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**SUBSTITUTE SENATE BILL 5655**

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**State of Washington**

**67th Legislature**

**2022 Regular Session**

**By** Senate Behavioral Health Subcommittee to Health & Long Term Care  
(originally sponsored by Senators Dhingra, Lovick, and C. Wilson)

READ FIRST TIME 01/31/22.

1 AN ACT Relating to individuals who experience refusals of service  
2 for involuntary behavioral health treatment; creating new sections;  
3 and providing an expiration date.

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

5 NEW SECTION. **Sec. 1.** The legislature finds that over 30 percent  
6 of individuals currently at our state hospitals receiving forensic  
7 services are repeat patients. Many individuals in our state hospitals  
8 are individuals whose needs were not met when they were first  
9 referred for civil commitment. There is a subset of forensic patients  
10 who end up at a state hospital because their needs were not met in  
11 the civil system. Their unmet needs contribute to their involvement  
12 in the criminal justice system. As a state we need to provide an  
13 appropriate level of care to individuals when they are first  
14 identified as needing that care, instead of giving them the care they  
15 need through our forensic system. The consistent increase in numbers  
16 and acuity of forensic patients at our state hospitals is  
17 unacceptable, and solutions for this population have to be found.

18 NEW SECTION. **Sec. 2.** (1)(a) A task force is established on  
19 individuals who experience refusals of service for involuntary  
20 behavioral health treatment and then are referred to our state

1 hospitals for forensic competency evaluation and restoration  
2 services, with members as provided in this subsection.

3 (i) The president of the senate shall appoint one member from  
4 each of the two largest caucuses of the senate.

5 (ii) The speaker of the house of representatives shall appoint  
6 one member from each of the two largest caucuses of the house of  
7 representatives.

8 (iii) The governor shall appoint the following members:

9 (A) The director of the health care authority or his or her  
10 designee;

11 (B) The secretary of the department of social and health services  
12 or his or her designee;

13 (C) The chief executive officer of western state hospital or his  
14 or her designee;

15 (D) The chief executive officer of eastern state hospital or his  
16 or her designee;

17 (E) The Washington state attorney general or his or her designee;

18 (F) Two individuals with lived experience of involuntary civil  
19 commitment for behavioral health;

20 (G) Two individuals with lived experience as a family member of a  
21 person who experienced involuntary civil commitment for behavioral  
22 health; and

23 (H) A representative of:

24 (I) The Washington state hospital association;

25 (II) The Washington designated crisis responder association;

26 (III) Behavioral health administrative services organizations;

27 (IV) King county;

28 (V) Spokane county;

29 (VI) The Washington association of prosecuting attorneys;

30 (VII) The Washington defender association; and

31 (VIII) A services provider for forensically involved individuals.

32 (b) The task force shall choose as its cochairs one person from  
33 among its legislative members and one person from among its executive  
34 branch members. The health care authority shall convene the first  
35 meeting of the task force by June 30, 2022.

36 (2) The task force shall review the following issues in terms of  
37 those individuals who have a history of one or more acts of violence:

38 (a) Solutions to provide appropriate treatment for persons who  
39 experience difficulty obtaining placement in local evaluation and  
40 treatment facilities or secure withdrawal management and

1 stabilization facilities due to a history of one or more violent acts  
2 as that term is defined under chapter 71.05 RCW;

3 (b) Solutions to reduce the need for the use of single bed  
4 certifications under RCW 71.05.745 based on unavailability of  
5 appropriate alternative placements;

6 (c) Solutions to reduce the need for filing no bed available  
7 reports under RCW 71.05.750; and

8 (d) Acceptable procedures for obtaining needed medical clearance  
9 for involuntary treatment with a goal to reduce or avoid the use of  
10 emergency departments.

11 (3) Staff support for the task force must be provided by the  
12 health care authority.

13 (4) Legislative members of the task force are reimbursed for  
14 travel expenses in accordance with RCW 44.04.120. Nonlegislative  
15 members are not entitled to be reimbursed for travel expenses if they  
16 are elected officials or are participating on behalf of an employer,  
17 governmental entity, or other organization. Any reimbursement for  
18 other nonlegislative members is subject to chapter 43.03 RCW.

19 (5) Task force expenditures for legislative members are subject  
20 to approval by the senate facilities and operations committee and the  
21 house of representatives executive rules committee, or their  
22 successor committees.

23 (6) The task force shall report preliminary findings and  
24 recommendations to the governor and appropriate committees of the  
25 legislature by October 15, 2022, and issue its final recommendations  
26 to the governor and appropriate committees of the legislature by  
27 December 1, 2022.

28 (7) This section expires June 30, 2023.

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