other actions relating to detention, admission, commitment, or
36 patient's rights under chapter 71.05 RCW;

37 (~~(y)~~) (z) To staff members of the protection and advocacy
38 agency or to staff members of a private, nonprofit corporation for
39 the purpose of protecting and advocating the rights of persons with
40 mental disorders or developmental disabilities. Resource management

1 services may limit the release of information to the name, birthdate,
2 and county of residence of the patient, information regarding whether
3 the patient was voluntarily admitted, or involuntarily committed, the
4 date and place of admission, placement, or commitment, the name and
5 address of a guardian of the patient, and the date and place of the
6 guardian's appointment. Any staff member who wishes to obtain
7 additional information must notify the patient's resource management
8 services in writing of the request and of the resource management
9 services' right to object. The staff member shall send the notice by
10 mail to the guardian's address. If the guardian does not object in
11 writing within fifteen days after the notice is mailed, the staff
12 member may obtain the additional information. If the guardian objects
13 in writing within fifteen days after the notice is mailed, the staff
14 member may not obtain the additional information;

15 ~~((z))~~ (aa) To all current treating providers, including Indian
16 health care providers, of the patient with prescriptive authority who
17 have written a prescription for the patient within the last twelve
18 months. For purposes of coordinating health care, the department or
19 the authority may release without written authorization of the
20 patient, information acquired for billing and collection purposes as
21 described in RCW 70.02.050(1)(d). The department, or the authority,
22 if applicable, shall notify the patient that billing and collection
23 information has been released to named providers, and provide the
24 substance of the information released and the dates of such release.
25 Neither the department nor the authority may release counseling,
26 inpatient psychiatric hospitalization, or drug and alcohol treatment
27 information without a signed written release from the client;

28 ~~((aa))~~ (bb) (i) To the secretary of social and health services
29 and the director of the health care authority for either program
30 evaluation or research, or both so long as the secretary or director,
31 where applicable, adopts rules for the conduct of the evaluation or
32 research, or both. Such rules must include, but need not be limited
33 to, the requirement that all evaluators and researchers sign an oath
34 of confidentiality substantially as follows:

35 "As a condition of conducting evaluation or research concerning
36 persons who have received services from (fill in the facility,
37 agency, or person) I,, agree not to divulge, publish, or
38 otherwise make known to unauthorized persons or the public any
39 information obtained in the course of such evaluation or research

1 regarding persons who have received services such that the person who
2 received such services is identifiable.

3 I recognize that unauthorized release of confidential information
4 may subject me to civil liability under the provisions of state law.
5 /s/"

6 (ii) Nothing in this chapter may be construed to prohibit the
7 compilation and publication of statistical data for use by government
8 or researchers under standards, including standards to assure
9 maintenance of confidentiality, set forth by the secretary, or
10 director, where applicable;

11 (~~(bb)~~) (cc) To any person if the conditions in RCW 70.02.205
12 are met;

13 (~~(ee)~~) (dd) To the secretary of health for the purposes of the
14 maternal mortality review panel established in RCW 70.54.450; or

15 (~~(dd)~~) (ee) To a tribe or Indian health care provider to carry
16 out the requirements of RCW 71.05.150(~~(7)~~) (6).

17 (3) Whenever federal law or federal regulations restrict the
18 release of information contained in the information and records
19 related to mental health services of any patient who receives
20 treatment for a substance use disorder, the department or the
21 authority may restrict the release of the information as necessary to
22 comply with federal law and regulations.

23 (4) Civil liability and immunity for the release of information
24 about a particular person who is committed to the department of
25 social and health services or the authority under RCW 71.05.280(3)
26 and 71.05.320(4)(c) after dismissal of a sex offense as defined in
27 RCW 9.94A.030, is governed by RCW 4.24.550.

28 (5) The fact of admission to a provider of mental health
29 services, as well as all records, files, evidence, findings, or
30 orders made, prepared, collected, or maintained pursuant to chapter
31 71.05 RCW are not admissible as evidence in any legal proceeding
32 outside that chapter without the written authorization of the person
33 who was the subject of the proceeding except as provided in RCW
34 70.02.260, in a subsequent criminal prosecution of a person committed
35 pursuant to RCW 71.05.280(3) or 71.05.320(4)(c) on charges that were
36 dismissed pursuant to chapter 10.77 RCW due to incompetency to stand
37 trial, in a civil commitment proceeding pursuant to chapter 71.09
38 RCW, or, in the case of a minor, a guardianship or dependency
39 proceeding. The records and files maintained in any court proceeding

1 pursuant to chapter 71.05 RCW must be confidential and available
2 subsequent to such proceedings only to the person who was the subject
3 of the proceeding or his or her attorney. In addition, the court may
4 order the subsequent release or use of such records or files only
5 upon good cause shown if the court finds that appropriate safeguards
6 for strict confidentiality are and will be maintained.

7 (6) (a) Except as provided in RCW 4.24.550, any person may bring
8 an action against an individual who has willfully released
9 confidential information or records concerning him or her in
10 violation of the provisions of this section, for the greater of the
11 following amounts:

12 (i) One thousand dollars; or

13 (ii) Three times the amount of actual damages sustained, if any.

14 (b) It is not a prerequisite to recovery under this subsection
15 that the plaintiff suffered or was threatened with special, as
16 contrasted with general, damages.

17 (c) Any person may bring an action to enjoin the release of
18 confidential information or records concerning him or her or his or
19 her ward, in violation of the provisions of this section, and may in
20 the same action seek damages as provided in this subsection.

21 (d) The court may award to the plaintiff, should he or she
22 prevail in any action authorized by this subsection, reasonable
23 attorney fees in addition to those otherwise provided by law.

24 (e) If an action is brought under this subsection, no action may
25 be brought under RCW 70.02.170.

26 **Sec. 18.** RCW 70.02.240 and 2019 c 381 s 20 are each amended to
27 read as follows:

28 The fact of admission and all information and records related to
29 mental health services obtained through inpatient or outpatient
30 treatment of a minor under chapter 71.34 RCW must be kept
31 confidential, except as authorized by this section or under RCW
32 70.02.050, 70.02.210, 70.02.230, 70.02.250, 70.02.260, and 70.02.265.
33 Confidential information under this section may be disclosed only:

34 (1) In communications between mental health professionals to meet
35 the requirements of chapter 71.34 RCW, in the provision of services
36 to the minor, or in making appropriate referrals;

37 (2) In the course of guardianship or dependency proceedings;

1 (3) To the minor, the minor's parent, including those acting as a
2 parent as defined in RCW 71.34.020 for purposes of family-initiated
3 treatment, and the minor's attorney, subject to RCW 13.50.100;

4 (4) To the courts as necessary to administer chapter 71.34 RCW;

5 (5) By a care coordinator under RCW 71.34.755 assigned to a
6 person ordered to receive less restrictive alternative treatment for
7 the purpose of sharing information to parties necessary for the
8 implementation of proceedings under chapter 71.34 RCW;

9 (6) To law enforcement officers or public health officers as
10 necessary to carry out the responsibilities of their office. However,
11 only the fact and date of admission, and the date of discharge, the
12 name and address of the treatment provider, if any, and the last
13 known address must be disclosed upon request;

14 ((+6)) (7) To law enforcement officers, public health officers,
15 relatives, and other governmental law enforcement agencies, if a
16 minor has escaped from custody, disappeared from an evaluation and
17 treatment facility, violated conditions of a less restrictive
18 treatment order, or failed to return from an authorized leave, and
19 then only such information as may be necessary to provide for public
20 safety or to assist in the apprehension of the minor. The officers
21 are obligated to keep the information confidential in accordance with
22 this chapter;

23 ((+7)) (8) To the secretary of social and health services and
24 the director of the health care authority for assistance in data
25 collection and program evaluation or research so long as the
26 secretary or director, where applicable, adopts rules for the conduct
27 of such evaluation and research. The rules must include, but need not
28 be limited to, the requirement that all evaluators and researchers
29 sign an oath of confidentiality substantially as follows:

30 "As a condition of conducting evaluation or research concerning
31 persons who have received services from (fill in the facility,
32 agency, or person) I,, agree not to divulge, publish, or
33 otherwise make known to unauthorized persons or the public any
34 information obtained in the course of such evaluation or research
35 regarding minors who have received services in a manner such that the
36 minor is identifiable.

37 I recognize that unauthorized release of confidential information
38 may subject me to civil liability under state law.

39 /s/";

1 ~~((8))~~ (9) To appropriate law enforcement agencies, upon
2 request, all necessary and relevant information in the event of a
3 crisis or emergent situation that poses a significant and imminent
4 risk to the public. The mental health service agency or its employees
5 are not civilly liable for the decision to disclose or not, so long
6 as the decision was reached in good faith and without gross
7 negligence;

8 ~~((9))~~ (10) To appropriate law enforcement agencies and to a
9 person, when the identity of the person is known to the public or
10 private agency, whose health and safety has been threatened, or who
11 is known to have been repeatedly harassed, by the patient. The person
12 may designate a representative to receive the disclosure. The
13 disclosure must be made by the professional person in charge of the
14 public or private agency or his or her designee and must include the
15 dates of admission, discharge, authorized or unauthorized absence
16 from the agency's facility, and only any other information that is
17 pertinent to the threat or harassment. The agency or its employees
18 are not civilly liable for the decision to disclose or not, so long
19 as the decision was reached in good faith and without gross
20 negligence;

21 ~~((10))~~ (11) To a minor's next of kin, attorney, guardian, or
22 conservator, if any, the information that the minor is presently in
23 the facility or that the minor is seriously physically ill and a
24 statement evaluating the mental and physical condition of the minor
25 as well as a statement of the probable duration of the minor's
26 confinement;

27 ~~((11))~~ (12) Upon the death of a minor, to the minor's next of
28 kin;

29 ~~((12))~~ (13) To a facility in which the minor resides or will
30 reside;

31 ~~((13))~~ (14) To law enforcement officers and to prosecuting
32 attorneys as are necessary to enforce RCW 9.41.040(2)(a)(iv). The
33 extent of information that may be released is limited as follows:

34 (a) Only the fact, place, and date of involuntary commitment, an
35 official copy of any order or orders of commitment, and an official
36 copy of any written or oral notice of ineligibility to possess a
37 firearm that was provided to the person pursuant to RCW 9.41.047(1),
38 must be disclosed upon request;

1 (b) The law enforcement and prosecuting attorneys may only
2 release the information obtained to the person's attorney as required
3 by court rule and to a jury or judge, if a jury is waived, that
4 presides over any trial at which the person is charged with violating
5 RCW 9.41.040(2)(a)(iv);

6 (c) Disclosure under this subsection is mandatory for the
7 purposes of the federal health insurance portability and
8 accountability act;

9 (~~(14)~~) (15) This section may not be construed to prohibit the
10 compilation and publication of statistical data for use by government
11 or researchers under standards, including standards to assure
12 maintenance of confidentiality, set forth by the director of the
13 health care authority or the secretary of the department of social
14 and health services, where applicable. The fact of admission and all
15 information obtained pursuant to chapter 71.34 RCW are not admissible
16 as evidence in any legal proceeding outside chapter 71.34 RCW, except
17 guardianship or dependency, without the written consent of the minor
18 or the minor's parent;

19 (~~(15)~~) (16) For the purpose of a correctional facility
20 participating in the postinstitutional medical assistance system
21 supporting the expedited medical determinations and medical
22 suspensions as provided in RCW 74.09.555 and 74.09.295;

23 (~~(16)~~) (17) Pursuant to a lawful order of a court.

24 **Sec. 19.** RCW 71.05.425 and 2018 c 201 s 3019 are each amended to
25 read as follows:

26 (1)(a) Except as provided in subsection (2) of this section, at
27 the earliest possible date, and in no event later than thirty days
28 before conditional release, final release, authorized leave under RCW
29 71.05.325(2), or transfer to a facility other than a state mental
30 hospital, the superintendent shall send written notice of conditional
31 release, release, authorized leave, or transfer of a person committed
32 under RCW 71.05.280(3) or 71.05.320(4)(c) following dismissal of a
33 sex, violent, or felony harassment offense pursuant to RCW
34 10.77.086(4) to the following:

35 (i) The chief of police of the city, if any, in which the person
36 will reside;

37 (ii) The sheriff of the county in which the person will reside;

38 and

1 (iii) The prosecuting attorney of the county in which the
2 criminal charges against the committed person were dismissed.

3 (b) The same notice as required by (a) of this subsection shall
4 be sent to the following, if such notice has been requested in
5 writing about a specific person committed under RCW 71.05.280(3) or
6 71.05.320(4)(c) following dismissal of a sex, violent, or felony
7 harassment offense pursuant to RCW 10.77.086(4):

8 (i) The victim of the sex, violent, or felony harassment offense
9 that was dismissed pursuant to RCW 10.77.086(4) preceding commitment
10 under RCW 71.05.280(3) or 71.05.320(4)(c) or the victim's next of kin
11 if the crime was a homicide;

12 (ii) Any witnesses who testified against the person in any court
13 proceedings;

14 (iii) Any person specified in writing by the prosecuting
15 attorney. Information regarding victims, next of kin, or witnesses
16 requesting the notice, information regarding any other person
17 specified in writing by the prosecuting attorney to receive the
18 notice, and the notice are confidential and shall not be available to
19 the person committed under this chapter; and

20 (iv) The chief of police of the city, if any, and the sheriff of
21 the county, if any, which had jurisdiction of the person on the date
22 of the applicable offense.

23 (c) The thirty-day notice requirements contained in this
24 subsection shall not apply to emergency medical transfers.

25 (d) The existence of the notice requirements in this subsection
26 will not require any extension of the release date in the event the
27 release plan changes after notification.

28 (2) If a person committed under RCW 71.05.280(3) or
29 71.05.320(4)(c) following dismissal of a sex, violent, or felony
30 harassment offense pursuant to RCW 10.77.086(4) escapes, the
31 superintendent shall immediately notify, by the most reasonable and
32 expedient means available, the chief of police of the city and the
33 sheriff of the county in which the person escaped and in which the
34 person resided immediately before the person's arrest and the
35 prosecuting attorney of the county in which the criminal charges
36 against the committed person were dismissed. If previously requested,
37 the superintendent shall also notify the witnesses and the victim of
38 the sex, violent, or felony harassment offense that was dismissed
39 pursuant to RCW 10.77.086(4) preceding commitment under RCW
40 71.05.280(3) or 71.05.320(4) or the victim's next of kin if the crime

1 was a homicide. In addition, the secretary shall also notify
2 appropriate parties pursuant to RCW 70.02.230(2)((-n)) (o). If the
3 person is recaptured, the superintendent shall send notice to the
4 persons designated in this subsection as soon as possible but in no
5 event later than two working days after the department of social and
6 health services learns of such recapture.

7 (3) If the victim, the victim's next of kin, or any witness is
8 under the age of sixteen, the notice required by this section shall
9 be sent to the parent or legal guardian of the child.

10 (4) The superintendent shall send the notices required by this
11 chapter to the last address provided to the department of social and
12 health services by the requesting party. The requesting party shall
13 furnish the department of social and health services with a current
14 address.

15 (5) For purposes of this section the following terms have the
16 following meanings:

17 (a) "Violent offense" means a violent offense under RCW
18 9.94A.030;

19 (b) "Sex offense" means a sex offense under RCW 9.94A.030;

20 (c) "Next of kin" means a person's spouse, state registered
21 domestic partner, parents, siblings, and children;

22 (d) "Felony harassment offense" means a crime of harassment as
23 defined in RCW 9A.46.060 that is a felony.

24 **Sec. 20.** RCW 71.05.020 and 2020 c 302 s 3, 2020 c 256 s 301, and
25 2020 c 5 s 1 are each reenacted and amended to read as follows:

26 The definitions in this section apply throughout this chapter
27 unless the context clearly requires otherwise.

28 (1) "Admission" or "admit" means a decision by a physician,
29 physician assistant, or psychiatric advanced registered nurse
30 practitioner that a person should be examined or treated as a patient
31 in a hospital;

32 (2) "Alcoholism" means a disease, characterized by a dependency
33 on alcoholic beverages, loss of control over the amount and
34 circumstances of use, symptoms of tolerance, physiological or
35 psychological withdrawal, or both, if use is reduced or discontinued,
36 and impairment of health or disruption of social or economic
37 functioning;

38 (3) "Antipsychotic medications" means that class of drugs
39 primarily used to treat serious manifestations of mental illness

1 associated with thought disorders, which includes, but is not limited
2 to atypical antipsychotic medications;

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

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

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

11 (7) "Behavioral health disorder" means either a mental disorder
12 as defined in this section, a substance use disorder as defined in
13 this section, or a co-occurring mental disorder and substance use
14 disorder;

15 (8) "Behavioral health service provider" means a public or
16 private agency that provides mental health, substance use disorder,
17 or co-occurring disorder services to persons with behavioral health
18 disorders as defined under this section and receives funding from
19 public sources. This includes, but is not limited to(~~(hospitals))~~;
20 Hospitals licensed under chapter 70.41 RCW(~~(τ)~~);
21 evaluation and treatment facilities as defined in this section(~~(τ)~~);
22 community mental health service delivery systems or community behavioral health
23 programs as defined in RCW 71.24.025(~~(τ)~~); licensed or certified
24 behavioral health agencies under RCW 71.24.037; facilities conducting
25 competency evaluations and restoration under chapter 10.77 RCW(~~(τ)~~);
26 approved substance use disorder treatment programs as defined in this
27 section(~~(τ)~~);
28 secure withdrawal management and stabilization
29 facilities as defined in this section(~~(τ)~~);
30 and correctional facilities operated by state and local governments;

31 (9) "Co-occurring disorder specialist" means an individual
32 possessing an enhancement granted by the department of health under
33 chapter 18.205 RCW that certifies the individual to provide substance
34 use disorder counseling subject to the practice limitations under RCW
35 18.205.105;

36 (10) "Commitment" means the determination by a court that a
37 person should be detained for a period of either evaluation or
38 treatment, or both, in an inpatient or a less restrictive setting;

39 (11) "Conditional release" means a revocable modification of a
commitment, which may be revoked upon violation of any of its terms;

1 (12) "Crisis stabilization unit" means a short-term facility or a
2 portion of a facility licensed or certified by the department, such
3 as an evaluation and treatment facility or a hospital, which has been
4 designed to assess, diagnose, and treat individuals experiencing an
5 acute crisis without the use of long-term hospitalization;

6 (13) "Custody" means involuntary detention under the provisions
7 of this chapter or chapter 10.77 RCW, uninterrupted by any period of
8 unconditional release from commitment from a facility providing
9 involuntary care and treatment;

10 (14) "Department" means the department of health;

11 (15) "Designated crisis responder" means a mental health
12 professional appointed by the county, by an entity appointed by the
13 county, or by the authority in consultation with a federally
14 recognized Indian tribe or after meeting and conferring with an
15 Indian health care provider, to perform the duties specified in this
16 chapter;

17 (16) "Detention" or "detain" means the lawful confinement of a
18 person, under the provisions of this chapter;

19 (17) "Developmental disabilities professional" means a person who
20 has specialized training and three years of experience in directly
21 treating or working with persons with developmental disabilities and
22 is a psychiatrist, physician assistant working with a supervising
23 psychiatrist, psychologist, psychiatric advanced registered nurse
24 practitioner, or social worker, and such other developmental
25 disabilities professionals as may be defined by rules adopted by the
26 secretary of the department of social and health services;

27 (18) "Developmental disability" means that condition defined in
28 RCW 71A.10.020(5);

29 (19) "Director" means the director of the authority;

30 (20) "Discharge" means the termination of hospital medical
31 authority. The commitment may remain in place, be terminated, or be
32 amended by court order;

33 (21) "Drug addiction" means a disease, characterized by a
34 dependency on psychoactive chemicals, loss of control over the amount
35 and circumstances of use, symptoms of tolerance, physiological or
36 psychological withdrawal, or both, if use is reduced or discontinued,
37 and impairment of health or disruption of social or economic
38 functioning;

39 (22) "Evaluation and treatment facility" means any facility which
40 can provide directly, or by direct arrangement with other public or

1 private agencies, emergency evaluation and treatment, outpatient
2 care, and timely and appropriate inpatient care to persons suffering
3 from a mental disorder, and which is licensed or certified as such by
4 the department. The authority may certify single beds as temporary
5 evaluation and treatment beds under RCW 71.05.745. A physically
6 separate and separately operated portion of a state hospital may be
7 designated as an evaluation and treatment facility. A facility which
8 is part of, or operated by, the department of social and health
9 services or any federal agency will not require certification. No
10 correctional institution or facility, or jail, shall be an evaluation
11 and treatment facility within the meaning of this chapter;

12 (23) "Gravely disabled" means a condition in which a person, as a
13 result of a behavioral health disorder: (a) Is in danger of serious
14 physical harm resulting from a failure to provide for his or her
15 essential human needs of health or safety; or (b) manifests severe
16 deterioration in routine functioning evidenced by repeated and
17 escalating loss of cognitive or volitional control over his or her
18 actions and is not receiving such care as is essential for his or her
19 health or safety;

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

28 (25) "Hearing" means any proceeding conducted in open court that
29 conforms to the requirements of RCW 71.05.820;

30 (26) "History of one or more violent acts" refers to the period
31 of time ten years prior to the filing of a petition under this
32 chapter, excluding any time spent, but not any violent acts
33 committed, in a behavioral health facility, or in confinement as a
34 result of a criminal conviction;

35 (27) "Imminent" means the state or condition of being likely to
36 occur at any moment or near at hand, rather than distant or remote;

37 (28) "In need of assisted outpatient behavioral health treatment"
38 means that a person, as a result of a behavioral health disorder: (a)
39 Has been committed by a court to detention for involuntary behavioral
40 health treatment during the preceding thirty-six months; (b) is

1 unlikely to voluntarily participate in outpatient treatment without
2 an order for less restrictive alternative treatment, based on a
3 history of nonadherence with treatment or in view of the person's
4 current behavior; (c) is likely to benefit from less restrictive
5 alternative treatment; and (d) requires less restrictive alternative
6 treatment to prevent a relapse, decompensation, or deterioration that
7 is likely to result in the person presenting a likelihood of serious
8 harm or the person becoming gravely disabled within a reasonably
9 short period of time;

10 (29) "Individualized service plan" means a plan prepared by a
11 developmental disabilities professional with other professionals as a
12 team, for a person with developmental disabilities, which shall
13 state:

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

16 (b) The conditions and strategies necessary to achieve the
17 purposes of habilitation;

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

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

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

23 (f) Where relevant in light of past criminal behavior and due
24 consideration for public safety, the criteria for proposed movement
25 to less-restrictive settings, criteria for proposed eventual
26 discharge or release, and a projected possible date for discharge or
27 release; and

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

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

33 (31) "Judicial commitment" means a commitment by a court pursuant
34 to the provisions of this chapter;

35 (32) "Legal counsel" means attorneys and staff employed by county
36 prosecutor offices or the state attorney general acting in their
37 capacity as legal representatives of public behavioral health service
38 providers under RCW 71.05.130;

39 (33) "Less restrictive alternative treatment" means a program of
40 individualized treatment in a less restrictive setting than inpatient

1 treatment that includes the services described in RCW 71.05.585. This
2 term includes: Treatment pursuant to a less restrictive alternative
3 treatment order under RCW 71.05.240 or 71.05.320; treatment pursuant
4 to a conditional release under RCW 71.05.340; and treatment pursuant
5 to an assisted outpatient behavioral health treatment order under RCW
6 71.05.148;

7 (34) "Licensed physician" means a person licensed to practice
8 medicine or osteopathic medicine and surgery in the state of
9 Washington;

10 (35) "Likelihood of serious harm" means:

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

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

22 (36) "Medical clearance" means a physician or other health care
23 provider has determined that a person is medically stable and ready
24 for referral to the designated crisis responder;

25 (37) "Mental disorder" means any organic, mental, or emotional
26 impairment which has substantial adverse effects on a person's
27 cognitive or volitional functions;

28 (38) "Mental health professional" means a psychiatrist,
29 psychologist, physician assistant working with a supervising
30 psychiatrist, psychiatric advanced registered nurse practitioner,
31 psychiatric nurse, or social worker, and such other mental health
32 professionals as may be defined by rules adopted by the secretary
33 pursuant to the provisions of this chapter;

34 (39) "Peace officer" means a law enforcement official of a public
35 agency or governmental unit, and includes persons specifically given
36 peace officer powers by any state law, local ordinance, or judicial
37 order of appointment;

38 (40) "Physician assistant" means a person licensed as a physician
39 assistant under chapter 18.57A or 18.71A RCW;

1 (41) "Private agency" means any person, partnership, corporation,
2 or association that is not a public agency, whether or not financed
3 in whole or in part by public funds, which constitutes an evaluation
4 and treatment facility or private institution, or hospital, or
5 approved substance use disorder treatment program, which is conducted
6 for, or includes a department or ward conducted for, the care and
7 treatment of persons with behavioral health disorders;

8 (42) "Professional person" means a mental health professional,
9 substance use disorder professional, or designated crisis responder
10 and shall also mean a physician, physician assistant, psychiatric
11 advanced registered nurse practitioner, registered nurse, and such
12 others as may be defined by rules adopted by the secretary pursuant
13 to the provisions of this chapter;

14 (43) "Psychiatric advanced registered nurse practitioner" means a
15 person who is licensed as an advanced registered nurse practitioner
16 pursuant to chapter 18.79 RCW; and who is board certified in advanced
17 practice psychiatric and mental health nursing;

18 (44) "Psychiatrist" means a person having a license as a
19 physician and surgeon in this state who has in addition completed
20 three years of graduate training in psychiatry in a program approved
21 by the American medical association or the American osteopathic
22 association and is certified or eligible to be certified by the
23 American board of psychiatry and neurology;

24 (45) "Psychologist" means a person who has been licensed as a
25 psychologist pursuant to chapter 18.83 RCW;

26 (46) "Public agency" means any evaluation and treatment facility
27 or institution, secure withdrawal management and stabilization
28 facility, approved substance use disorder treatment program, or
29 hospital which is conducted for, or includes a department or ward
30 conducted for, the care and treatment of persons with behavioral
31 health disorders, if the agency is operated directly by federal,
32 state, county, or municipal government, or a combination of such
33 governments;

34 (47) "Release" means legal termination of the commitment under
35 the provisions of this chapter;

36 (48) "Resource management services" has the meaning given in
37 chapter 71.24 RCW;

38 (49) "Secretary" means the secretary of the department of health,
39 or his or her designee;

1 (50) "Secure withdrawal management and stabilization facility"
2 means a facility operated by either a public or private agency or by
3 the program of an agency which provides care to voluntary individuals
4 and individuals involuntarily detained and committed under this
5 chapter for whom there is a likelihood of serious harm or who are
6 gravely disabled due to the presence of a substance use disorder.
7 Secure withdrawal management and stabilization facilities must:

8 (a) Provide the following services:

9 (i) Assessment and treatment, provided by certified substance use
10 disorder professionals or co-occurring disorder specialists;

11 (ii) Clinical stabilization services;

12 (iii) Acute or subacute detoxification services for intoxicated
13 individuals; and

14 (iv) Discharge assistance provided by certified substance use
15 disorder professionals or co-occurring disorder specialists,
16 including facilitating transitions to appropriate voluntary or
17 involuntary inpatient services or to less restrictive alternatives as
18 appropriate for the individual;

19 (b) Include security measures sufficient to protect the patients,
20 staff, and community; and

21 (c) Be licensed or certified as such by the department of health;

22 (51) "Social worker" means a person with a master's or further
23 advanced degree from a social work educational program accredited and
24 approved as provided in RCW 18.320.010;

25 (52) "Substance use disorder" means a cluster of cognitive,
26 behavioral, and physiological symptoms indicating that an individual
27 continues using the substance despite significant substance-related
28 problems. The diagnosis of a substance use disorder is based on a
29 pathological pattern of behaviors related to the use of the
30 substances;

31 (53) "Substance use disorder professional" means a person
32 certified as a substance use disorder professional by the department
33 of health under chapter 18.205 RCW;

34 (54) "Therapeutic court personnel" means the staff of a mental
35 health court or other therapeutic court which has jurisdiction over
36 defendants who are dually diagnosed with mental disorders, including
37 court personnel, probation officers, a court monitor, prosecuting
38 attorney, or defense counsel acting within the scope of therapeutic
39 court duties;

1 (55) "Treatment records" include registration and all other
2 records concerning persons who are receiving or who at any time have
3 received services for behavioral health disorders, which are
4 maintained by the department of social and health services, the
5 department, the authority, behavioral health administrative services
6 organizations and their staffs, managed care organizations and their
7 staffs, and by treatment facilities. Treatment records include mental
8 health information contained in a medical bill including but not
9 limited to mental health drugs, a mental health diagnosis, provider
10 name, and dates of service stemming from a medical service. Treatment
11 records do not include notes or records maintained for personal use
12 by a person providing treatment services for the department of social
13 and health services, the department, the authority, behavioral health
14 administrative services organizations, managed care organizations, or
15 a treatment facility if the notes or records are not available to
16 others;

17 (56) "Triage facility" means a short-term facility or a portion
18 of a facility licensed or certified by the department, which is
19 designed as a facility to assess and stabilize an individual or
20 determine the need for involuntary commitment of an individual, and
21 must meet department residential treatment facility standards. A
22 triage facility may be structured as a voluntary or involuntary
23 placement facility;

24 (57) "Video," unless the context clearly indicates otherwise,
25 means the delivery of behavioral health services through the use of
26 interactive audio and video technology, permitting real-time
27 communication between a person and a designated crisis responder, for
28 the purpose of evaluation. "Video" does not include the use of audio-
29 only telephone, facsimile, email, or store and forward technology.
30 "Store and forward technology" means use of an asynchronous
31 transmission of a person's medical information from a mental health
32 service provider to the designated crisis responder which results in
33 medical diagnosis, consultation, or treatment;

34 (58) "Violent act" means behavior that resulted in homicide,
35 attempted suicide, injury, or substantial loss or damage to
36 property(†

37 ~~(59) "Written order of apprehension" means an order of the court~~
38 ~~for a peace officer to deliver the named person in the order to a~~
39 ~~facility or emergency room as determined by the designated crisis~~

1 responder. Such orders shall be entered into the Washington crime
2 information center database)).

3 **Sec. 21.** RCW 71.05.020 and 2020 c 302 s 3, 2020 c 256 s 301,
4 2020 c 80 s 51, and 2020 c 5 s 1 are each reenacted and amended to
5 read as follows:

6 The definitions in this section apply throughout this chapter
7 unless the context clearly requires otherwise.

8 (1) "Admission" or "admit" means a decision by a physician,
9 physician assistant, or psychiatric advanced registered nurse
10 practitioner that a person should be examined or treated as a patient
11 in a hospital;

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

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

22 (4) "Approved substance use disorder treatment program" means a
23 program for persons with a substance use disorder provided by a
24 treatment program certified by the department as meeting standards
25 adopted under chapter 71.24 RCW;

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

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

30 (7) "Behavioral health disorder" means either a mental disorder
31 as defined in this section, a substance use disorder as defined in
32 this section, or a co-occurring mental disorder and substance use
33 disorder;

34 (8) "Behavioral health service provider" means a public or
35 private agency that provides mental health, substance use disorder,
36 or co-occurring disorder services to persons with behavioral health
37 disorders as defined under this section and receives funding from
38 public sources. This includes, but is not limited to(~~(, hospitals))~~;
39 Hospitals licensed under chapter 70.41 RCW(~~(,)~~); evaluation and

1 treatment facilities as defined in this section((τ)); community
2 mental health service delivery systems or community behavioral health
3 programs as defined in RCW 71.24.025((τ)); licensed or certified
4 behavioral health agencies under RCW 71.24.037; facilities conducting
5 competency evaluations and restoration under chapter 10.77 RCW((τ));
6 approved substance use disorder treatment programs as defined in this
7 section((τ)); secure withdrawal management and stabilization
8 facilities as defined in this section((τ)); and correctional
9 facilities operated by state and local governments;

10 (9) "Co-occurring disorder specialist" means an individual
11 possessing an enhancement granted by the department of health under
12 chapter 18.205 RCW that certifies the individual to provide substance
13 use disorder counseling subject to the practice limitations under RCW
14 18.205.105;

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

18 (11) "Conditional release" means a revocable modification of a
19 commitment, which may be revoked upon violation of any of its terms;

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

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

29 (14) "Department" means the department of health;

30 (15) "Designated crisis responder" means a mental health
31 professional appointed by the county, by an entity appointed by the
32 county, or by the authority in consultation with a federally
33 recognized Indian tribe or after meeting and conferring with an
34 Indian health care provider, to perform the duties specified in this
35 chapter;

36 (16) "Detention" or "detain" means the lawful confinement of a
37 person, under the provisions of this chapter;

38 (17) "Developmental disabilities professional" means a person who
39 has specialized training and three years of experience in directly
40 treating or working with persons with developmental disabilities and

1 is a psychiatrist, physician assistant working with a supervising
2 psychiatrist, psychologist, psychiatric advanced registered nurse
3 practitioner, or social worker, and such other developmental
4 disabilities professionals as may be defined by rules adopted by the
5 secretary of the department of social and health services;

6 (18) "Developmental disability" means that condition defined in
7 RCW 71A.10.020(5);

8 (19) "Director" means the director of the authority;

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

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

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

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

39 (24) "Habilitative services" means those services provided by
40 program personnel to assist persons in acquiring and maintaining life

1 skills and in raising their levels of physical, mental, social, and
2 vocational functioning. Habilitative services include education,
3 training for employment, and therapy. The habilitative process shall
4 be undertaken with recognition of the risk to the public safety
5 presented by the person being assisted as manifested by prior charged
6 criminal conduct;

7 (25) "Hearing" means any proceeding conducted in open court that
8 conforms to the requirements of RCW 71.05.820;

9 (26) "History of one or more violent acts" refers to the period
10 of time ten years prior to the filing of a petition under this
11 chapter, excluding any time spent, but not any violent acts
12 committed, in a behavioral health facility, or in confinement as a
13 result of a criminal conviction;

14 (27) "Imminent" means the state or condition of being likely to
15 occur at any moment or near at hand, rather than distant or remote;

16 (28) "In need of assisted outpatient behavioral health treatment"
17 means that a person, as a result of a behavioral health disorder: (a)
18 Has been committed by a court to detention for involuntary behavioral
19 health treatment during the preceding thirty-six months; (b) is
20 unlikely to voluntarily participate in outpatient treatment without
21 an order for less restrictive alternative treatment, based on a
22 history of nonadherence with treatment or in view of the person's
23 current behavior; (c) is likely to benefit from less restrictive
24 alternative treatment; and (d) requires less restrictive alternative
25 treatment to prevent a relapse, decompensation, or deterioration that
26 is likely to result in the person presenting a likelihood of serious
27 harm or the person becoming gravely disabled within a reasonably
28 short period of time;

29 (29) "Individualized service plan" means a plan prepared by a
30 developmental disabilities professional with other professionals as a
31 team, for a person with developmental disabilities, which shall
32 state:

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

35 (b) The conditions and strategies necessary to achieve the
36 purposes of habilitation;

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

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

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

2 (f) Where relevant in light of past criminal behavior and due
3 consideration for public safety, the criteria for proposed movement
4 to less-restrictive settings, criteria for proposed eventual
5 discharge or release, and a projected possible date for discharge or
6 release; and

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

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

12 (31) "Judicial commitment" means a commitment by a court pursuant
13 to the provisions of this chapter;

14 (32) "Legal counsel" means attorneys and staff employed by county
15 prosecutor offices or the state attorney general acting in their
16 capacity as legal representatives of public behavioral health service
17 providers under RCW 71.05.130;

18 (33) "Less restrictive alternative treatment" means a program of
19 individualized treatment in a less restrictive setting than inpatient
20 treatment that includes the services described in RCW 71.05.585. This
21 term includes: Treatment pursuant to a less restrictive alternative
22 treatment order under RCW 71.05.240 or 71.05.320; treatment pursuant
23 to a conditional release under RCW 71.05.340; and treatment pursuant
24 to an assisted outpatient behavioral health treatment order under RCW
25 71.05.148;

26 (34) "Licensed physician" means a person licensed to practice
27 medicine or osteopathic medicine and surgery in the state of
28 Washington;

29 (35) "Likelihood of serious harm" means:

30 (a) A substantial risk that: (i) Physical harm will be inflicted
31 by a person upon his or her own person, as evidenced by threats or
32 attempts to commit suicide or inflict physical harm on oneself; (ii)
33 physical harm will be inflicted by a person upon another, as
34 evidenced by behavior which has caused such harm or which places
35 another person or persons in reasonable fear of sustaining such harm;
36 or (iii) physical harm will be inflicted by a person upon the
37 property of others, as evidenced by behavior which has caused
38 substantial loss or damage to the property of others; or

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

1 (36) "Medical clearance" means a physician or other health care
2 provider has determined that a person is medically stable and ready
3 for referral to the designated crisis responder;

4 (37) "Mental disorder" means any organic, mental, or emotional
5 impairment which has substantial adverse effects on a person's
6 cognitive or volitional functions;

7 (38) "Mental health professional" means a psychiatrist,
8 psychologist, physician assistant working with a supervising
9 psychiatrist, psychiatric advanced registered nurse practitioner,
10 psychiatric nurse, or social worker, and such other mental health
11 professionals as may be defined by rules adopted by the secretary
12 pursuant to the provisions of this chapter;

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

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

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

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

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

36 (44) "Psychiatrist" means a person having a license as a
37 physician and surgeon in this state who has in addition completed
38 three years of graduate training in psychiatry in a program approved
39 by the American medical association or the American osteopathic

1 association and is certified or eligible to be certified by the
2 American board of psychiatry and neurology;

3 (45) "Psychologist" means a person who has been licensed as a
4 psychologist pursuant to chapter 18.83 RCW;

5 (46) "Public agency" means any evaluation and treatment facility
6 or institution, secure withdrawal management and stabilization
7 facility, approved substance use disorder treatment program, or
8 hospital which is conducted for, or includes a department or ward
9 conducted for, the care and treatment of persons with behavioral
10 health disorders, if the agency is operated directly by federal,
11 state, county, or municipal government, or a combination of such
12 governments;

13 (47) "Release" means legal termination of the commitment under
14 the provisions of this chapter;

15 (48) "Resource management services" has the meaning given in
16 chapter 71.24 RCW;

17 (49) "Secretary" means the secretary of the department of health,
18 or his or her designee;

19 (50) "Secure withdrawal management and stabilization facility"
20 means a facility operated by either a public or private agency or by
21 the program of an agency which provides care to voluntary individuals
22 and individuals involuntarily detained and committed under this
23 chapter for whom there is a likelihood of serious harm or who are
24 gravely disabled due to the presence of a substance use disorder.
25 Secure withdrawal management and stabilization facilities must:

26 (a) Provide the following services:

27 (i) Assessment and treatment, provided by certified substance use
28 disorder professionals or co-occurring disorder specialists;

29 (ii) Clinical stabilization services;

30 (iii) Acute or subacute detoxification services for intoxicated
31 individuals; and

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

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

39 (c) Be licensed or certified as such by the department of health;

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

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

10 (53) "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 (54) "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 (55) "Treatment records" include registration and all other
20 records concerning persons who are receiving or who at any time have
21 received services for behavioral health disorders, which are
22 maintained by the department of social and health services, the
23 department, the authority, behavioral health administrative services
24 organizations and their staffs, managed care organizations and their
25 staffs, and by treatment facilities. Treatment records include mental
26 health information contained in a medical bill including but not
27 limited to mental health drugs, a mental health diagnosis, provider
28 name, and dates of service stemming from a medical service. Treatment
29 records do not include notes or records maintained for personal use
30 by a person providing treatment services for the department of social
31 and health services, the department, the authority, behavioral health
32 administrative services organizations, managed care organizations, or
33 a treatment facility if the notes or records are not available to
34 others;

35 (56) "Triage facility" means a short-term facility or a portion
36 of a facility licensed or certified by the department, which is
37 designed as a facility to assess and stabilize an individual or
38 determine the need for involuntary commitment of an individual, and
39 must meet department residential treatment facility standards. A

1 triage facility may be structured as a voluntary or involuntary
2 placement facility;

3 (57) "Video," unless the context clearly indicates otherwise,
4 means the delivery of behavioral health services through the use of
5 interactive audio and video technology, permitting real-time
6 communication between a person and a designated crisis responder, for
7 the purpose of evaluation. "Video" does not include the use of audio-
8 only telephone, facsimile, email, or store and forward technology.
9 "Store and forward technology" means use of an asynchronous
10 transmission of a person's medical information from a mental health
11 service provider to the designated crisis responder which results in
12 medical diagnosis, consultation, or treatment;

13 (58) "Violent act" means behavior that resulted in homicide,
14 attempted suicide, injury, or substantial loss or damage to
15 property(†

16 ~~(59) "Written order of apprehension" means an order of the court
17 for a peace officer to deliver the named person in the order to a
18 facility or emergency room as determined by the designated crisis
19 responder. Such orders shall be entered into the Washington crime
20 information center database)).~~

21 **Sec. 22.** RCW 71.05.020 and 2020 c 302 s 4, 2020 c 302 s 3, 2020
22 c 256 s 301, and 2020 c 5 s 1 are each reenacted and amended to read
23 as follows:

24 The definitions in this section apply throughout this chapter
25 unless the context clearly requires otherwise.

26 (1) "Admission" or "admit" means a decision by a physician,
27 physician assistant, or psychiatric advanced registered nurse
28 practitioner that a person should be examined or treated as a patient
29 in a hospital;

30 (2) "Alcoholism" means a disease, characterized by a dependency
31 on alcoholic beverages, loss of control over the amount and
32 circumstances of use, symptoms of tolerance, physiological or
33 psychological withdrawal, or both, if use is reduced or discontinued,
34 and impairment of health or disruption of social or economic
35 functioning;

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

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

5 (5) "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 (6) "Authority" means the Washington state health care authority;

9 (7) "Behavioral health disorder" means either a mental disorder
10 as defined in this section, a substance use disorder as defined in
11 this section, or a co-occurring mental disorder and substance use
12 disorder;

13 (8) "Behavioral health service provider" means a public or
14 private agency that provides mental health, substance use disorder,
15 or co-occurring disorder services to persons with behavioral health
16 disorders as defined under this section and receives funding from
17 public sources. This includes, but is not limited to(~~(hospitals))~~;
18 Hospitals licensed under chapter 70.41 RCW(~~(hospitals))~~; evaluation and
19 treatment facilities as defined in this section(~~(hospitals))~~; community
20 mental health service delivery systems or community behavioral health
21 programs as defined in RCW 71.24.025(~~(hospitals))~~; licensed or certified
22 behavioral health agencies under RCW 71.24.037; facilities conducting
23 competency evaluations and restoration under chapter 10.77 RCW(~~(hospitals))~~;
24 approved substance use disorder treatment programs as defined in this
25 section(~~(hospitals))~~; secure withdrawal management and stabilization
26 facilities as defined in this section(~~(hospitals))~~; and correctional
27 facilities operated by state and local governments;

28 (9) "Co-occurring disorder specialist" means an individual
29 possessing an enhancement granted by the department of health under
30 chapter 18.205 RCW that certifies the individual to provide substance
31 use disorder counseling subject to the practice limitations under RCW
32 18.205.105;

33 (10) "Commitment" means the determination by a court that a
34 person should be detained for a period of either evaluation or
35 treatment, or both, in an inpatient or a less restrictive setting;

36 (11) "Conditional release" means a revocable modification of a
37 commitment, which may be revoked upon violation of any of its terms;

38 (12) "Crisis stabilization unit" means a short-term facility or a
39 portion of a facility licensed or certified by the department, such
40 as an evaluation and treatment facility or a hospital, which has been

1 designed to assess, diagnose, and treat individuals experiencing an
2 acute crisis without the use of long-term hospitalization;

3 (13) "Custody" means involuntary detention under the provisions
4 of this chapter or chapter 10.77 RCW, uninterrupted by any period of
5 unconditional release from commitment from a facility providing
6 involuntary care and treatment;

7 (14) "Department" means the department of health;

8 (15) "Designated crisis responder" means a mental health
9 professional appointed by the county, by an entity appointed by the
10 county, or by the authority in consultation with a federally
11 recognized Indian tribe or after meeting and conferring with an
12 Indian health care provider, to perform the duties specified in this
13 chapter;

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

16 (17) "Developmental disabilities professional" means a person who
17 has specialized training and three years of experience in directly
18 treating or working with persons with developmental disabilities and
19 is a psychiatrist, physician assistant working with a supervising
20 psychiatrist, psychologist, psychiatric advanced registered nurse
21 practitioner, or social worker, and such other developmental
22 disabilities professionals as may be defined by rules adopted by the
23 secretary of the department of social and health services;

24 (18) "Developmental disability" means that condition defined in
25 RCW 71A.10.020(5);

26 (19) "Director" means the director of the authority;

27 (20) "Discharge" means the termination of hospital medical
28 authority. The commitment may remain in place, be terminated, or be
29 amended by court order;

30 (21) "Drug addiction" means a disease, characterized by a
31 dependency on psychoactive chemicals, loss of control over the amount
32 and circumstances of use, symptoms of tolerance, physiological or
33 psychological withdrawal, or both, if use is reduced or discontinued,
34 and impairment of health or disruption of social or economic
35 functioning;

36 (22) "Evaluation and treatment facility" means any facility which
37 can provide directly, or by direct arrangement with other public or
38 private agencies, emergency evaluation and treatment, outpatient
39 care, and timely and appropriate inpatient care to persons suffering
40 from a mental disorder, and which is licensed or certified as such by

1 the department. The authority may certify single beds as temporary
2 evaluation and treatment beds under RCW 71.05.745. A physically
3 separate and separately operated portion of a state hospital may be
4 designated as an evaluation and treatment facility. A facility which
5 is part of, or operated by, the department of social and health
6 services or any federal agency will not require certification. No
7 correctional institution or facility, or jail, shall be an evaluation
8 and treatment facility within the meaning of this chapter;

9 (23) "Gravely disabled" means a condition in which a person, as a
10 result of a behavioral health disorder: (a) Is in danger of serious
11 physical harm resulting from a failure to provide for his or her
12 essential human needs of health or safety; or (b) manifests severe
13 deterioration from safe behavior evidenced by repeated and escalating
14 loss of cognitive or volitional control over his or her actions and
15 is not receiving such care as is essential for his or her health or
16 safety;

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

25 (25) "Hearing" means any proceeding conducted in open court that
26 conforms to the requirements of RCW 71.05.820;

27 (26) "History of one or more violent acts" refers to the period
28 of time ten years prior to the filing of a petition under this
29 chapter, excluding any time spent, but not any violent acts
30 committed, in a behavioral health facility, or in confinement as a
31 result of a criminal conviction;

32 (27) "Imminent" means the state or condition of being likely to
33 occur at any moment or near at hand, rather than distant or remote;

34 (28) "In need of assisted outpatient behavioral health treatment"
35 means that a person, as a result of a behavioral health disorder: (a)
36 Has been committed by a court to detention for involuntary behavioral
37 health treatment during the preceding thirty-six months; (b) is
38 unlikely to voluntarily participate in outpatient treatment without
39 an order for less restrictive alternative treatment, based on a
40 history of nonadherence with treatment or in view of the person's

1 current behavior; (c) is likely to benefit from less restrictive
2 alternative treatment; and (d) requires less restrictive alternative
3 treatment to prevent a relapse, decompensation, or deterioration that
4 is likely to result in the person presenting a likelihood of serious
5 harm or the person becoming gravely disabled within a reasonably
6 short period of time;

7 (29) "Individualized service plan" means a plan prepared by a
8 developmental disabilities professional with other professionals as a
9 team, for a person with developmental disabilities, which shall
10 state:

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

13 (b) The conditions and strategies necessary to achieve the
14 purposes of habilitation;

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

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

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

20 (f) Where relevant in light of past criminal behavior and due
21 consideration for public safety, the criteria for proposed movement
22 to less-restrictive settings, criteria for proposed eventual
23 discharge or release, and a projected possible date for discharge or
24 release; and

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

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

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

32 (32) "Legal counsel" means attorneys and staff employed by county
33 prosecutor offices or the state attorney general acting in their
34 capacity as legal representatives of public behavioral health service
35 providers under RCW 71.05.130;

36 (33) "Less restrictive alternative treatment" means a program of
37 individualized treatment in a less restrictive setting than inpatient
38 treatment that includes the services described in RCW 71.05.585. This
39 term includes: Treatment pursuant to a less restrictive alternative
40 treatment order under RCW 71.05.240 or 71.05.320; treatment pursuant

1 to a conditional release under RCW 71.05.340; and treatment pursuant
2 to an assisted outpatient behavioral health treatment order under RCW
3 71.05.148;

4 (34) "Licensed physician" means a person licensed to practice
5 medicine or osteopathic medicine and surgery in the state of
6 Washington;

7 (35) "Likelihood of serious harm" means:

8 (a) A substantial risk that: (i) Physical harm will be inflicted
9 by a person upon his or her own person, as evidenced by threats or
10 attempts to commit suicide or inflict physical harm on oneself; (ii)
11 physical harm will be inflicted by a person upon another, as
12 evidenced by behavior which has caused harm, substantial pain, or
13 which places another person or persons in reasonable fear of harm to
14 themselves or others; or (iii) physical harm will be inflicted by a
15 person upon the property of others, as evidenced by behavior which
16 has caused substantial loss or damage to the property of others; or

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

19 (36) "Medical clearance" means a physician or other health care
20 provider has determined that a person is medically stable and ready
21 for referral to the designated crisis responder;

22 (37) "Mental disorder" means any organic, mental, or emotional
23 impairment which has substantial adverse effects on a person's
24 cognitive or volitional functions;

25 (38) "Mental health professional" means a psychiatrist,
26 psychologist, physician assistant working with a supervising
27 psychiatrist, psychiatric advanced registered nurse practitioner,
28 psychiatric nurse, or social worker, and such other mental health
29 professionals as may be defined by rules adopted by the secretary
30 pursuant to the provisions of this chapter;

31 (39) "Peace officer" means a law enforcement official of a public
32 agency or governmental unit, and includes persons specifically given
33 peace officer powers by any state law, local ordinance, or judicial
34 order of appointment;

35 (40) "Physician assistant" means a person licensed as a physician
36 assistant under chapter 18.57A or 18.71A RCW;

37 (41) "Private agency" means any person, partnership, corporation,
38 or association that is not a public agency, whether or not financed
39 in whole or in part by public funds, which constitutes an evaluation
40 and treatment facility or private institution, or hospital, or

1 approved substance use disorder treatment program, which is conducted
2 for, or includes a department or ward conducted for, the care and
3 treatment of persons with behavioral health disorders;

4 (42) "Professional person" means a mental health professional,
5 substance use disorder professional, or designated crisis responder
6 and shall also mean a physician, physician assistant, psychiatric
7 advanced registered nurse practitioner, registered nurse, and such
8 others as may be defined by rules adopted by the secretary pursuant
9 to the provisions of this chapter;

10 (43) "Psychiatric advanced registered nurse practitioner" means a
11 person who is licensed as an advanced registered nurse practitioner
12 pursuant to chapter 18.79 RCW; and who is board certified in advanced
13 practice psychiatric and mental health nursing;

14 (44) "Psychiatrist" means a person having a license as a
15 physician and surgeon in this state who has in addition completed
16 three years of graduate training in psychiatry in a program approved
17 by the American medical association or the American osteopathic
18 association and is certified or eligible to be certified by the
19 American board of psychiatry and neurology;

20 (45) "Psychologist" means a person who has been licensed as a
21 psychologist pursuant to chapter 18.83 RCW;

22 (46) "Public agency" means any evaluation and treatment facility
23 or institution, secure withdrawal management and stabilization
24 facility, approved substance use disorder treatment program, or
25 hospital which is conducted for, or includes a department or ward
26 conducted for, the care and treatment of persons with behavioral
27 health disorders, if the agency is operated directly by federal,
28 state, county, or municipal government, or a combination of such
29 governments;

30 (47) "Release" means legal termination of the commitment under
31 the provisions of this chapter;

32 (48) "Resource management services" has the meaning given in
33 chapter 71.24 RCW;

34 (49) "Secretary" means the secretary of the department of health,
35 or his or her designee;

36 (50) "Secure withdrawal management and stabilization facility"
37 means a facility operated by either a public or private agency or by
38 the program of an agency which provides care to voluntary individuals
39 and individuals involuntarily detained and committed under this
40 chapter for whom there is a likelihood of serious harm or who are

1 gravely disabled due to the presence of a substance use disorder.
2 Secure withdrawal management and stabilization facilities must:

- 3 (a) Provide the following services:
 - 4 (i) Assessment and treatment, provided by certified substance use
 - 5 disorder professionals or co-occurring disorder specialists;
 - 6 (ii) Clinical stabilization services;
 - 7 (iii) Acute or subacute detoxification services for intoxicated
 - 8 individuals; and
 - 9 (iv) Discharge assistance provided by certified substance use
 - 10 disorder professionals or co-occurring disorder specialists,
 - 11 including facilitating transitions to appropriate voluntary or
 - 12 involuntary inpatient services or to less restrictive alternatives as
 - 13 appropriate for the individual;
- 14 (b) Include security measures sufficient to protect the patients,
- 15 staff, and community; and
- 16 (c) Be licensed or certified as such by the department of health;

17 (51) "Severe deterioration from safe behavior" means that a
18 person will, if not treated, suffer or continue to suffer severe and
19 abnormal mental, emotional, or physical distress, and this distress
20 is associated with significant impairment of judgment, reason, or
21 behavior;

22 (52) "Social worker" means a person with a master's or further
23 advanced degree from a social work educational program accredited and
24 approved as provided in RCW 18.320.010;

25 (53) "Substance use disorder" means a cluster of cognitive,
26 behavioral, and physiological symptoms indicating that an individual
27 continues using the substance despite significant substance-related
28 problems. The diagnosis of a substance use disorder is based on a
29 pathological pattern of behaviors related to the use of the
30 substances;

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

34 (55) "Therapeutic court personnel" means the staff of a mental
35 health court or other therapeutic court which has jurisdiction over
36 defendants who are dually diagnosed with mental disorders, including
37 court personnel, probation officers, a court monitor, prosecuting
38 attorney, or defense counsel acting within the scope of therapeutic
39 court duties;

1 (56) "Treatment records" include registration and all other
2 records concerning persons who are receiving or who at any time have
3 received services for behavioral health disorders, which are
4 maintained by the department of social and health services, the
5 department, the authority, behavioral health administrative services
6 organizations and their staffs, managed care organizations and their
7 staffs, and by treatment facilities. Treatment records include mental
8 health information contained in a medical bill including but not
9 limited to mental health drugs, a mental health diagnosis, provider
10 name, and dates of service stemming from a medical service. Treatment
11 records do not include notes or records maintained for personal use
12 by a person providing treatment services for the department of social
13 and health services, the department, the authority, behavioral health
14 administrative services organizations, managed care organizations, or
15 a treatment facility if the notes or records are not available to
16 others;

17 (57) "Triage facility" means a short-term facility or a portion
18 of a facility licensed or certified by the department, which is
19 designed as a facility to assess and stabilize an individual or
20 determine the need for involuntary commitment of an individual, and
21 must meet department residential treatment facility standards. A
22 triage facility may be structured as a voluntary or involuntary
23 placement facility;

24 (58) "Video," unless the context clearly indicates otherwise,
25 means the delivery of behavioral health services through the use of
26 interactive audio and video technology, permitting real-time
27 communication between a person and a designated crisis responder, for
28 the purpose of evaluation. "Video" does not include the use of audio-
29 only telephone, facsimile, email, or store and forward technology.
30 "Store and forward technology" means use of an asynchronous
31 transmission of a person's medical information from a mental health
32 service provider to the designated crisis responder which results in
33 medical diagnosis, consultation, or treatment;

34 (59) "Violent act" means behavior that resulted in homicide,
35 attempted suicide, injury, or substantial loss or damage to
36 property(†

37 ~~(60) "Written order of apprehension" means an order of the court~~
38 ~~for a peace officer to deliver the named person in the order to a~~
39 ~~facility or emergency room as determined by the designated crisis~~

1 responder. Such orders shall be entered into the Washington crime
2 information center database)).

3 **Sec. 23.** RCW 71.05.020 and 2020 c 302 s 4, 2020 c 302 s 3, 2020
4 c 256 s 301, 2020 c 80 s 51, and 2020 c 5 s 1 are each reenacted and
5 amended to read as follows:

6 The definitions in this section apply throughout this chapter
7 unless the context clearly requires otherwise.

8 (1) "Admission" or "admit" means a decision by a physician,
9 physician assistant, or psychiatric advanced registered nurse
10 practitioner that a person should be examined or treated as a patient
11 in a hospital;

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

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

22 (4) "Approved substance use disorder treatment program" means a
23 program for persons with a substance use disorder provided by a
24 treatment program certified by the department as meeting standards
25 adopted under chapter 71.24 RCW;

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

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

30 (7) "Behavioral health disorder" means either a mental disorder
31 as defined in this section, a substance use disorder as defined in
32 this section, or a co-occurring mental disorder and substance use
33 disorder;

34 (8) "Behavioral health service provider" means a public or
35 private agency that provides mental health, substance use disorder,
36 or co-occurring disorder services to persons with behavioral health
37 disorders as defined under this section and receives funding from
38 public sources. This includes, but is not limited to(~~(, hospitals))~~;
39 Hospitals licensed under chapter 70.41 RCW(~~(,)~~); evaluation and

1 treatment facilities as defined in this section((τ)); community
2 mental health service delivery systems or community behavioral health
3 programs as defined in RCW 71.24.025((τ)); licensed or certified
4 behavioral health agencies under RCW 71.24.037; facilities conducting
5 competency evaluations and restoration under chapter 10.77 RCW((τ));
6 approved substance use disorder treatment programs as defined in this
7 section((τ)); secure withdrawal management and stabilization
8 facilities as defined in this section((τ)); and correctional
9 facilities operated by state and local governments;

10 (9) "Co-occurring disorder specialist" means an individual
11 possessing an enhancement granted by the department of health under
12 chapter 18.205 RCW that certifies the individual to provide substance
13 use disorder counseling subject to the practice limitations under RCW
14 18.205.105;

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

18 (11) "Conditional release" means a revocable modification of a
19 commitment, which may be revoked upon violation of any of its terms;

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

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

29 (14) "Department" means the department of health;

30 (15) "Designated crisis responder" means a mental health
31 professional appointed by the county, by an entity appointed by the
32 county, or by the authority in consultation with a federally
33 recognized Indian tribe or after meeting and conferring with an
34 Indian health care provider, to perform the duties specified in this
35 chapter;

36 (16) "Detention" or "detain" means the lawful confinement of a
37 person, under the provisions of this chapter;

38 (17) "Developmental disabilities professional" means a person who
39 has specialized training and three years of experience in directly
40 treating or working with persons with developmental disabilities and

1 is a psychiatrist, physician assistant working with a supervising
2 psychiatrist, psychologist, psychiatric advanced registered nurse
3 practitioner, or social worker, and such other developmental
4 disabilities professionals as may be defined by rules adopted by the
5 secretary of the department of social and health services;

6 (18) "Developmental disability" means that condition defined in
7 RCW 71A.10.020(5);

8 (19) "Director" means the director of the authority;

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

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

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

31 (23) "Gravely disabled" means a condition in which a person, as a
32 result of a behavioral health disorder: (a) Is in danger of serious
33 physical harm resulting from a failure to provide for his or her
34 essential human needs of health or safety; or (b) manifests severe
35 deterioration from safe behavior evidenced by repeated and escalating
36 loss of cognitive or volitional control over his or her actions and
37 is not receiving such care as is essential for his or her health or
38 safety;

39 (24) "Habilitative services" means those services provided by
40 program personnel to assist persons in acquiring and maintaining life

1 skills and in raising their levels of physical, mental, social, and
2 vocational functioning. Habilitative services include education,
3 training for employment, and therapy. The habilitative process shall
4 be undertaken with recognition of the risk to the public safety
5 presented by the person being assisted as manifested by prior charged
6 criminal conduct;

7 (25) "Hearing" means any proceeding conducted in open court that
8 conforms to the requirements of RCW 71.05.820;

9 (26) "History of one or more violent acts" refers to the period
10 of time ten years prior to the filing of a petition under this
11 chapter, excluding any time spent, but not any violent acts
12 committed, in a behavioral health facility, or in confinement as a
13 result of a criminal conviction;

14 (27) "Imminent" means the state or condition of being likely to
15 occur at any moment or near at hand, rather than distant or remote;

16 (28) "In need of assisted outpatient behavioral health treatment"
17 means that a person, as a result of a behavioral health disorder: (a)
18 Has been committed by a court to detention for involuntary behavioral
19 health treatment during the preceding thirty-six months; (b) is
20 unlikely to voluntarily participate in outpatient treatment without
21 an order for less restrictive alternative treatment, based on a
22 history of nonadherence with treatment or in view of the person's
23 current behavior; (c) is likely to benefit from less restrictive
24 alternative treatment; and (d) requires less restrictive alternative
25 treatment to prevent a relapse, decompensation, or deterioration that
26 is likely to result in the person presenting a likelihood of serious
27 harm or the person becoming gravely disabled within a reasonably
28 short period of time;

29 (29) "Individualized service plan" means a plan prepared by a
30 developmental disabilities professional with other professionals as a
31 team, for a person with developmental disabilities, which shall
32 state:

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

35 (b) The conditions and strategies necessary to achieve the
36 purposes of habilitation;

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

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

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

2 (f) Where relevant in light of past criminal behavior and due
3 consideration for public safety, the criteria for proposed movement
4 to less-restrictive settings, criteria for proposed eventual
5 discharge or release, and a projected possible date for discharge or
6 release; and

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

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

12 (31) "Judicial commitment" means a commitment by a court pursuant
13 to the provisions of this chapter;

14 (32) "Legal counsel" means attorneys and staff employed by county
15 prosecutor offices or the state attorney general acting in their
16 capacity as legal representatives of public behavioral health service
17 providers under RCW 71.05.130;

18 (33) "Less restrictive alternative treatment" means a program of
19 individualized treatment in a less restrictive setting than inpatient
20 treatment that includes the services described in RCW 71.05.585. This
21 term includes: Treatment pursuant to a less restrictive alternative
22 treatment order under RCW 71.05.240 or 71.05.320; treatment pursuant
23 to a conditional release under RCW 71.05.340; and treatment pursuant
24 to an assisted outpatient behavioral health treatment order under RCW
25 71.05.148;

26 (34) "Licensed physician" means a person licensed to practice
27 medicine or osteopathic medicine and surgery in the state of
28 Washington;

29 (35) "Likelihood of serious harm" means:

30 (a) A substantial risk that: (i) Physical harm will be inflicted
31 by a person upon his or her own person, as evidenced by threats or
32 attempts to commit suicide or inflict physical harm on oneself; (ii)
33 physical harm will be inflicted by a person upon another, as
34 evidenced by behavior which has caused harm, substantial pain, or
35 which places another person or persons in reasonable fear of harm to
36 themselves or others; or (iii) physical harm will be inflicted by a
37 person upon the property of others, as evidenced by behavior which
38 has caused substantial loss or damage to the property of others; or

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

1 (36) "Medical clearance" means a physician or other health care
2 provider has determined that a person is medically stable and ready
3 for referral to the designated crisis responder;

4 (37) "Mental disorder" means any organic, mental, or emotional
5 impairment which has substantial adverse effects on a person's
6 cognitive or volitional functions;

7 (38) "Mental health professional" means a psychiatrist,
8 psychologist, physician assistant working with a supervising
9 psychiatrist, psychiatric advanced registered nurse practitioner,
10 psychiatric nurse, or social worker, and such other mental health
11 professionals as may be defined by rules adopted by the secretary
12 pursuant to the provisions of this chapter;

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

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

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

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

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

36 (44) "Psychiatrist" means a person having a license as a
37 physician and surgeon in this state who has in addition completed
38 three years of graduate training in psychiatry in a program approved
39 by the American medical association or the American osteopathic

1 association and is certified or eligible to be certified by the
2 American board of psychiatry and neurology;

3 (45) "Psychologist" means a person who has been licensed as a
4 psychologist pursuant to chapter 18.83 RCW;

5 (46) "Public agency" means any evaluation and treatment facility
6 or institution, secure withdrawal management and stabilization
7 facility, approved substance use disorder treatment program, or
8 hospital which is conducted for, or includes a department or ward
9 conducted for, the care and treatment of persons with behavioral
10 health disorders, if the agency is operated directly by federal,
11 state, county, or municipal government, or a combination of such
12 governments;

13 (47) "Release" means legal termination of the commitment under
14 the provisions of this chapter;

15 (48) "Resource management services" has the meaning given in
16 chapter 71.24 RCW;

17 (49) "Secretary" means the secretary of the department of health,
18 or his or her designee;

19 (50) "Secure withdrawal management and stabilization facility"
20 means a facility operated by either a public or private agency or by
21 the program of an agency which provides care to voluntary individuals
22 and individuals involuntarily detained and committed under this
23 chapter for whom there is a likelihood of serious harm or who are
24 gravely disabled due to the presence of a substance use disorder.
25 Secure withdrawal management and stabilization facilities must:

26 (a) Provide the following services:

27 (i) Assessment and treatment, provided by certified substance use
28 disorder professionals or co-occurring disorder specialists;

29 (ii) Clinical stabilization services;

30 (iii) Acute or subacute detoxification services for intoxicated
31 individuals; and

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

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

39 (c) Be licensed or certified as such by the department of health;

1 (51) "Severe deterioration from safe behavior" means that a
2 person will, if not treated, suffer or continue to suffer severe and
3 abnormal mental, emotional, or physical distress, and this distress
4 is associated with significant impairment of judgment, reason, or
5 behavior;

6 (52) "Social worker" means a person with a master's or further
7 advanced degree from a social work educational program accredited and
8 approved as provided in RCW 18.320.010;

9 (53) "Substance use disorder" means a cluster of cognitive,
10 behavioral, and physiological symptoms indicating that an individual
11 continues using the substance despite significant substance-related
12 problems. The diagnosis of a substance use disorder is based on a
13 pathological pattern of behaviors related to the use of the
14 substances;

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

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

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

1 (57) "Triage facility" means a short-term facility or a portion
2 of a facility licensed or certified by the department, which is
3 designed as a facility to assess and stabilize an individual or
4 determine the need for involuntary commitment of an individual, and
5 must meet department residential treatment facility standards. A
6 triage facility may be structured as a voluntary or involuntary
7 placement facility;

8 (58) "Video," unless the context clearly indicates otherwise,
9 means the delivery of behavioral health services through the use of
10 interactive audio and video technology, permitting real-time
11 communication between a person and a designated crisis responder, for
12 the purpose of evaluation. "Video" does not include the use of audio-
13 only telephone, facsimile, email, or store and forward technology.
14 "Store and forward technology" means use of an asynchronous
15 transmission of a person's medical information from a mental health
16 service provider to the designated crisis responder which results in
17 medical diagnosis, consultation, or treatment;

18 (59) "Violent act" means behavior that resulted in homicide,
19 attempted suicide, injury, or substantial loss or damage to
20 property(†

21 ~~(60) "Written order of apprehension" means an order of the court
22 for a peace officer to deliver the named person in the order to a
23 facility or emergency room as determined by the designated crisis
24 responder. Such orders shall be entered into the Washington crime
25 information center database)).~~

26 **Sec. 24.** 2020 c 302 s 110 (uncodified) is amended to read as
27 follows:

28 (1) Sections 4 and 28 (~~of this act~~), chapter 302, Laws of 2020
29 and, until July 1, 2022, section 22 of this act and, beginning July
30 1, 2022, section 23 of this act take effect when monthly single-bed
31 certifications authorized under RCW 71.05.745 fall below 200 reports
32 for 3 consecutive months.

33 (2) The health care authority must provide written notice of the
34 effective date of sections 4 and 28 (~~of this act~~), chapter 302,
35 Laws of 2020 and sections 22 and 23 of this act to affected parties,
36 the chief clerk of the house of representatives, the secretary of the
37 senate, the office of the code reviser, and others as deemed
38 appropriate by the authority.

1 **Sec. 25.** RCW 71.34.020 and 2020 c 302 s 63, 2020 c 274 s 50, and
2 2020 c 185 s 2 are each reenacted and amended to read as follows:

3 Unless the context clearly requires otherwise, the definitions in
4 this section apply throughout this chapter.

5 (1) "Admission" or "admit" means a decision by a physician,
6 physician assistant, or psychiatric advanced registered nurse
7 practitioner that a minor should be examined or treated as a patient
8 in a hospital.

9 (2) "Adolescent" means a minor thirteen years of age or older.

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

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

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

24 (6) "Attending staff" means any person on the staff of a public
25 or private agency having responsibility for the care and treatment of
26 a minor patient.

27 (7) "Authority" means the Washington state health care authority.

28 (8) "Behavioral health administrative services organization" has
29 the same meaning as provided in RCW 71.24.025.

30 (9) "Behavioral health disorder" means either a mental disorder
31 as defined in this section, a substance use disorder as defined in
32 this section, or a co-occurring mental disorder and substance use
33 disorder.

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

39 (11) "Children's mental health specialist" means:

1 (a) A mental health professional who has completed a minimum of
2 one hundred actual hours, not quarter or semester hours, of
3 specialized training devoted to the study of child development and
4 the treatment of children; and

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

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

12 (13) "Conditional release" means a revocable modification of a
13 commitment, which may be revoked upon violation of any of its terms.

14 (14) "Co-occurring disorder specialist" means an individual
15 possessing an enhancement granted by the department of health under
16 chapter 18.205 RCW that certifies the individual to provide substance
17 use disorder counseling subject to the practice limitations under RCW
18 18.205.105.

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

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

29 (17) "Department" means the department of social and health
30 services.

31 (18) "Designated crisis responder" has the same meaning as
32 provided in RCW 71.05.020.

33 (19) "Detention" or "detain" means the lawful confinement of a
34 person, under the provisions of this chapter.

35 (20) "Developmental disabilities professional" means a person who
36 has specialized training and three years of experience in directly
37 treating or working with persons with developmental disabilities and
38 is a psychiatrist, physician assistant working with a supervising
39 psychiatrist, psychologist, psychiatric advanced registered nurse
40 practitioner, or social worker, and such other developmental

1 disabilities professionals as may be defined by rules adopted by the
2 secretary of the department.

3 (21) "Developmental disability" has the same meaning as defined
4 in RCW 71A.10.020.

5 (22) "Director" means the director of the authority.

6 (23) "Discharge" means the termination of hospital medical
7 authority. The commitment may remain in place, be terminated, or be
8 amended by court order.

9 (24) "Evaluation and treatment facility" means a public or
10 private facility or unit that is licensed or certified by the
11 department of health to provide emergency, inpatient, residential, or
12 outpatient mental health evaluation and treatment services for
13 minors. A physically separate and separately operated portion of a
14 state hospital may be designated as an evaluation and treatment
15 facility for minors. A facility which is part of or operated by the
16 state or federal agency does not require licensure or certification.
17 No correctional institution or facility, juvenile court detention
18 facility, or jail may be an evaluation and treatment facility within
19 the meaning of this chapter.

20 (25) "Evaluation and treatment program" means the total system of
21 services and facilities coordinated and approved by a county or
22 combination of counties for the evaluation and treatment of minors
23 under this chapter.

24 (26) "Gravely disabled minor" means a minor who, as a result of a
25 behavioral health disorder, (a) is in danger of serious physical harm
26 resulting from a failure to provide for his or her essential human
27 needs of health or safety, or (b) manifests severe deterioration in
28 routine functioning evidenced by repeated and escalating loss of
29 cognitive or volitional control over his or her actions and is not
30 receiving such care as is essential for his or her health or safety.

31 (27) "Habilitative services" means those services provided by
32 program personnel to assist minors in acquiring and maintaining life
33 skills and in raising their levels of physical, behavioral, social,
34 and vocational functioning. Habilitative services include education,
35 training for employment, and therapy.

36 (28) "Hearing" means any proceeding conducted in open court that
37 conforms to the requirements of RCW 71.34.910.

38 (29) "History of one or more violent acts" refers to the period
39 of time five years prior to the filing of a petition under this
40 chapter, excluding any time spent, but not any violent acts

1 committed, in a mental health facility, a long-term (~~alcoholism or~~
2 ~~drug~~) substance use disorder treatment facility, or in confinement
3 as a result of a criminal conviction.

4 (30) "Individualized service plan" means a plan prepared by a
5 developmental disabilities professional with other professionals as a
6 team, for a person with developmental disabilities, which states:

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

9 (b) The conditions and strategies necessary to achieve the
10 purposes of habilitation;

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

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

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

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

21 (g) The type of residence immediately anticipated for the person
22 and possible future types of residences.

23 (31)(a) "Inpatient treatment" means twenty-four-hour-per-day
24 mental health care provided within a general hospital, psychiatric
25 hospital, residential treatment facility licensed or certified by the
26 department of health as an evaluation and treatment facility for
27 minors, secure withdrawal management and stabilization facility for
28 minors, or approved substance use disorder treatment program for
29 minors.

30 (b) For purposes of family-initiated treatment under RCW
31 71.34.600 through 71.34.670, "inpatient treatment" has the meaning
32 included in (a) of this subsection and any other residential
33 treatment facility licensed under chapter 71.12 RCW.

34 (32) "Intoxicated minor" means a minor whose mental or physical
35 functioning is substantially impaired as a result of the use of
36 alcohol or other psychoactive chemicals.

37 (33) "Judicial commitment" means a commitment by a court pursuant
38 to the provisions of this chapter.

39 (34) "Kinship caregiver" has the same meaning as in RCW
40 74.13.031(19)(a).

1 (35) "Legal counsel" means attorneys and staff employed by county
2 prosecutor offices or the state attorney general acting in their
3 capacity as legal representatives of public behavioral health service
4 providers under RCW 71.05.130.

5 (36) "Less restrictive alternative" or "less restrictive setting"
6 means outpatient treatment provided to a minor (~~who is not residing~~
7 ~~in a facility providing inpatient treatment as defined in this~~
8 ~~chapter~~) as a program of individualized treatment in a less
9 restrictive setting than inpatient treatment that includes the
10 services described in RCW 71.34.755, including residential treatment.

11 (37) "Licensed physician" means a person licensed to practice
12 medicine or osteopathic medicine and surgery in the state of
13 Washington.

14 (38) "Likelihood of serious harm" means:

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

24 (b) The minor has threatened the physical safety of another and
25 has a history of one or more violent acts.

26 (39) "Managed care organization" has the same meaning as provided
27 in RCW 71.24.025.

28 (40) "Medical clearance" means a physician or other health care
29 provider has determined that a person is medically stable and ready
30 for referral to the designated crisis responder.

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

39 (42) "Mental disorder" means any organic, mental, or emotional
40 impairment that has substantial adverse effects on an individual's

1 cognitive or volitional functions. The presence of alcohol abuse,
2 drug abuse, juvenile criminal history, antisocial behavior, or
3 intellectual disabilities alone is insufficient to justify a finding
4 of "mental disorder" within the meaning of this section.

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

11 (44) "Minor" means any person under the age of eighteen years.

12 (45) "Outpatient treatment" means any of the nonresidential
13 services mandated under chapter 71.24 RCW and provided by licensed or
14 certified behavioral health agencies as identified by RCW 71.24.025.

15 (46)(a) "Parent" has the same meaning as defined in RCW
16 26.26A.010, including either parent if custody is shared under a
17 joint custody agreement, or a person or agency judicially appointed
18 as legal guardian or custodian of the child.

19 (b) For purposes of family-initiated treatment under RCW
20 71.34.600 through 71.34.670, "parent" also includes a person to whom
21 a parent defined in (a) of this subsection has given a signed
22 authorization to make health care decisions for the adolescent, a
23 stepparent who is involved in caring for the adolescent, a kinship
24 caregiver who is involved in caring for the adolescent, or another
25 relative who is responsible for the health care of the adolescent,
26 who may be required to provide a declaration under penalty of perjury
27 stating that he or she is a relative responsible for the health care
28 of the adolescent pursuant to chapter 5.50 RCW. If a dispute arises
29 between individuals authorized to act as a parent for the purpose of
30 RCW 71.34.600 through 71.34.670, the disagreement must be resolved
31 according to the priority established under RCW 7.70.065(2)(a).

32 (47) "Peace officer" means a law enforcement official of a public
33 agency or governmental unit, and includes persons specifically given
34 peace officer powers by any state law, local ordinance, or judicial
35 order of appointment.

36 (48) "Physician assistant" means a person licensed as a physician
37 assistant under chapter 18.57A or 18.71A RCW.

38 (49) "Private agency" means any person, partnership, corporation,
39 or association that is not a public agency, whether or not financed
40 in whole or in part by public funds, that constitutes an evaluation

1 and treatment facility or private institution, or hospital, or
2 approved substance use disorder treatment program, that is conducted
3 for, or includes a distinct unit, floor, or ward conducted for, the
4 care and treatment of persons with mental illness, substance use
5 disorders, or both mental illness and substance use disorders.

6 (50) "Professional person in charge" or "professional person"
7 means a physician, other mental health professional, or other person
8 empowered by an evaluation and treatment facility, secure withdrawal
9 management and stabilization facility, or approved substance use
10 disorder treatment program with authority to make admission and
11 discharge decisions on behalf of that facility.

12 (51) "Psychiatric nurse" means a registered nurse who has
13 experience in the direct treatment of persons who have a mental
14 illness or who are emotionally disturbed, such experience gained
15 under the supervision of a mental health professional.

16 (52) "Psychiatrist" means a person having a license as a
17 physician in this state who has completed residency training in
18 psychiatry in a program approved by the American Medical Association
19 or the American Osteopathic Association, and is board eligible or
20 board certified in psychiatry.

21 (53) "Psychologist" means a person licensed as a psychologist
22 under chapter 18.83 RCW.

23 (54) "Public agency" means any evaluation and treatment facility
24 or institution, or hospital, or approved substance use disorder
25 treatment program that is conducted for, or includes a distinct unit,
26 floor, or ward conducted for, the care and treatment of persons with
27 mental illness, substance use disorders, or both mental illness and
28 substance use disorders if the agency is operated directly by
29 federal, state, county, or municipal government, or a combination of
30 such governments.

31 (55) "Release" means legal termination of the commitment under
32 the provisions of this chapter.

33 (56) "Resource management services" has the meaning given in
34 chapter 71.24 RCW.

35 (57) "Responsible other" means the minor, the minor's parent or
36 estate, or any other person legally responsible for support of the
37 minor.

38 (58) "Secretary" means the secretary of the department or
39 secretary's designee.

1 (59) "Secure withdrawal management and stabilization facility"
2 means a facility operated by either a public or private agency or by
3 the program of an agency which provides care to voluntary individuals
4 and individuals involuntarily detained and committed under this
5 chapter for whom there is a likelihood of serious harm or who are
6 gravely disabled due to the presence of a substance use disorder.
7 Secure withdrawal management and stabilization facilities must:

8 (a) Provide the following services:

9 (i) Assessment and treatment, provided by certified substance use
10 disorder professionals or co-occurring disorder specialists;

11 (ii) Clinical stabilization services;

12 (iii) Acute or subacute detoxification services for intoxicated
13 individuals; and

14 (iv) Discharge assistance provided by certified substance use
15 disorder professionals or co-occurring disorder specialists,
16 including facilitating transitions to appropriate voluntary or
17 involuntary inpatient services or to less restrictive alternatives as
18 appropriate for the individual;

19 (b) Include security measures sufficient to protect the patients,
20 staff, and community; and

21 (c) Be licensed or certified as such by the department of health.

22 (60) "Social worker" means a person with a master's or further
23 advanced degree from a social work educational program accredited and
24 approved as provided in RCW 18.320.010.

25 (61) "Start of initial detention" means the time of arrival of
26 the minor at the first evaluation and treatment facility, secure
27 withdrawal management and stabilization facility, or approved
28 substance use disorder treatment program offering inpatient treatment
29 if the minor is being involuntarily detained at the time. With regard
30 to voluntary patients, "start of initial detention" means the time at
31 which the minor gives notice of intent to leave under the provisions
32 of this chapter.

33 (62) "Store and forward technology" means use of an asynchronous
34 transmission of a person's medical information from a mental health
35 service provider to the designated crisis responder which results in
36 medical diagnosis, consultation, or treatment.

37 (63) "Substance use disorder" means a cluster of cognitive,
38 behavioral, and physiological symptoms indicating that an individual
39 continues using the substance despite significant substance-related
40 problems. The diagnosis of a substance use disorder is based on a

1 pathological pattern of behaviors related to the use of the
2 substances.

3 ~~((63))~~ (64) "Substance use disorder professional" means a
4 person certified as a substance use disorder professional by the
5 department of health under chapter 18.205 RCW.

6 ~~((64))~~ (65) "Therapeutic court personnel" means the staff of a
7 mental health court or other therapeutic court which has jurisdiction
8 over defendants who are dually diagnosed with mental disorders,
9 including court personnel, probation officers, a court monitor,
10 prosecuting attorney, or defense counsel acting within the scope of
11 therapeutic court duties.

12 ~~((65))~~ (66) "Treatment records" include registration and all
13 other records concerning persons who are receiving or who at any time
14 have received services for mental illness, which are maintained by
15 the department, the department of health, the authority, behavioral
16 health organizations and their staffs, and by treatment facilities.
17 Treatment records include mental health information contained in a
18 medical bill including but not limited to mental health drugs, a
19 mental health diagnosis, provider name, and dates of service stemming
20 from a medical service. Treatment records do not include notes or
21 records maintained for personal use by a person providing treatment
22 services for the department, the department of health, the authority,
23 behavioral health organizations, or a treatment facility if the notes
24 or records are not available to others.

25 ~~((66))~~ (67) "Triage facility" means a short-term facility or a
26 portion of a facility licensed or certified by the department of
27 health under RCW 71.24.035, which is designed as a facility to assess
28 and stabilize an individual or determine the need for involuntary
29 commitment of an individual, and must meet department of health
30 residential treatment facility standards. A triage facility may be
31 structured as a voluntary or involuntary placement facility.

32 ~~((67))~~ (68) "Video" means the delivery of behavioral health
33 services through the use of interactive audio and video technology,
34 permitting real-time communication between a person and a designated
35 crisis responder, for the purpose of evaluation. "Video" does not
36 include the use of audio-only telephone, facsimile, email, or store
37 and forward technology.

38 (69) "Violent act" means behavior that resulted in homicide,
39 attempted suicide, injury, or substantial loss or damage to property.

1 (~~(68) "Written order of apprehension" means an order of the~~
2 ~~court for a peace officer to deliver the named minor in the order to~~
3 ~~a facility or emergency room as determined by the designated crisis~~
4 ~~responder. Such orders must be entered into the Washington crime~~
5 ~~information center database.)~~)

6 **Sec. 26.** RCW 71.34.020 and 2020 c 302 s 63, 2020 c 274 s 50,
7 2020 c 185 s 2, and 2020 c 80 s 54 are each reenacted and amended to
8 read as follows:

9 Unless the context clearly requires otherwise, the definitions in
10 this section apply throughout this chapter.

11 (1) "Admission" or "admit" means a decision by a physician,
12 physician assistant, or psychiatric advanced registered nurse
13 practitioner that a minor should be examined or treated as a patient
14 in a hospital.

15 (2) "Adolescent" means a minor thirteen years of age or older.

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

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

26 (5) "Approved substance use disorder treatment program" means a
27 program for minors with substance use disorders provided by a
28 treatment program licensed or certified by the department of health
29 as meeting standards adopted under chapter 71.24 RCW.

30 (6) "Attending staff" means any person on the staff of a public
31 or private agency having responsibility for the care and treatment of
32 a minor patient.

33 (7) "Authority" means the Washington state health care authority.

34 (8) "Behavioral health administrative services organization" has
35 the same meaning as provided in RCW 71.24.025.

36 (9) "Behavioral health disorder" means either a mental disorder
37 as defined in this section, a substance use disorder as defined in
38 this section, or a co-occurring mental disorder and substance use
39 disorder.

1 (10) "Child psychiatrist" means a person having a license as a
2 physician and surgeon in this state, who has had graduate training in
3 child psychiatry in a program approved by the American Medical
4 Association or the American Osteopathic Association, and who is board
5 eligible or board certified in child psychiatry.

6 (11) "Children's mental health specialist" means:

7 (a) A mental health professional who has completed a minimum of
8 one hundred actual hours, not quarter or semester hours, of
9 specialized training devoted to the study of child development and
10 the treatment of children; and

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

14 (12) "Commitment" means a determination by a judge or court
15 commissioner, made after a commitment hearing, that the minor is in
16 need of inpatient diagnosis, evaluation, or treatment or that the
17 minor is in need of less restrictive alternative treatment.

18 (13) "Conditional release" means a revocable modification of a
19 commitment, which may be revoked upon violation of any of its terms.

20 (14) "Co-occurring disorder specialist" means an individual
21 possessing an enhancement granted by the department of health under
22 chapter 18.205 RCW that certifies the individual to provide substance
23 use disorder counseling subject to the practice limitations under RCW
24 18.205.105.

25 (15) "Crisis stabilization unit" means a short-term facility or a
26 portion of a facility licensed or certified by the department of
27 health under RCW 71.24.035, such as a residential treatment facility
28 or a hospital, which has been designed to assess, diagnose, and treat
29 individuals experiencing an acute crisis without the use of long-term
30 hospitalization.

31 (16) "Custody" means involuntary detention under the provisions
32 of this chapter or chapter 10.77 RCW, uninterrupted by any period of
33 unconditional release from commitment from a facility providing
34 involuntary care and treatment.

35 (17) "Department" means the department of social and health
36 services.

37 (18) "Designated crisis responder" has the same meaning as
38 provided in RCW 71.05.020.

39 (19) "Detention" or "detain" means the lawful confinement of a
40 person, under the provisions of this chapter.

1 (20) "Developmental disabilities professional" means a person who
2 has specialized training and three years of experience in directly
3 treating or working with persons with developmental disabilities and
4 is a psychiatrist, physician assistant working with a supervising
5 psychiatrist, psychologist, psychiatric advanced registered nurse
6 practitioner, or social worker, and such other developmental
7 disabilities professionals as may be defined by rules adopted by the
8 secretary of the department.

9 (21) "Developmental disability" has the same meaning as defined
10 in RCW 71A.10.020.

11 (22) "Director" means the director of the authority.

12 (23) "Discharge" means the termination of hospital medical
13 authority. The commitment may remain in place, be terminated, or be
14 amended by court order.

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

26 (25) "Evaluation and treatment program" means the total system of
27 services and facilities coordinated and approved by a county or
28 combination of counties for the evaluation and treatment of minors
29 under this chapter.

30 (26) "Gravely disabled minor" means a minor who, as a result of a
31 behavioral health disorder, (a) is in danger of serious physical harm
32 resulting from a failure to provide for his or her essential human
33 needs of health or safety, or (b) manifests severe deterioration in
34 routine functioning evidenced by repeated and escalating loss of
35 cognitive or volitional control over his or her actions and is not
36 receiving such care as is essential for his or her health or safety.

37 (27) "Habilitative services" means those services provided by
38 program personnel to assist minors in acquiring and maintaining life
39 skills and in raising their levels of physical, behavioral, social,

1 and vocational functioning. Habilitative services include education,
2 training for employment, and therapy.

3 (28) "Hearing" means any proceeding conducted in open court that
4 conforms to the requirements of RCW 71.34.910.

5 (29) "History of one or more violent acts" refers to the period
6 of time five years prior to the filing of a petition under this
7 chapter, excluding any time spent, but not any violent acts
8 committed, in a mental health facility, a long-term (~~alcoholism or~~
9 ~~drug~~) substance use disorder treatment facility, or in confinement
10 as a result of a criminal conviction.

11 (30) "Individualized service plan" means a plan prepared by a
12 developmental disabilities professional with other professionals as a
13 team, for a person with developmental disabilities, which states:

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

16 (b) The conditions and strategies necessary to achieve the
17 purposes of habilitation;

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

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

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

23 (f) Where relevant in light of past criminal behavior and due
24 consideration for public safety, the criteria for proposed movement
25 to less-restrictive settings, criteria for proposed eventual
26 discharge or release, and a projected possible date for discharge or
27 release; and

28 (g) The type of residence immediately anticipated for the person
29 and possible future types of residences.

30 (31)(a) "Inpatient treatment" means twenty-four-hour-per-day
31 mental health care provided within a general hospital, psychiatric
32 hospital, residential treatment facility licensed or certified by the
33 department of health as an evaluation and treatment facility for
34 minors, secure withdrawal management and stabilization facility for
35 minors, or approved substance use disorder treatment program for
36 minors.

37 (b) For purposes of family-initiated treatment under RCW
38 71.34.600 through 71.34.670, "inpatient treatment" has the meaning
39 included in (a) of this subsection and any other residential
40 treatment facility licensed under chapter 71.12 RCW.

1 (32) "Intoxicated minor" means a minor whose mental or physical
2 functioning is substantially impaired as a result of the use of
3 alcohol or other psychoactive chemicals.

4 (33) "Judicial commitment" means a commitment by a court pursuant
5 to the provisions of this chapter.

6 (34) "Kinship caregiver" has the same meaning as in RCW
7 74.13.031(19) (a).

8 (35) "Legal counsel" means attorneys and staff employed by county
9 prosecutor offices or the state attorney general acting in their
10 capacity as legal representatives of public behavioral health service
11 providers under RCW 71.05.130.

12 (36) "Less restrictive alternative" or "less restrictive setting"
13 means outpatient treatment provided to a minor (~~who is not residing~~
14 ~~in a facility providing inpatient treatment as defined in this~~
15 ~~chapter~~) as a program of individualized treatment in a less
16 restrictive setting than inpatient treatment that includes the
17 services described in RCW 71.34.755, including residential treatment.

18 (37) "Licensed physician" means a person licensed to practice
19 medicine or osteopathic medicine and surgery in the state of
20 Washington.

21 (38) "Likelihood of serious harm" means:

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

31 (b) The minor has threatened the physical safety of another and
32 has a history of one or more violent acts.

33 (39) "Managed care organization" has the same meaning as provided
34 in RCW 71.24.025.

35 (40) "Medical clearance" means a physician or other health care
36 provider has determined that a person is medically stable and ready
37 for referral to the designated crisis responder.

38 (41) "Medical necessity" for inpatient care means a requested
39 service which is reasonably calculated to: (a) Diagnose, correct,
40 cure, or alleviate a mental disorder or substance use disorder; or

1 (b) prevent the progression of a mental disorder or substance use
2 disorder that endangers life or causes suffering and pain, or results
3 in illness or infirmity or threatens to cause or aggravate a
4 disability, or causes physical deformity or malfunction, and there is
5 no adequate less restrictive alternative available.

6 (42) "Mental disorder" means any organic, mental, or emotional
7 impairment that has substantial adverse effects on an individual's
8 cognitive or volitional functions. The presence of alcohol abuse,
9 drug abuse, juvenile criminal history, antisocial behavior, or
10 intellectual disabilities alone is insufficient to justify a finding
11 of "mental disorder" within the meaning of this section.

12 (43) "Mental health professional" means a psychiatrist,
13 psychiatric advanced registered nurse practitioner, physician
14 assistant working with a supervising psychiatrist, psychologist,
15 psychiatric nurse, social worker, and such other mental health
16 professionals as defined by rules adopted by the secretary of the
17 department of health under this chapter.

18 (44) "Minor" means any person under the age of eighteen years.

19 (45) "Outpatient treatment" means any of the nonresidential
20 services mandated under chapter 71.24 RCW and provided by licensed or
21 certified behavioral health agencies as identified by RCW 71.24.025.

22 (46)(a) "Parent" has the same meaning as defined in RCW
23 26.26A.010, including either parent if custody is shared under a
24 joint custody agreement, or a person or agency judicially appointed
25 as legal guardian or custodian of the child.

26 (b) For purposes of family-initiated treatment under RCW
27 71.34.600 through 71.34.670, "parent" also includes a person to whom
28 a parent defined in (a) of this subsection has given a signed
29 authorization to make health care decisions for the adolescent, a
30 stepparent who is involved in caring for the adolescent, a kinship
31 caregiver who is involved in caring for the adolescent, or another
32 relative who is responsible for the health care of the adolescent,
33 who may be required to provide a declaration under penalty of perjury
34 stating that he or she is a relative responsible for the health care
35 of the adolescent pursuant to chapter 5.50 RCW. If a dispute arises
36 between individuals authorized to act as a parent for the purpose of
37 RCW 71.34.600 through 71.34.670, the disagreement must be resolved
38 according to the priority established under RCW 7.70.065(2)(a).

39 (47) "Peace officer" means a law enforcement official of a public
40 agency or governmental unit, and includes persons specifically given

1 peace officer powers by any state law, local ordinance, or judicial
2 order of appointment.

3 (48) "Physician assistant" means a person licensed as a physician
4 assistant under chapter 18.71A RCW.

5 (49) "Private agency" means any person, partnership, corporation,
6 or association that is not a public agency, whether or not financed
7 in whole or in part by public funds, that constitutes an evaluation
8 and treatment facility or private institution, or hospital, or
9 approved substance use disorder treatment program, that is conducted
10 for, or includes a distinct unit, floor, 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.

13 (50) "Professional person in charge" or "professional person"
14 means a physician, other mental health professional, or other person
15 empowered by an evaluation and treatment facility, secure withdrawal
16 management and stabilization facility, or approved substance use
17 disorder treatment program with authority to make admission and
18 discharge decisions on behalf of that facility.

19 (51) "Psychiatric nurse" means a registered nurse who has
20 experience in the direct treatment of persons who have a mental
21 illness or who are emotionally disturbed, such experience gained
22 under the supervision of a mental health professional.

23 (52) "Psychiatrist" means a person having a license as a
24 physician in this state who has completed residency training in
25 psychiatry in a program approved by the American Medical Association
26 or the American Osteopathic Association, and is board eligible or
27 board certified in psychiatry.

28 (53) "Psychologist" means a person licensed as a psychologist
29 under chapter 18.83 RCW.

30 (54) "Public agency" means any evaluation and treatment facility
31 or institution, or hospital, or approved substance use disorder
32 treatment program that is conducted for, or includes a distinct unit,
33 floor, or ward conducted for, the care and treatment of persons with
34 mental illness, substance use disorders, or both mental illness and
35 substance use disorders if the agency is operated directly by
36 federal, state, county, or municipal government, or a combination of
37 such governments.

38 (55) "Release" means legal termination of the commitment under
39 the provisions of this chapter.

1 (56) "Resource management services" has the meaning given in
2 chapter 71.24 RCW.

3 (57) "Responsible other" means the minor, the minor's parent or
4 estate, or any other person legally responsible for support of the
5 minor.

6 (58) "Secretary" means the secretary of the department or
7 secretary's designee.

8 (59) "Secure withdrawal management and stabilization facility"
9 means a facility operated by either a public or private agency or by
10 the program of an agency which provides care to voluntary individuals
11 and individuals involuntarily detained and committed under this
12 chapter for whom there is a likelihood of serious harm or who are
13 gravely disabled due to the presence of a substance use disorder.
14 Secure withdrawal management and stabilization facilities must:

15 (a) Provide the following services:

16 (i) Assessment and treatment, provided by certified substance use
17 disorder professionals or co-occurring disorder specialists;

18 (ii) Clinical stabilization services;

19 (iii) Acute or subacute detoxification services for intoxicated
20 individuals; and

21 (iv) Discharge assistance provided by certified substance use
22 disorder professionals or co-occurring disorder specialists,
23 including facilitating transitions to appropriate voluntary or
24 involuntary inpatient services or to less restrictive alternatives as
25 appropriate for the individual;

26 (b) Include security measures sufficient to protect the patients,
27 staff, and community; and

28 (c) Be licensed or certified as such by the department of health.

29 (60) "Social worker" means a person with a master's or further
30 advanced degree from a social work educational program accredited and
31 approved as provided in RCW 18.320.010.

32 (61) "Start of initial detention" means the time of arrival of
33 the minor at the first evaluation and treatment facility, secure
34 withdrawal management and stabilization facility, or approved
35 substance use disorder treatment program offering inpatient treatment
36 if the minor is being involuntarily detained at the time. With regard
37 to voluntary patients, "start of initial detention" means the time at
38 which the minor gives notice of intent to leave under the provisions
39 of this chapter.

1 (62) "Store and forward technology" means use of an asynchronous
2 transmission of a person's medical information from a mental health
3 service provider to the designated crisis responder which results in
4 medical diagnosis, consultation, or treatment.

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

11 ~~((63))~~ (64) "Substance use disorder professional" means a
12 person certified as a substance use disorder professional by the
13 department of health under chapter 18.205 RCW.

14 ~~((64))~~ (65) "Therapeutic court personnel" means the staff of a
15 mental health court or other therapeutic court which has jurisdiction
16 over defendants who are dually diagnosed with mental disorders,
17 including court personnel, probation officers, a court monitor,
18 prosecuting attorney, or defense counsel acting within the scope of
19 therapeutic court duties.

20 ~~((65))~~ (66) "Treatment records" include registration and all
21 other records concerning persons who are receiving or who at any time
22 have received services for mental illness, which are maintained by
23 the department, the department of health, the authority, behavioral
24 health organizations and their staffs, and by treatment facilities.
25 Treatment records include mental health information contained in a
26 medical bill including but not limited to mental health drugs, a
27 mental health diagnosis, provider name, and dates of service stemming
28 from a medical service. Treatment records do not include notes or
29 records maintained for personal use by a person providing treatment
30 services for the department, the department of health, the authority,
31 behavioral health organizations, or a treatment facility if the notes
32 or records are not available to others.

33 ~~((66))~~ (67) "Triage facility" means a short-term facility or a
34 portion of a facility licensed or certified by the department of
35 health under RCW 71.24.035, which is designed as a facility to assess
36 and stabilize an individual or determine the need for involuntary
37 commitment of an individual, and must meet department of health
38 residential treatment facility standards. A triage facility may be
39 structured as a voluntary or involuntary placement facility.

1 ~~((67))~~ (68) "Video" means the delivery of behavioral health
2 services through the use of interactive audio and video technology,
3 permitting real-time communication between a person and a designated
4 crisis responder, for the purpose of evaluation. "Video" does not
5 include the use of audio-only telephone, facsimile, email, or store
6 and forward technology.

7 (69) "Violent act" means behavior that resulted in homicide,
8 attempted suicide, injury, or substantial loss or damage to property.

9 ~~((68) "Written order of apprehension" means an order of the~~
10 ~~court for a peace officer to deliver the named minor in the order to~~
11 ~~a facility or emergency room as determined by the designated crisis~~
12 ~~responder. Such orders must be entered into the Washington crime~~
13 ~~information center database.))~~

14 **Sec. 27.** RCW 71.34.020 and 2020 c 302 s 64, 2020 c 302 s 63,
15 2020 c 274 s 50, and 2020 c 185 s 2 are each reenacted and amended to
16 read as follows:

17 Unless the context clearly requires otherwise, the definitions in
18 this section apply throughout this chapter.

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

23 (2) "Adolescent" means a minor thirteen years of age or older.

24 (3) "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 (4) "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 (5) "Approved substance use disorder treatment program" means a
35 program for minors with substance use disorders provided by a
36 treatment program licensed or certified by the department of health
37 as meeting standards adopted under chapter 71.24 RCW.

1 (6) "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 minor patient.

4 (7) "Authority" means the Washington state health care authority.

5 (8) "Behavioral health administrative services organization" has
6 the same meaning as provided in RCW 71.24.025.

7 (9) "Behavioral health disorder" means either a mental disorder
8 as defined in this section, a substance use disorder as defined in
9 this section, or a co-occurring mental disorder and substance use
10 disorder.

11 (10) "Child psychiatrist" means a person having a license as a
12 physician and surgeon in this state, who has had graduate training in
13 child psychiatry in a program approved by the American Medical
14 Association or the American Osteopathic Association, and who is board
15 eligible or board certified in child psychiatry.

16 (11) "Children's mental health specialist" means:

17 (a) A mental health professional who has completed a minimum of
18 one hundred actual hours, not quarter or semester hours, of
19 specialized training devoted to the study of child development and
20 the treatment of children; and

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

24 (12) "Commitment" means a determination by a judge or court
25 commissioner, made after a commitment hearing, that the minor is in
26 need of inpatient diagnosis, evaluation, or treatment or that the
27 minor is in need of less restrictive alternative treatment.

28 (13) "Conditional release" means a revocable modification of a
29 commitment, which may be revoked upon violation of any of its terms.

30 (14) "Co-occurring disorder specialist" means an individual
31 possessing an enhancement granted by the department of health under
32 chapter 18.205 RCW that certifies the individual to provide substance
33 use disorder counseling subject to the practice limitations under RCW
34 18.205.105.

35 (15) "Crisis stabilization unit" means a short-term facility or a
36 portion of a facility licensed or certified by the department of
37 health under RCW 71.24.035, such as a residential treatment facility
38 or a hospital, which has been designed to assess, diagnose, and treat
39 individuals experiencing an acute crisis without the use of long-term
40 hospitalization.

1 (16) "Custody" means involuntary detention under the provisions
2 of this chapter or chapter 10.77 RCW, uninterrupted by any period of
3 unconditional release from commitment from a facility providing
4 involuntary care and treatment.

5 (17) "Department" means the department of social and health
6 services.

7 (18) "Designated crisis responder" has the same meaning as
8 provided in RCW 71.05.020.

9 (19) "Detention" or "detain" means the lawful confinement of a
10 person, under the provisions of this chapter.

11 (20) "Developmental disabilities professional" means a person who
12 has specialized training and three years of experience in directly
13 treating or working with persons with developmental disabilities and
14 is a psychiatrist, physician assistant working with a supervising
15 psychiatrist, psychologist, psychiatric advanced registered nurse
16 practitioner, or social worker, and such other developmental
17 disabilities professionals as may be defined by rules adopted by the
18 secretary of the department.

19 (21) "Developmental disability" has the same meaning as defined
20 in RCW 71A.10.020.

21 (22) "Director" means the director of the authority.

22 (23) "Discharge" means the termination of hospital medical
23 authority. The commitment may remain in place, be terminated, or be
24 amended by court order.

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

36 (25) "Evaluation and treatment program" means the total system of
37 services and facilities coordinated and approved by a county or
38 combination of counties for the evaluation and treatment of minors
39 under this chapter.

1 (26) "Gravely disabled minor" means a minor who, as a result of a
2 behavioral health disorder, (a) is in danger of serious physical harm
3 resulting from a failure to provide for his or her essential human
4 needs of health or safety, or (b) manifests severe deterioration from
5 safe behavior evidenced by repeated and escalating loss of cognitive
6 or volitional control over his or her actions and is not receiving
7 such care as is essential for his or her health or safety.

8 (27) "Habilitative services" means those services provided by
9 program personnel to assist minors in acquiring and maintaining life
10 skills and in raising their levels of physical, behavioral, social,
11 and vocational functioning. Habilitative services include education,
12 training for employment, and therapy.

13 (28) "Hearing" means any proceeding conducted in open court that
14 conforms to the requirements of RCW 71.34.910.

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

21 (30) "Individualized service plan" means a plan prepared by a
22 developmental disabilities professional with other professionals as a
23 team, for a person with developmental disabilities, which states:

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

26 (b) The conditions and strategies necessary to achieve the
27 purposes of habilitation;

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

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

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

33 (f) Where relevant in light of past criminal behavior and due
34 consideration for public safety, the criteria for proposed movement
35 to less-restrictive settings, criteria for proposed eventual
36 discharge or release, and a projected possible date for discharge or
37 release; and

38 (g) The type of residence immediately anticipated for the person
39 and possible future types of residences.

1 (31) (a) "Inpatient treatment" means twenty-four-hour-per-day
2 mental health care provided within a general hospital, psychiatric
3 hospital, residential treatment facility licensed or certified by the
4 department of health as an evaluation and treatment facility for
5 minors, secure withdrawal management and stabilization facility for
6 minors, or approved substance use disorder treatment program for
7 minors.

8 (b) For purposes of family-initiated treatment under RCW
9 71.34.600 through 71.34.670, "inpatient treatment" has the meaning
10 included in (a) of this subsection and any other residential
11 treatment facility licensed under chapter 71.12 RCW.

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

15 (33) "Judicial commitment" means a commitment by a court pursuant
16 to the provisions of this chapter.

17 (34) "Kinship caregiver" has the same meaning as in RCW
18 74.13.031(19) (a).

19 (35) "Legal counsel" means attorneys and staff employed by county
20 prosecutor offices or the state attorney general acting in their
21 capacity as legal representatives of public behavioral health service
22 providers under RCW 71.05.130.

23 (36) "Less restrictive alternative" or "less restrictive setting"
24 means outpatient treatment provided to a minor (~~who is not residing~~
25 ~~in a facility providing inpatient treatment as defined in this~~
26 ~~chapter~~) as a program of individualized treatment in a less
27 restrictive setting than inpatient treatment that includes the
28 services described in RCW 71.34.755, including residential treatment.

29 (37) "Licensed physician" means a person licensed to practice
30 medicine or osteopathic medicine and surgery in the state of
31 Washington.

32 (38) "Likelihood of serious harm" means:

33 (a) A substantial risk that: (i) Physical harm will be inflicted
34 by a minor upon his or her own person, as evidenced by threats or
35 attempts to commit suicide or inflict physical harm on oneself; (ii)
36 physical harm will be inflicted by a minor upon another individual,
37 as evidenced by behavior which has caused harm, substantial pain, or
38 which places another person or persons in reasonable fear of harm to
39 themselves or others; or (iii) physical harm will be inflicted by a

1 minor upon the property of others, as evidenced by behavior which has
2 caused substantial loss or damage to the property of others; or

3 (b) The minor has threatened the physical safety of another and
4 has a history of one or more violent acts.

5 (39) "Managed care organization" has the same meaning as provided
6 in RCW 71.24.025.

7 (40) "Medical clearance" means a physician or other health care
8 provider has determined that a person is medically stable and ready
9 for referral to the designated crisis responder.

10 (41) "Medical necessity" for inpatient care means a requested
11 service which is reasonably calculated to: (a) Diagnose, correct,
12 cure, or alleviate a mental disorder or substance use disorder; or
13 (b) prevent the progression of a mental disorder or substance use
14 disorder that endangers life or causes suffering and pain, or results
15 in illness or infirmity or threatens to cause or aggravate a
16 disability, or causes physical deformity or malfunction, and there is
17 no adequate less restrictive alternative available.

18 (42) "Mental disorder" means any organic, mental, or emotional
19 impairment that has substantial adverse effects on an individual's
20 cognitive or volitional functions. The presence of alcohol abuse,
21 drug abuse, juvenile criminal history, antisocial behavior, or
22 intellectual disabilities alone is insufficient to justify a finding
23 of "mental disorder" within the meaning of this section.

24 (43) "Mental health professional" means a psychiatrist,
25 psychiatric advanced registered nurse practitioner, physician
26 assistant working with a supervising psychiatrist, psychologist,
27 psychiatric nurse, social worker, and such other mental health
28 professionals as defined by rules adopted by the secretary of the
29 department of health under this chapter.

30 (44) "Minor" means any person under the age of eighteen years.

31 (45) "Outpatient treatment" means any of the nonresidential
32 services mandated under chapter 71.24 RCW and provided by licensed or
33 certified behavioral health agencies as identified by RCW 71.24.025.

34 (46)(a) "Parent" has the same meaning as defined in RCW
35 26.26A.010, including either parent if custody is shared under a
36 joint custody agreement, or a person or agency judicially appointed
37 as legal guardian or custodian of the child.

38 (b) For purposes of family-initiated treatment under RCW
39 71.34.600 through 71.34.670, "parent" also includes a person to whom
40 a parent defined in (a) of this subsection has given a signed

1 authorization to make health care decisions for the adolescent, a
2 stepparent who is involved in caring for the adolescent, a kinship
3 caregiver who is involved in caring for the adolescent, or another
4 relative who is responsible for the health care of the adolescent,
5 who may be required to provide a declaration under penalty of perjury
6 stating that he or she is a relative responsible for the health care
7 of the adolescent pursuant to chapter 5.50 RCW. If a dispute arises
8 between individuals authorized to act as a parent for the purpose of
9 RCW 71.34.600 through 71.34.670, the disagreement must be resolved
10 according to the priority established under RCW 7.70.065(2)(a).

11 (47) "Peace officer" means a law enforcement official of a public
12 agency or governmental unit, and includes persons specifically given
13 peace officer powers by any state law, local ordinance, or judicial
14 order of appointment.

15 (48) "Physician assistant" means a person licensed as a physician
16 assistant under chapter 18.57A or 18.71A RCW.

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

25 (50) "Professional person in charge" or "professional person"
26 means a physician, other mental health professional, or other person
27 empowered by an evaluation and treatment facility, secure withdrawal
28 management and stabilization facility, or approved substance use
29 disorder treatment program with authority to make admission and
30 discharge decisions on behalf of that facility.

31 (51) "Psychiatric nurse" means a registered nurse who has
32 experience in the direct treatment of persons who have a mental
33 illness or who are emotionally disturbed, such experience gained
34 under the supervision of a mental health professional.

35 (52) "Psychiatrist" means a person having a license as a
36 physician in this state who has completed residency training in
37 psychiatry in a program approved by the American Medical Association
38 or the American Osteopathic Association, and is board eligible or
39 board certified in psychiatry.

1 (53) "Psychologist" means a person licensed as a psychologist
2 under chapter 18.83 RCW.

3 (54) "Public agency" means any evaluation and treatment facility
4 or institution, or hospital, or approved substance use disorder
5 treatment program that is conducted for, or includes a distinct unit,
6 floor, or ward conducted for, the care and treatment of persons with
7 mental illness, substance use disorders, or both mental illness and
8 substance use disorders if the agency is operated directly by
9 federal, state, county, or municipal government, or a combination of
10 such governments.

11 (55) "Release" means legal termination of the commitment under
12 the provisions of this chapter.

13 (56) "Resource management services" has the meaning given in
14 chapter 71.24 RCW.

15 (57) "Responsible other" means the minor, the minor's parent or
16 estate, or any other person legally responsible for support of the
17 minor.

18 (58) "Secretary" means the secretary of the department or
19 secretary's designee.

20 (59) "Secure withdrawal management and stabilization facility"
21 means a facility operated by either a public or private agency or by
22 the program of an agency which provides care to voluntary individuals
23 and individuals involuntarily detained and committed under this
24 chapter for whom there is a likelihood of serious harm or who are
25 gravely disabled due to the presence of a substance use disorder.
26 Secure withdrawal management and stabilization facilities must:

27 (a) Provide the following services:

28 (i) Assessment and treatment, provided by certified substance use
29 disorder professionals or co-occurring disorder specialists;

30 (ii) Clinical stabilization services;

31 (iii) Acute or subacute detoxification services for intoxicated
32 individuals; and

33 (iv) Discharge assistance provided by certified substance use
34 disorder professionals or co-occurring disorder specialists,
35 including facilitating transitions to appropriate voluntary or
36 involuntary inpatient services or to less restrictive alternatives as
37 appropriate for the individual;

38 (b) Include security measures sufficient to protect the patients,
39 staff, and community; and

40 (c) Be licensed or certified as such by the department of health.

1 (60) "Severe deterioration from safe behavior" means that a
2 person will, if not treated, suffer or continue to suffer severe and
3 abnormal mental, emotional, or physical distress, and this distress
4 is associated with significant impairment of judgment, reason, or
5 behavior.

6 (61) "Social worker" means a person with a master's or further
7 advanced degree from a social work educational program accredited and
8 approved as provided in RCW 18.320.010.

9 (62) "Start of initial detention" means the time of arrival of
10 the minor at the first evaluation and treatment facility, secure
11 withdrawal management and stabilization facility, or approved
12 substance use disorder treatment program offering inpatient treatment
13 if the minor is being involuntarily detained at the time. With regard
14 to voluntary patients, "start of initial detention" means the time at
15 which the minor gives notice of intent to leave under the provisions
16 of this chapter.

17 (63) "Store and forward technology" means use of an asynchronous
18 transmission of a person's medical information from a mental health
19 service provider to the designated crisis responder which results in
20 medical diagnosis, consultation, or treatment.

21 (64) "Substance use disorder" means a cluster of cognitive,
22 behavioral, and physiological symptoms indicating that an individual
23 continues using the substance despite significant substance-related
24 problems. The diagnosis of a substance use disorder is based on a
25 pathological pattern of behaviors related to the use of the
26 substances.

27 ~~((64))~~ (65) "Substance use disorder professional" means a
28 person certified as a substance use disorder professional by the
29 department of health under chapter 18.205 RCW.

30 ~~((65))~~ (66) "Therapeutic court personnel" means the staff of a
31 mental health court or other therapeutic court which has jurisdiction
32 over defendants who are dually diagnosed with mental disorders,
33 including court personnel, probation officers, a court monitor,
34 prosecuting attorney, or defense counsel acting within the scope of
35 therapeutic court duties.

36 ~~((66))~~ (67) "Treatment records" include registration and all
37 other records concerning persons who are receiving or who at any time
38 have received services for mental illness, which are maintained by
39 the department, the department of health, the authority, behavioral
40 health organizations and their staffs, and by treatment facilities.

1 Treatment records include mental health information contained in a
2 medical bill including but not limited to mental health drugs, a
3 mental health diagnosis, provider name, and dates of service stemming
4 from a medical service. Treatment records do not include notes or
5 records maintained for personal use by a person providing treatment
6 services for the department, the department of health, the authority,
7 behavioral health organizations, or a treatment facility if the notes
8 or records are not available to others.

9 ~~((67))~~ (68) "Triage facility" means a short-term facility or a
10 portion of a facility licensed or certified by the department of
11 health under RCW 71.24.035, which is designed as a facility to assess
12 and stabilize an individual or determine the need for involuntary
13 commitment of an individual, and must meet department of health
14 residential treatment facility standards. A triage facility may be
15 structured as a voluntary or involuntary placement facility.

16 ~~((68))~~ (69) "Video" means the delivery of behavioral health
17 services through the use of interactive audio and video technology,
18 permitting real-time communication between a person and a designated
19 crisis responder, for the purpose of evaluation. "Video" does not
20 include the use of audio-only telephone, facsimile, email, or store
21 and forward technology.

22 (70) "Violent act" means behavior that resulted in homicide,
23 attempted suicide, injury, or substantial loss or damage to property.

24 ~~((69) "Written order of apprehension" means an order of the~~
25 ~~court for a peace officer to deliver the named minor in the order to~~
26 ~~a facility or emergency room as determined by the designated crisis~~
27 ~~responder. Such orders must be entered into the Washington crime~~
28 ~~information center database.))~~

29 **Sec. 28.** RCW 71.34.020 and 2020 c 302 s 64, 2020 c 302 s 63,
30 2020 c 274 s 50, 2020 c 185 s 2, and 2020 c 80 s 54 are each
31 reenacted and amended to read as follows:

32 Unless the context clearly requires otherwise, the definitions in
33 this section apply throughout this chapter.

34 (1) "Admission" or "admit" means a decision by a physician,
35 physician assistant, or psychiatric advanced registered nurse
36 practitioner that a minor should be examined or treated as a patient
37 in a hospital.

38 (2) "Adolescent" means a minor thirteen years of age or older.

1 (3) "Alcoholism" means a disease, characterized by a dependency
2 on alcoholic beverages, loss of control over the amount and
3 circumstances of use, symptoms of tolerance, physiological or
4 psychological withdrawal, or both, if use is reduced or discontinued,
5 and impairment of health or disruption of social or economic
6 functioning.

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

11 (5) "Approved substance use disorder treatment program" means a
12 program for minors with substance use disorders provided by a
13 treatment program licensed or certified by the department of health
14 as meeting standards adopted under chapter 71.24 RCW.

15 (6) "Attending staff" means any person on the staff of a public
16 or private agency having responsibility for the care and treatment of
17 a minor patient.

18 (7) "Authority" means the Washington state health care authority.

19 (8) "Behavioral health administrative services organization" has
20 the same meaning as provided in RCW 71.24.025.

21 (9) "Behavioral health disorder" means either a mental disorder
22 as defined in this section, a substance use disorder as defined in
23 this section, or a co-occurring mental disorder and substance use
24 disorder.

25 (10) "Child psychiatrist" means a person having a license as a
26 physician and surgeon in this state, who has had graduate training in
27 child psychiatry in a program approved by the American Medical
28 Association or the American Osteopathic Association, and who is board
29 eligible or board certified in child psychiatry.

30 (11) "Children's mental health specialist" means:

31 (a) A mental health professional who has completed a minimum of
32 one hundred actual hours, not quarter or semester hours, of
33 specialized training devoted to the study of child development and
34 the treatment of children; and

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

38 (12) "Commitment" means a determination by a judge or court
39 commissioner, made after a commitment hearing, that the minor is in

1 need of inpatient diagnosis, evaluation, or treatment or that the
2 minor is in need of less restrictive alternative treatment.

3 (13) "Conditional release" means a revocable modification of a
4 commitment, which may be revoked upon violation of any of its terms.

5 (14) "Co-occurring disorder specialist" means an individual
6 possessing an enhancement granted by the department of health under
7 chapter 18.205 RCW that certifies the individual to provide substance
8 use disorder counseling subject to the practice limitations under RCW
9 18.205.105.

10 (15) "Crisis stabilization unit" means a short-term facility or a
11 portion of a facility licensed or certified by the department of
12 health under RCW 71.24.035, such as a residential treatment facility
13 or a hospital, which has been designed to assess, diagnose, and treat
14 individuals experiencing an acute crisis without the use of long-term
15 hospitalization.

16 (16) "Custody" means involuntary detention under the provisions
17 of this chapter or chapter 10.77 RCW, uninterrupted by any period of
18 unconditional release from commitment from a facility providing
19 involuntary care and treatment.

20 (17) "Department" means the department of social and health
21 services.

22 (18) "Designated crisis responder" has the same meaning as
23 provided in RCW 71.05.020.

24 (19) "Detention" or "detain" means the lawful confinement of a
25 person, under the provisions of this chapter.

26 (20) "Developmental disabilities professional" means a person who
27 has specialized training and three years of experience in directly
28 treating or working with persons with developmental disabilities and
29 is a psychiatrist, physician assistant working with a supervising
30 psychiatrist, psychologist, psychiatric advanced registered nurse
31 practitioner, or social worker, and such other developmental
32 disabilities professionals as may be defined by rules adopted by the
33 secretary of the department.

34 (21) "Developmental disability" has the same meaning as defined
35 in RCW 71A.10.020.

36 (22) "Director" means the director of the authority.

37 (23) "Discharge" means the termination of hospital medical
38 authority. The commitment may remain in place, be terminated, or be
39 amended by court order.

1 (24) "Evaluation and treatment facility" means a public or
2 private facility or unit that is licensed or certified by the
3 department of health to provide emergency, inpatient, residential, or
4 outpatient mental health evaluation and treatment services for
5 minors. A physically separate and separately operated portion of a
6 state hospital may be designated as an evaluation and treatment
7 facility for minors. A facility which is part of or operated by the
8 state or federal agency does not require licensure or certification.
9 No correctional institution or facility, juvenile court detention
10 facility, or jail may be an evaluation and treatment facility within
11 the meaning of this chapter.

12 (25) "Evaluation and treatment program" means the total system of
13 services and facilities coordinated and approved by a county or
14 combination of counties for the evaluation and treatment of minors
15 under this chapter.

16 (26) "Gravely disabled minor" means a minor who, as a result of a
17 behavioral health disorder, (a) is in danger of serious physical harm
18 resulting from a failure to provide for his or her essential human
19 needs of health or safety, or (b) manifests severe deterioration from
20 safe behavior evidenced by repeated and escalating loss of cognitive
21 or volitional control over his or her actions and is not receiving
22 such care as is essential for his or her health or safety.

23 (27) "Habilitative services" means those services provided by
24 program personnel to assist minors in acquiring and maintaining life
25 skills and in raising their levels of physical, behavioral, social,
26 and vocational functioning. Habilitative services include education,
27 training for employment, and therapy.

28 (28) "Hearing" means any proceeding conducted in open court that
29 conforms to the requirements of RCW 71.34.910.

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

36 (30) "Individualized service plan" means a plan prepared by a
37 developmental disabilities professional with other professionals as a
38 team, for a person with developmental disabilities, which states:

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

1 (b) The conditions and strategies necessary to achieve the
2 purposes of habilitation;

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

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

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

8 (f) Where relevant in light of past criminal behavior and due
9 consideration for public safety, the criteria for proposed movement
10 to less-restrictive settings, criteria for proposed eventual
11 discharge or release, and a projected possible date for discharge or
12 release; and

13 (g) The type of residence immediately anticipated for the person
14 and possible future types of residences.

15 (31)(a) "Inpatient treatment" means twenty-four-hour-per-day
16 mental health care provided within a general hospital, psychiatric
17 hospital, residential treatment facility licensed or certified by the
18 department of health as an evaluation and treatment facility for
19 minors, secure withdrawal management and stabilization facility for
20 minors, or approved substance use disorder treatment program for
21 minors.

22 (b) For purposes of family-initiated treatment under RCW
23 71.34.600 through 71.34.670, "inpatient treatment" has the meaning
24 included in (a) of this subsection and any other residential
25 treatment facility licensed under chapter 71.12 RCW.

26 (32) "Intoxicated minor" means a minor whose mental or physical
27 functioning is substantially impaired as a result of the use of
28 alcohol or other psychoactive chemicals.

29 (33) "Judicial commitment" means a commitment by a court pursuant
30 to the provisions of this chapter.

31 (34) "Kinship caregiver" has the same meaning as in RCW
32 74.13.031(19)(a).

33 (35) "Legal counsel" means attorneys and staff employed by county
34 prosecutor offices or the state attorney general acting in their
35 capacity as legal representatives of public behavioral health service
36 providers under RCW 71.05.130.

37 (36) "Less restrictive alternative" or "less restrictive setting"
38 means outpatient treatment provided to a minor (~~who is not residing~~
39 ~~in a facility providing inpatient treatment as defined in this~~
40 ~~chapter~~) as a program of individualized treatment in a less

1 restrictive setting than inpatient treatment that includes the
2 services described in RCW 71.34.755, including residential treatment.

3 (37) "Licensed physician" means a person licensed to practice
4 medicine or osteopathic medicine and surgery in the state of
5 Washington.

6 (38) "Likelihood of serious harm" means:

7 (a) A substantial risk that: (i) Physical harm will be inflicted
8 by a minor upon his or her own person, as evidenced by threats or
9 attempts to commit suicide or inflict physical harm on oneself; (ii)
10 physical harm will be inflicted by a minor upon another individual,
11 as evidenced by behavior which has caused harm, substantial pain, or
12 which places another person or persons in reasonable fear of harm to
13 themselves or others; or (iii) physical harm will be inflicted by a
14 minor upon the property of others, as evidenced by behavior which has
15 caused substantial loss or damage to the property of others; or

16 (b) The minor has threatened the physical safety of another and
17 has a history of one or more violent acts.

18 (39) "Managed care organization" has the same meaning as provided
19 in RCW 71.24.025.

20 (40) "Medical clearance" means a physician or other health care
21 provider has determined that a person is medically stable and ready
22 for referral to the designated crisis responder.

23 (41) "Medical necessity" for inpatient care means a requested
24 service which is reasonably calculated to: (a) Diagnose, correct,
25 cure, or alleviate a mental disorder or substance use disorder; or
26 (b) prevent the progression of a mental disorder or substance use
27 disorder that endangers life or causes suffering and pain, or results
28 in illness or infirmity or threatens to cause or aggravate a
29 disability, or causes physical deformity or malfunction, and there is
30 no adequate less restrictive alternative available.

31 (42) "Mental disorder" means any organic, mental, or emotional
32 impairment that has substantial adverse effects on an individual's
33 cognitive or volitional functions. The presence of alcohol abuse,
34 drug abuse, juvenile criminal history, antisocial behavior, or
35 intellectual disabilities alone is insufficient to justify a finding
36 of "mental disorder" within the meaning of this section.

37 (43) "Mental health professional" means a psychiatrist,
38 psychiatric advanced registered nurse practitioner, physician
39 assistant working with a supervising psychiatrist, psychologist,
40 psychiatric nurse, social worker, and such other mental health

1 professionals as defined by rules adopted by the secretary of the
2 department of health under this chapter.

3 (44) "Minor" means any person under the age of eighteen years.

4 (45) "Outpatient treatment" means any of the nonresidential
5 services mandated under chapter 71.24 RCW and provided by licensed or
6 certified behavioral health agencies as identified by RCW 71.24.025.

7 (46) (a) "Parent" has the same meaning as defined in RCW
8 26.26A.010, including either parent if custody is shared under a
9 joint custody agreement, or a person or agency judicially appointed
10 as legal guardian or custodian of the child.

11 (b) For purposes of family-initiated treatment under RCW
12 71.34.600 through 71.34.670, "parent" also includes a person to whom
13 a parent defined in (a) of this subsection has given a signed
14 authorization to make health care decisions for the adolescent, a
15 stepparent who is involved in caring for the adolescent, a kinship
16 caregiver who is involved in caring for the adolescent, or another
17 relative who is responsible for the health care of the adolescent,
18 who may be required to provide a declaration under penalty of perjury
19 stating that he or she is a relative responsible for the health care
20 of the adolescent pursuant to chapter 5.50 RCW. If a dispute arises
21 between individuals authorized to act as a parent for the purpose of
22 RCW 71.34.600 through 71.34.670, the disagreement must be resolved
23 according to the priority established under RCW 7.70.065(2) (a).

24 (47) "Peace officer" means a law enforcement official of a public
25 agency or governmental unit, and includes persons specifically given
26 peace officer powers by any state law, local ordinance, or judicial
27 order of appointment.

28 (48) "Physician assistant" means a person licensed as a physician
29 assistant under chapter 18.71A RCW.

30 (49) "Private agency" means any person, partnership, corporation,
31 or association that is not a public agency, whether or not financed
32 in whole or in part by public funds, that constitutes an evaluation
33 and treatment facility or private institution, or hospital, or
34 approved substance use disorder treatment program, that is conducted
35 for, or includes a distinct unit, floor, or ward conducted for, the
36 care and treatment of persons with mental illness, substance use
37 disorders, or both mental illness and substance use disorders.

38 (50) "Professional person in charge" or "professional person"
39 means a physician, other mental health professional, or other person
40 empowered by an evaluation and treatment facility, secure withdrawal

1 management and stabilization facility, or approved substance use
2 disorder treatment program with authority to make admission and
3 discharge decisions on behalf of that facility.

4 (51) "Psychiatric nurse" means a registered nurse who has
5 experience in the direct treatment of persons who have a mental
6 illness or who are emotionally disturbed, such experience gained
7 under the supervision of a mental health professional.

8 (52) "Psychiatrist" means a person having a license as a
9 physician in this state who has completed residency training in
10 psychiatry in a program approved by the American Medical Association
11 or the American Osteopathic Association, and is board eligible or
12 board certified in psychiatry.

13 (53) "Psychologist" means a person licensed as a psychologist
14 under chapter 18.83 RCW.

15 (54) "Public agency" means any evaluation and treatment facility
16 or institution, or hospital, or approved substance use disorder
17 treatment program that is conducted for, or includes a distinct unit,
18 floor, or ward conducted for, the care and treatment of persons with
19 mental illness, substance use disorders, or both mental illness and
20 substance use disorders if the agency is operated directly by
21 federal, state, county, or municipal government, or a combination of
22 such governments.

23 (55) "Release" means legal termination of the commitment under
24 the provisions of this chapter.

25 (56) "Resource management services" has the meaning given in
26 chapter 71.24 RCW.

27 (57) "Responsible other" means the minor, the minor's parent or
28 estate, or any other person legally responsible for support of the
29 minor.

30 (58) "Secretary" means the secretary of the department or
31 secretary's designee.

32 (59) "Secure withdrawal management and stabilization facility"
33 means a facility operated by either a public or private agency or by
34 the program of an agency which provides care to voluntary individuals
35 and individuals involuntarily detained and committed under this
36 chapter for whom there is a likelihood of serious harm or who are
37 gravely disabled due to the presence of a substance use disorder.
38 Secure withdrawal management and stabilization facilities must:

39 (a) Provide the following services:

1 (i) Assessment and treatment, provided by certified substance use
2 disorder professionals or co-occurring disorder specialists;

3 (ii) Clinical stabilization services;

4 (iii) Acute or subacute detoxification services for intoxicated
5 individuals; and

6 (iv) Discharge assistance provided by certified substance use
7 disorder professionals or co-occurring disorder specialists,
8 including facilitating transitions to appropriate voluntary or
9 involuntary inpatient services or to less restrictive alternatives as
10 appropriate for the individual;

11 (b) Include security measures sufficient to protect the patients,
12 staff, and community; and

13 (c) Be licensed or certified as such by the department of health.

14 (60) "Severe deterioration from safe behavior" means that a
15 person will, if not treated, suffer or continue to suffer severe and
16 abnormal mental, emotional, or physical distress, and this distress
17 is associated with significant impairment of judgment, reason, or
18 behavior.

19 (61) "Social worker" means a person with a master's or further
20 advanced degree from a social work educational program accredited and
21 approved as provided in RCW 18.320.010.

22 ((+61)) (62) "Start of initial detention" means the time of
23 arrival of the minor at the first evaluation and treatment facility,
24 secure withdrawal management and stabilization facility, or approved
25 substance use disorder treatment program offering inpatient treatment
26 if the minor is being involuntarily detained at the time. With regard
27 to voluntary patients, "start of initial detention" means the time at
28 which the minor gives notice of intent to leave under the provisions
29 of this chapter.

30 ((+62)) (63) "Store and forward technology" means use of an
31 asynchronous transmission of a person's medical information from a
32 mental health service provider to the designated crisis responder
33 which results in medical diagnosis, consultation, or treatment.

34 (64) "Substance use disorder" means a cluster of cognitive,
35 behavioral, and physiological symptoms indicating that an individual
36 continues using the substance despite significant substance-related
37 problems. The diagnosis of a substance use disorder is based on a
38 pathological pattern of behaviors related to the use of the
39 substances.

1 ~~((63))~~ (65) "Substance use disorder professional" means a
2 person certified as a substance use disorder professional by the
3 department of health under chapter 18.205 RCW.

4 ~~((64) "Severe deterioration from safe behavior" means that a
5 person will, if not treated, suffer or continue to suffer severe and
6 abnormal mental, emotional, or physical distress, and this distress
7 is associated with significant impairment of judgment, reason, or
8 behavior.~~

9 ~~(65))~~ (66) "Therapeutic court personnel" means the staff of a
10 mental health court or other therapeutic court which has jurisdiction
11 over defendants who are dually diagnosed with mental disorders,
12 including court personnel, probation officers, a court monitor,
13 prosecuting attorney, or defense counsel acting within the scope of
14 therapeutic court duties.

15 ~~((66))~~ (67) "Treatment records" include registration and all
16 other records concerning persons who are receiving or who at any time
17 have received services for mental illness, which are maintained by
18 the department, the department of health, the authority, behavioral
19 health organizations and their staffs, and by treatment facilities.
20 Treatment records include mental health information contained in a
21 medical bill including but not limited to mental health drugs, a
22 mental health diagnosis, provider name, and dates of service stemming
23 from a medical service. Treatment records do not include notes or
24 records maintained for personal use by a person providing treatment
25 services for the department, the department of health, the authority,
26 behavioral health organizations, or a treatment facility if the notes
27 or records are not available to others.

28 ~~((67))~~ (68) "Triage facility" means a short-term facility or a
29 portion of a facility licensed or certified by the department of
30 health under RCW 71.24.035, which is designed as a facility to assess
31 and stabilize an individual or determine the need for involuntary
32 commitment of an individual, and must meet department of health
33 residential treatment facility standards. A triage facility may be
34 structured as a voluntary or involuntary placement facility.

35 ~~((68))~~ (69) "Video" means the delivery of behavioral health
36 services through the use of interactive audio and video technology,
37 permitting real-time communication between a person and a designated
38 crisis responder, for the purpose of evaluation. "Video" does not
39 include the use of audio-only telephone, facsimile, email, or store
40 and forward technology.

1 (70) "Violent act" means behavior that resulted in homicide,
2 attempted suicide, injury, or substantial loss or damage to property.

3 ~~((69) "Written order of apprehension" means an order of the
4 court for a peace officer to deliver the named minor in the order to
5 a facility or emergency room as determined by the designated crisis
6 responder. Such orders must be entered into the Washington crime
7 information center database.))~~

8 **Sec. 29.** 2020 c 302 s 111 (uncodified) is amended to read as
9 follows:

10 (1) Sections 64 and 81 (~~(of this act)~~), chapter 302, Laws of 2020
11 and, until July 1, 2022, section 27 of this act and, beginning July
12 1, 2022, section 28 of this act take effect when the average wait
13 time for children's long-term inpatient placement admission is 30
14 days or less for two consecutive quarters.

15 (2) The health care authority must provide written notice of the
16 effective date of sections 64 and 81 (~~(of this act)~~), chapter 302,
17 Laws of 2020 and sections 27 and 28 of this act to affected parties,
18 the chief clerk of the house of representatives, the secretary of the
19 senate, the office of the code reviser, and others as deemed
20 appropriate by the authority.

21 **Sec. 30.** RCW 71.34.705 and 2020 c 302 s 80 are each amended to
22 read as follows:

23 (1) Whenever a designated crisis responder or professional person
24 is conducting an evaluation under this chapter, the designated crisis
25 responder or professional person must consider all reasonably
26 available information from credible witnesses and records regarding:

27 (a) Historical behavior, including history of one or more violent
28 acts; and

29 (b) Prior commitments under this chapter.

30 (2) Credible witnesses may include family members, landlords,
31 neighbors, teachers, school personnel, or others with significant
32 contact and history of involvement with the minor. If the designated
33 crisis responder relies upon information from a credible witness in
34 reaching his or her decision to detain the minor, then he or she must
35 provide contact information for any such witness to the prosecutor.
36 The designated crisis responder or prosecutor shall provide notice of
37 the date, time, and location of the probable cause hearing to such a
38 witness.

1 (3) Symptoms and behavior of the minor which standing alone would
2 not justify civil commitment may support a finding of grave
3 disability or likelihood of serious harm, when:

4 (a) Such symptoms or behavior are closely associated with
5 symptoms or behavior which preceded and led to a past incident of
6 involuntary hospitalization, severe deterioration, or one or more
7 violent acts;

8 (b) These symptoms or behavior represent a marked and concerning
9 change in the baseline behavior of the minor; and

10 (c) Without treatment, the continued deterioration of the minor
11 is probable.

12 (4) The authority, in consultation with tribes and in
13 coordination with Indian health care providers and the American
14 Indian health commission of Washington state, shall establish written
15 guidelines by June 30, 2022, for conducting culturally appropriate
16 evaluations of American Indians or Alaska Natives.

17 **Sec. 31.** RCW 71.34.710 and 2020 c 302 s 83 are each amended to
18 read as follows:

19 (1)(a) When a designated crisis responder receives information
20 that an adolescent as a result of a behavioral health disorder
21 presents a likelihood of serious harm or is gravely disabled, has
22 investigated the specific facts alleged and of the credibility of the
23 person or persons providing the information, and has determined that
24 voluntary admission for inpatient treatment is not possible, the
25 designated crisis responder may take the adolescent, or cause the
26 adolescent to be taken, into custody and transported to an evaluation
27 and treatment facility, secure withdrawal management and
28 stabilization facility, or approved substance use disorder treatment
29 program providing inpatient treatment.

30 A secure withdrawal management and stabilization facility or
31 approved substance use disorder treatment program must be available
32 and have adequate space for the adolescent.

33 (b) If a designated crisis responder decides not to detain an
34 adolescent for evaluation and treatment under RCW 71.34.700(2), or
35 forty-eight hours have elapsed since a designated crisis responder
36 received a request for investigation and the designated crisis
37 responder has not taken action to have the adolescent detained, an
38 immediate family member or guardian or conservator of the adolescent,
39 or a federally recognized Indian tribe if the person is a member of

1 such tribe, may petition the superior court for the adolescent's
2 detention using the procedures under RCW 71.05.201 and 71.05.203;
3 however, when the court enters an order of initial detention, except
4 as otherwise expressly stated in this chapter, all procedures must be
5 followed as if the order has been entered under (a) of this
6 subsection.

7 (c) The interview performed by the designated crisis responder
8 may be conducted by video provided that a licensed health care
9 professional or professional person who can adequately and accurately
10 assist with obtaining any necessary information is present with the
11 person at the time of the interview.

12 (2)(a) Within twelve hours of the adolescent's arrival at the
13 evaluation and treatment facility, secure withdrawal management and
14 stabilization facility, or approved substance use disorder treatment
15 program, the designated crisis responder shall serve or cause to be
16 served on the adolescent a copy of the petition for initial
17 detention, notice of initial detention, and statement of rights. The
18 designated crisis responder shall file with the court on the next
19 judicial day following the initial detention the original petition
20 for initial detention, notice of initial detention, and statement of
21 rights along with an affidavit of service. The designated crisis
22 responder shall commence service of the petition for initial
23 detention and notice of the initial detention on the adolescent's
24 parent and the adolescent's attorney as soon as possible following
25 the initial detention.

26 (b) (~~(If the adolescent is involuntarily detained at an~~
27 ~~evaluation and treatment facility, secure withdrawal management and~~
28 ~~stabilization facility, or approved substance use disorder treatment~~
29 ~~program in a different county from where the adolescent was initially~~
30 ~~detained, the)) The facility or program may serve the adolescent,
31 notify the adolescent's parents and the adolescent's attorney, and
32 file with the court on the next judicial day following the initial
33 detention the original petition for initial detention, notice of
34 initial detention, and statement of rights along with an affidavit of
35 service when filing with the court at the request of the designated
36 crisis responder.~~

37 (3)(a) At the time of initial detention, the designated crisis
38 responder shall advise the adolescent both orally and in writing that
39 if admitted to the evaluation and treatment facility, secure
40 withdrawal management and stabilization facility, or approved

1 substance use disorder treatment program for inpatient treatment, a
2 commitment hearing shall be held within one hundred twenty hours of
3 the adolescent's provisional acceptance to determine whether probable
4 cause exists to commit the adolescent for further treatment.

5 (b) The adolescent shall be advised that he or she has a right to
6 communicate immediately with an attorney and that he or she has a
7 right to have an attorney appointed to represent him or her before
8 and at the hearing if the adolescent is indigent.

9 (4) Subject to subsection (5) of this section, whenever the
10 designated crisis responder petitions for detention of an adolescent
11 under this chapter, an evaluation and treatment facility, secure
12 withdrawal management and stabilization facility, or approved
13 substance use disorder treatment program providing one hundred twenty
14 hour evaluation and treatment must immediately accept on a
15 provisional basis the petition and the person. Within twenty-four
16 hours of the adolescent's arrival, the facility must evaluate the
17 adolescent's condition and either admit or release the adolescent in
18 accordance with this chapter.

19 (5) A designated crisis responder may not petition for detention
20 of an adolescent to a secure withdrawal management and stabilization
21 facility or approved substance use disorder treatment program unless
22 there is a secure withdrawal management and stabilization facility or
23 approved substance use disorder treatment program available and that
24 has adequate space for the adolescent.

25 (6) If an adolescent is not approved for admission by the
26 inpatient evaluation and treatment facility, secure withdrawal
27 management and stabilization facility, or approved substance use
28 disorder treatment program, the facility shall make such
29 recommendations and referrals for further care and treatment of the
30 adolescent as necessary.

31 (7) Dismissal of a commitment petition is not the appropriate
32 remedy for a violation of the timeliness requirements of this
33 section, based on the purpose of this chapter under RCW 71.34.010,
34 except in the few cases where the facility staff or the designated
35 crisis responder have totally disregarded the requirements of this
36 section.

37 (8) Tribal court orders for involuntary commitment shall be
38 recognized and enforced in accordance with superior court civil rule
39 82.5.

1 (9) In any investigation and evaluation of a juvenile under this
2 section in which the designated crisis responder knows, or has reason
3 to know, that the juvenile is an American Indian or Alaska Native who
4 receives medical or behavioral health services from a tribe within
5 this state, the designated crisis responder shall notify the tribe
6 and the Indian health care provider regarding whether or not a
7 petition for initial detention or involuntary outpatient treatment
8 will be filed. Notification shall be made in person or by telephonic
9 or electronic communication to the tribal contact listed in the
10 authority's tribal crisis coordination plan as soon as possible but
11 no later than three hours subject to the requirements in RCW
12 70.02.230 (2) (ee) and (3). A designated crisis responder may restrict
13 the release of information as necessary to comply with 42 C.F.R. Part
14 2.

15 **Sec. 32.** RCW 71.34.710 and 2020 c 302 s 84 are each amended to
16 read as follows:

17 (1) (a) When a designated crisis responder receives information
18 that an adolescent as a result of a behavioral health disorder
19 presents a likelihood of serious harm or is gravely disabled, has
20 investigated the specific facts alleged and of the credibility of the
21 person or persons providing the information, and has determined that
22 voluntary admission for inpatient treatment is not possible, the
23 designated crisis responder may take the adolescent, or cause the
24 adolescent to be taken, into custody and transported to an evaluation
25 and treatment facility, secure withdrawal management and
26 stabilization facility, or approved substance use disorder treatment
27 program providing inpatient treatment.

28 (b) If a designated crisis responder decides not to detain an
29 adolescent for evaluation and treatment under RCW 71.34.700(2), or
30 forty-eight hours have elapsed since a designated crisis responder
31 received a request for investigation and the designated crisis
32 responder has not taken action to have the adolescent detained, an
33 immediate family member or guardian or conservator of the adolescent,
34 or a federally recognized Indian tribe if the person is a member of
35 such tribe, may petition the superior court for the adolescent's
36 detention using the procedures under RCW 71.05.201 and 71.05.203;
37 however, when the court enters an order of initial detention, except
38 as otherwise expressly stated in this chapter, all procedures must be

1 followed as if the order has been entered under (a) of this
2 subsection.

3 (c) The interview performed by the designated crisis responder
4 may be conducted by video provided that a licensed health care
5 professional or professional person who can adequately and accurately
6 assist with obtaining any necessary information is present with the
7 person at the time of the interview.

8 (2)(a) Within twelve hours of the adolescent's arrival at the
9 evaluation and treatment facility, secure withdrawal management and
10 stabilization facility, or approved substance use disorder treatment
11 program, the designated crisis responder shall serve or cause to be
12 served on the adolescent a copy of the petition for initial
13 detention, notice of initial detention, and statement of rights. The
14 designated crisis responder shall file with the court on the next
15 judicial day following the initial detention the original petition
16 for initial detention, notice of initial detention, and statement of
17 rights along with an affidavit of service. The designated crisis
18 responder shall commence service of the petition for initial
19 detention and notice of the initial detention on the adolescent's
20 parent and the adolescent's attorney as soon as possible following
21 the initial detention.

22 (b) (~~((If the adolescent is involuntarily detained at an~~
23 ~~evaluation and treatment facility, secure withdrawal management and~~
24 ~~stabilization facility, or approved substance use disorder treatment~~
25 ~~program in a different county from where the adolescent was initially~~
26 ~~detained, the))~~ The facility or program may serve the adolescent,
27 notify the adolescent's parents and the adolescent's attorney, and
28 file with the court on the next judicial day following the initial
29 detention the original petition for initial detention, notice of
30 initial detention, and statement of rights along with an affidavit of
31 service when filing with the court at the request of the designated
32 crisis responder.

33 (3)(a) At the time of initial detention, the designated crisis
34 responder shall advise the adolescent both orally and in writing that
35 if admitted to the evaluation and treatment facility, secure
36 withdrawal management and stabilization facility, or approved
37 substance use disorder treatment program for inpatient treatment, a
38 commitment hearing shall be held within one hundred twenty hours of
39 the adolescent's provisional acceptance to determine whether probable
40 cause exists to commit the adolescent for further treatment.

1 (b) The adolescent shall be advised that he or she has a right to
2 communicate immediately with an attorney and that he or she has a
3 right to have an attorney appointed to represent him or her before
4 and at the hearing if the adolescent is indigent.

5 (4) Whenever the designated crisis responder petitions for
6 detention of an adolescent under this chapter, an evaluation and
7 treatment facility, secure withdrawal management and stabilization
8 facility, or approved substance use disorder treatment program
9 providing one hundred twenty hour evaluation and treatment must
10 immediately accept on a provisional basis the petition and the
11 person. Within twenty-four hours of the adolescent's arrival, the
12 facility must evaluate the adolescent's condition and either admit or
13 release the adolescent in accordance with this chapter.

14 (5) If an adolescent is not approved for admission by the
15 inpatient evaluation and treatment facility, secure withdrawal
16 management and stabilization facility, or approved substance use
17 disorder treatment program, the facility shall make such
18 recommendations and referrals for further care and treatment of the
19 adolescent as necessary.

20 (6) Dismissal of a commitment petition is not the appropriate
21 remedy for a violation of the timeliness requirements of this
22 section, based on the purpose of this chapter under RCW 71.34.010,
23 except in the few cases where the facility staff or the designated
24 crisis responder have totally disregarded the requirements of this
25 section.

26 (7) Tribal court orders for involuntary commitment shall be
27 recognized and enforced in accordance with superior court civil rule
28 82.5.

29 (8) In any investigation and evaluation of a juvenile under this
30 section in which the designated crisis responder knows, or has reason
31 to know, that the juvenile is an American Indian or Alaska Native who
32 receives medical or behavioral health services from a tribe within
33 this state, the designated crisis responder shall notify the tribe
34 and the Indian health care provider regarding whether or not a
35 petition for initial detention or involuntary outpatient treatment
36 will be filed. Notification shall be made in person or by telephonic
37 or electronic communication to the tribal contact listed in the
38 authority's tribal crisis coordination plan as soon as possible but
39 no later than three hours subject to the requirements in RCW
40 70.02.230 (2) (ee) and (3). A designated crisis responder may restrict

1 the release of information as necessary to comply with 42 C.F.R. Part
2 2.

3 **Sec. 33.** RCW 71.34.720 and 2020 c 302 s 86 are each amended to
4 read as follows:

5 (1) Each minor approved by the facility for inpatient admission
6 shall be examined and evaluated by a children's mental health
7 specialist, for minors admitted as a result of a mental disorder, or
8 by a substance use disorder professional or co-occurring disorder
9 specialist, for minors admitted as a result of a substance use
10 disorder, as to the child's mental condition and by a physician,
11 physician assistant, or psychiatric advanced registered nurse
12 practitioner as to the child's physical condition within twenty-four
13 hours of admission. Reasonable measures shall be taken to ensure
14 medical treatment is provided for any condition requiring immediate
15 medical attention.

16 (2) If, (~~after~~) at any time during the involuntary treatment
17 hold and following the initial examination and evaluation, the
18 children's mental health specialist or substance use disorder
19 specialist and the physician, physician assistant, or psychiatric
20 advanced registered nurse practitioner determine that the initial
21 needs of the minor, if detained to an evaluation and treatment
22 facility, would be better served by placement in a secure withdrawal
23 management and stabilization facility or approved substance use
24 disorder treatment program or, if detained to a secure withdrawal
25 management and stabilization facility or approved substance use
26 disorder treatment program, would be better served in an evaluation
27 and treatment facility, then the minor shall be referred to the more
28 appropriate placement for the remainder of the current commitment
29 period without any need for further court review; however a minor may
30 only be referred to a secure withdrawal management and stabilization
31 facility or approved substance use disorder treatment program if
32 there is a secure withdrawal management and stabilization facility or
33 approved substance use disorder treatment program available and that
34 has adequate space for the minor.

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

37 (4) During the initial one hundred twenty hour treatment period,
38 the minor has a right to associate or receive communications from
39 parents or others unless the professional person in charge determines

1 that such communication would be seriously detrimental to the minor's
2 condition or treatment and so indicates in the minor's clinical
3 record, and notifies the minor's parents of this determination. A
4 minor must not be denied the opportunity to consult an attorney
5 unless there is an immediate risk of harm to the minor or others.

6 (5) If the evaluation and treatment facility, secure withdrawal
7 management and stabilization facility, or approved substance use
8 disorder treatment program admits the minor, it may detain the minor
9 for evaluation and treatment for a period not to exceed one hundred
10 twenty hours from the time of provisional acceptance. The computation
11 of such one hundred twenty hour period shall exclude Saturdays,
12 Sundays, and holidays. This initial treatment period shall not exceed
13 one hundred twenty hours except when an application for voluntary
14 inpatient treatment is received or a petition for fourteen-day
15 commitment is filed.

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

18 **Sec. 34.** RCW 71.34.720 and 2020 c 302 s 87 are each amended to
19 read as follows:

20 (1) Each minor approved by the facility for inpatient admission
21 shall be examined and evaluated by a children's mental health
22 specialist, for minors admitted as a result of a mental disorder, or
23 by a substance use disorder professional or co-occurring disorder
24 specialist, for minors admitted as a result of a substance use
25 disorder, as to the child's mental condition and by a physician,
26 physician assistant, or psychiatric advanced registered nurse
27 practitioner as to the child's physical condition within twenty-four
28 hours of admission. Reasonable measures shall be taken to ensure
29 medical treatment is provided for any condition requiring immediate
30 medical attention.

31 (2) If, ~~((after))~~ at any time during the involuntary treatment
32 hold and following the initial examination and evaluation, the
33 children's mental health specialist or substance use disorder
34 specialist and the physician, physician assistant, or psychiatric
35 advanced registered nurse practitioner determine that the initial
36 needs of the minor, if detained to an evaluation and treatment
37 facility, would be better served by placement in a secure withdrawal
38 management and stabilization facility or approved substance use
39 disorder treatment program or, if detained to a secure withdrawal

1 management and stabilization facility or approved substance use
2 disorder treatment program, would be better served in an evaluation
3 and treatment facility, then the minor shall be referred to the more
4 appropriate placement for the remainder of the current commitment
5 period without any need for further court review.

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

8 (4) During the initial one hundred twenty hour treatment period,
9 the minor has a right to associate or receive communications from
10 parents or others unless the professional person in charge determines
11 that such communication would be seriously detrimental to the minor's
12 condition or treatment and so indicates in the minor's clinical
13 record, and notifies the minor's parents of this determination. A
14 minor must not be denied the opportunity to consult an attorney
15 unless there is an immediate risk of harm to the minor or others.

16 (5) If the evaluation and treatment facility, secure withdrawal
17 management and stabilization facility, or approved substance use
18 disorder treatment program admits the minor, it may detain the minor
19 for evaluation and treatment for a period not to exceed one hundred
20 twenty hours from the time of provisional acceptance. The computation
21 of such one hundred twenty hour period shall exclude Saturdays,
22 Sundays, and holidays. This initial treatment period shall not exceed
23 one hundred twenty hours except when an application for voluntary
24 inpatient treatment is received or a petition for fourteen-day
25 commitment is filed.

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

28 NEW SECTION. **Sec. 35.** Sections 1, 3, 6, 8, 10, 14, 31, and 33
29 of this act expire July 1, 2026.

30 NEW SECTION. **Sec. 36.** Sections 2, 4, 7, 9, 11, 15, 32, and 34
31 of this act take effect July 1, 2026.

32 NEW SECTION. **Sec. 37.** Sections 20 and 25 of this act expire
33 July 1, 2022.

34 NEW SECTION. **Sec. 38.** Sections 21 and 26 of this act take
35 effect July 1, 2022.

1 NEW SECTION. **Sec. 39.** Sections 25, 27, and 31 of this act are
2 necessary for the immediate preservation of the public peace, health,
3 or safety, or support of the state government and its existing public
4 institutions, and take effect immediately.

5 NEW SECTION. **Sec. 40.** If specific funding for the purposes of
6 this act, referencing this act by bill or chapter number, is not
7 provided by June 30, 2021, in the omnibus appropriations act, this
8 act is null and void."

9 Correct the title.

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