

CERTIFICATION OF ENROLLMENT

SUBSTITUTE SENATE BILL 5073

Chapter 264, Laws of 2021

67th Legislature
2021 Regular Session

INVOLUNTARY COMMITMENT—VARIOUS PROVISIONS

EFFECTIVE DATE: July 25, 2021—Except for sections 2, 4, 7, 9, 11, 15, 32, and 34, which take effect July 1, 2026; sections 21 and 26, which take effect July 1, 2022; sections 22, 23, 27, and 28, which are contingent; and sections 25 and 31, which take effect May 12, 2021.

Passed by the Senate April 14, 2021
Yeas 46 Nays 2

DENNY HECK

President of the Senate

Passed by the House April 7, 2021
Yeas 87 Nays 10

Laurie Jinkins

**Speaker of the House of
Representatives**

Approved May 12, 2021 2:45 PM

JAY INSLEE

Governor of the State of Washington

CERTIFICATE

I, Brad Hendrickson, Secretary of the Senate of the State of Washington, do hereby certify that the attached is **SUBSTITUTE SENATE BILL 5073** as passed by the Senate and the House of Representatives on the dates hereon set forth.

BRAD HENDRICKSON

Secretary

FILED

May 12, 2021

**Secretary of State
State of Washington**

SUBSTITUTE SENATE BILL 5073

AS AMENDED BY THE HOUSE

Passed Legislature - 2021 Regular Session

State of Washington 67th Legislature 2021 Regular Session

By Senate Behavioral Health Subcommittee to Health & Long Term Care
(originally sponsored by Senators Dhingra, Das, Kuderer, Salomon,
Warnick, and Wilson, C.)

READ FIRST TIME 01/25/21.

1 AN ACT Relating to improving involuntary commitment laws;
2 amending RCW 71.05.203, 71.05.210, 71.05.210, 71.05.240, 71.05.240,
3 71.05.320, 71.05.320, 71.05.340, 71.05.585, 71.05.590, 71.05.590,
4 71.34.755, 70.02.230, 70.02.240, 71.05.425, 71.34.705, 71.34.710,
5 71.34.710, 71.34.720, and 71.34.720; amending 2020 c 302 ss 110 and
6 111 (uncodified); reenacting and amending RCW 71.05.150, 71.05.150,
7 71.05.153, 71.05.153, 71.05.020, 71.05.020, 71.05.020, 71.05.020,
8 71.34.020, 71.34.020, 71.34.020, and 71.34.020; creating a new
9 section; providing effective dates; providing contingent effective
10 dates; providing expiration dates; and declaring an emergency.

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

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

14 (1) When a designated crisis responder receives information
15 alleging that a person, as a result of a behavioral health disorder,
16 presents a likelihood of serious harm or is gravely disabled, or that
17 a person is in need of assisted outpatient behavioral health
18 treatment; the designated crisis responder may, after investigation
19 and evaluation of the specific facts alleged and of the reliability
20 and credibility of any person providing information to initiate
21 detention or involuntary outpatient treatment, if satisfied that the

1 allegations are true and that the person will not voluntarily seek
2 appropriate treatment, file a petition for initial detention under
3 this section or a petition for involuntary outpatient behavioral
4 health treatment under RCW 71.05.148. Before filing the petition, the
5 designated crisis responder must personally interview the person,
6 unless the person refuses an interview, and determine whether the
7 person will voluntarily receive appropriate evaluation and treatment
8 at an evaluation and treatment facility, crisis stabilization unit,
9 triage facility, secure withdrawal management and stabilization
10 facility, or approved substance use disorder treatment program. As
11 part of the assessment, the designated crisis responder must attempt
12 to ascertain if the person has executed a mental health advance
13 directive under chapter 71.32 RCW. The interview performed by the
14 designated crisis responder may be conducted by video provided that a
15 licensed health care professional or professional person who can
16 adequately and accurately assist with obtaining any necessary
17 information is present with the person at the time of the interview.

18 (2) (a) A (~~written order of apprehension~~) superior court judge
19 may issue a warrant to detain a person with a behavioral health
20 disorder to a designated evaluation and treatment facility, a secure
21 withdrawal management and stabilization facility, or an approved
22 substance use disorder treatment program, for a period of not more
23 than one hundred twenty hours for evaluation and treatment (~~(, may be~~
24 ~~issued by a judge of the superior court)~~) upon request of a
25 designated crisis responder, subject to (d) of this subsection,
26 whenever it appears to the satisfaction of ((a)) the judge (~~(of the~~
27 ~~superior court)~~) that:

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

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

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

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

1 (d) A court may not issue an order to detain a person to a secure
2 withdrawal management and stabilization facility or approved
3 substance use disorder treatment program unless there is an available
4 secure withdrawal management and stabilization facility or approved
5 substance use disorder treatment program that has adequate space for
6 the person.

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

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

33 (4) The designated crisis responder may notify a peace officer to
34 take such person or cause such person to be taken into custody and
35 placed in an evaluation and treatment facility, secure withdrawal
36 management and stabilization facility, or approved substance use
37 disorder treatment program. At the time such person is taken into
38 custody there shall commence to be served on such person, his or her
39 guardian, and conservator, if any, a copy of the original order

1 together with a notice of rights and a petition for initial
2 detention.

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

9 ~~(6))~~ Tribal court orders for involuntary commitment shall be
10 recognized and enforced in accordance with superior court civil rule
11 82.5.

12 ~~((7))~~ (6) In any investigation and evaluation of an individual
13 under RCW 71.05.150 or 71.05.153 in which the designated crisis
14 responder knows, or has reason to know, that the individual is an
15 American Indian or Alaska Native who receives medical or behavioral
16 health services from a tribe within this state, the designated crisis
17 responder shall notify the tribe ~~((e))~~ and Indian health care
18 provider regarding whether or not a petition for initial detention or
19 involuntary outpatient treatment will be filed. Notification shall be
20 made in person or by telephonic or electronic communication to the
21 tribal contact listed in the authority's tribal crisis coordination
22 plan as soon as possible but no later than three hours subject to the
23 requirements in RCW 70.02.230 (2) ~~((dd))~~ (ee) and (3). A designated
24 crisis responder may restrict the release of information as necessary
25 to comply with 42 C.F.R. Part 2.

26 **Sec. 2.** RCW 71.05.150 and 2020 c 302 s 14, 2020 c 256 s 303, and
27 2020 c 5 s 3 are each reenacted and amended to read as follows:

28 (1) When a designated crisis responder receives information
29 alleging that a person, as a result of a behavioral health disorder,
30 presents a likelihood of serious harm or is gravely disabled, or that
31 a person is in need of assisted outpatient behavioral health
32 treatment; the designated crisis responder may, after investigation
33 and evaluation of the specific facts alleged and of the reliability
34 and credibility of any person providing information to initiate
35 detention or involuntary outpatient treatment, if satisfied that the
36 allegations are true and that the person will not voluntarily seek
37 appropriate treatment, file a petition for initial detention under
38 this section or a petition for involuntary outpatient behavioral
39 health treatment under RCW 71.05.148. Before filing the petition, the

1 designated crisis responder must personally interview the person,
2 unless the person refuses an interview, and determine whether the
3 person will voluntarily receive appropriate evaluation and treatment
4 at an evaluation and treatment facility, crisis stabilization unit,
5 triage facility, secure withdrawal management and stabilization
6 facility, or approved substance use disorder treatment program. As
7 part of the assessment, the designated crisis responder must attempt
8 to ascertain if the person has executed a mental health advance
9 directive under chapter 71.32 RCW. The interview performed by the
10 designated crisis responder may be conducted by video provided that a
11 licensed health care professional or professional person who can
12 adequately and accurately assist with obtaining any necessary
13 information is present with the person at the time of the interview.

14 (2) (a) A (~~written order of apprehension~~) superior court judge
15 may issue a warrant to detain a person with a behavioral health
16 disorder to a designated evaluation and treatment facility, a secure
17 withdrawal management and stabilization facility, or an approved
18 substance use disorder treatment program, for a period of not more
19 than one hundred twenty hours for evaluation and treatment (~~(, may be~~
20 ~~issued by a judge of the superior court)~~) upon request of a
21 designated crisis responder whenever it appears to the satisfaction
22 of ((a)) the judge (~~(of the superior court)~~) that:

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

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

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

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

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

38 (3) The designated crisis responder shall then serve or cause to
39 be served on such person, his or her guardian, and conservator, if
40 any, a copy of the order together with a notice of rights, and a

1 petition for initial detention. After service on such person the
2 designated crisis responder shall file the return of service in court
3 and provide copies of all papers in the court file to the evaluation
4 and treatment facility, secure withdrawal management and
5 stabilization facility, or approved substance use disorder treatment
6 program, and the designated attorney. The designated crisis responder
7 shall notify the court and the prosecuting attorney that a probable
8 cause hearing will be held within one hundred twenty hours of the
9 date and time of outpatient evaluation or admission to the evaluation
10 and treatment facility, secure withdrawal management and
11 stabilization facility, or approved substance use disorder treatment
12 program. The person shall be permitted to be accompanied by one or
13 more of his or her relatives, friends, an attorney, a personal
14 physician, or other professional or religious advisor to the place of
15 evaluation. An attorney accompanying the person to the place of
16 evaluation shall be permitted to be present during the admission
17 evaluation. Any other individual accompanying the person may be
18 present during the admission evaluation. The facility may exclude the
19 individual if his or her presence would present a safety risk, delay
20 the proceedings, or otherwise interfere with the evaluation.

21 (4) The designated crisis responder may notify a peace officer to
22 take such person or cause such person to be taken into custody and
23 placed in an evaluation and treatment facility, secure withdrawal
24 management and stabilization facility, or approved substance use
25 disorder treatment program. At the time such person is taken into
26 custody there shall commence to be served on such person, his or her
27 guardian, and conservator, if any, a copy of the original order
28 together with a notice of rights and a petition for initial
29 detention.

30 ~~(5) ((An Indian tribe shall have jurisdiction exclusive to the~~
31 ~~state as to any involuntary commitment of an American Indian or~~
32 ~~Alaska Native to an evaluation and treatment facility located within~~
33 ~~the boundaries of that tribe, unless the tribe has consented to the~~
34 ~~state's concurrent jurisdiction, or the tribe has expressly declined~~
35 ~~to exercise its exclusive jurisdiction.~~

36 ~~(6))~~ Tribal court orders for involuntary commitment shall be
37 recognized and enforced in accordance with superior court civil rule
38 82.5.

39 ~~((7))~~ (6) In any investigation and evaluation of an individual
40 under RCW 71.05.150 or 71.05.153 in which the designated crisis

1 responder knows, or has reason to know, that the individual is an
2 American Indian or Alaska Native who receives medical or behavioral
3 health services from a tribe within this state, the designated crisis
4 responder shall notify the tribe (~~(ee)~~) and Indian health care
5 provider regarding whether or not a petition for initial detention or
6 involuntary outpatient treatment will be filed. Notification shall be
7 made in person or by telephonic or electronic communication to the
8 tribal contact listed in the authority's tribal crisis coordination
9 plan as soon as possible but no later than three hours subject to the
10 requirements in RCW 70.02.230 (2) (~~(dd)~~) (ee) and (3). A designated
11 crisis responder may restrict the release of information as necessary
12 to comply with 42 C.F.R. Part 2.

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

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

29 (2)(a) Subject to (b) of this subsection, a peace officer may
30 take or cause such person to be taken into custody and immediately
31 delivered to a triage facility, crisis stabilization unit, evaluation
32 and treatment facility, secure withdrawal management and
33 stabilization facility, approved substance use disorder treatment
34 program, or the emergency department of a local hospital under the
35 following circumstances:

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

37 (ii) When he or she has reasonable cause to believe that such
38 person is suffering from a behavioral health disorder and presents an

1 imminent likelihood of serious harm or is in imminent danger because
2 of being gravely disabled.

3 (b) A peace officer's delivery of a person, to a secure
4 withdrawal management and stabilization facility or approved
5 substance use disorder treatment program is subject to the
6 availability of a secure withdrawal management and stabilization
7 facility or approved substance use disorder treatment program with
8 adequate space for the person.

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

17 (4) Within three hours after arrival, not counting time periods
18 prior to medical clearance, the person must be examined by a mental
19 health professional or substance use disorder professional. Within
20 twelve hours of notice of the need for evaluation, not counting time
21 periods prior to medical clearance, the designated crisis responder
22 must determine whether the individual meets detention criteria. 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 If the individual is detained, the designated crisis responder shall
31 file a petition for detention or a supplemental petition as
32 appropriate and commence service on the designated attorney for the
33 detained person. If the individual is released to the community, the
34 behavioral health service provider shall inform the peace officer of
35 the release within a reasonable period of time after the release if
36 the peace officer has specifically requested notification and
37 provided contact information to the provider.

38 (5) Dismissal of a commitment petition is not the appropriate
39 remedy for a violation of the timeliness requirements of this section
40 based on the intent of this chapter under RCW 71.05.010 except in the

1 few cases where the facility staff or designated crisis responder has
2 totally disregarded the requirements of this section.

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

5 (1) When a designated crisis responder receives information
6 alleging that a person, as the result of a behavioral health
7 disorder, presents an imminent likelihood of serious harm, or is in
8 imminent danger because of being gravely disabled, after
9 investigation and evaluation of the specific facts alleged and of the
10 reliability and credibility of the person or persons providing the
11 information if any, the designated crisis responder may take such
12 person, or cause by oral or written order such person to be taken
13 into emergency custody in an evaluation and treatment facility,
14 secure withdrawal management and stabilization facility, or approved
15 substance use disorder treatment program, for not more than one
16 hundred twenty hours as described in RCW 71.05.180.

17 (2) A peace officer may take or cause such person to be taken
18 into custody and immediately delivered to a triage facility, crisis
19 stabilization unit, evaluation and treatment facility, secure
20 withdrawal management and stabilization facility, approved substance
21 use disorder treatment program, or the emergency department of a
22 local hospital under the following circumstances:

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

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

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

36 (4) Within three hours after arrival, not counting time periods
37 prior to medical clearance, the person must be examined by a mental
38 health professional or substance use disorder professional. Within
39 twelve hours of notice of the need for evaluation, not counting time

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

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

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

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

32 (2) A designated crisis responder or designated crisis responder
33 agency that receives a request for investigation for possible
34 detention under this chapter must inquire whether the request comes
35 from an immediate family member, guardian, or conservator, or a
36 federally recognized Indian tribe if the person is a member of such
37 tribe, who would be eligible to petition under RCW 71.05.201. If the
38 designated crisis responder decides not to detain the person for
39 evaluation and treatment under RCW 71.05.150 or 71.05.153 or forty-

1 eight hours have elapsed since the request for investigation was
2 received and the designated crisis responder has not taken action to
3 have the person detained, the designated crisis responder or
4 designated crisis responder agency must inform the immediate family
5 member, guardian, or conservator, or a federally recognized Indian
6 tribe if the person is a member of such tribe, who made the request
7 for investigation about the process to petition for court review
8 under RCW 71.05.201 and, to the extent feasible, provide the
9 immediate family member, guardian, or conservator, or a federally
10 recognized Indian tribe if the person is a member of such tribe, with
11 written or electronic information about the petition process.
12 Information provided to a federally recognized Indian tribe shall be
13 sent to the tribal contact listed in the authority's tribal crisis
14 coordination plan. If provision of written or electronic information
15 is not feasible, the designated crisis responder or designated crisis
16 responder agency must refer the immediate family member, guardian, or
17 conservator, or a federally recognized Indian tribe if the person is
18 a member of such tribe, to a website where published information on
19 the petition process may be accessed. The designated crisis responder
20 or designated crisis responder agency must document the manner and
21 date on which the information required under this subsection was
22 provided to the immediate family member, guardian, or conservator, or
23 a federally recognized Indian tribe if the person is a member of such
24 tribe.

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

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

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

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

1 (i) One physician, physician assistant, or advanced registered
2 nurse practitioner; and

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

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

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

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

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

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

16 (1) Each person involuntarily detained and accepted or admitted
17 at an evaluation and treatment facility, secure withdrawal management
18 and stabilization facility, or approved substance use disorder
19 treatment program:

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

23 (i) One physician, physician assistant, or advanced registered
24 nurse practitioner; and

25 (ii) One mental health professional. If the person is detained
26 for substance use disorder evaluation and treatment, the person may
27 be examined by a substance use disorder professional instead of a
28 mental health professional; and

29 (b) Shall receive such treatment and care as his or her condition
30 requires including treatment on an outpatient basis for the period
31 that he or she is detained, except that, beginning twenty-four hours
32 prior to a trial or hearing pursuant to RCW 71.05.215, 71.05.240,
33 71.05.310, 71.05.320, 71.05.590, or 71.05.217, the individual may
34 refuse psychiatric medications, but may not refuse: (i) Any other
35 medication previously prescribed by a person licensed under Title 18
36 RCW; or (ii) emergency lifesaving treatment, and the individual shall
37 be informed at an appropriate time of his or her right of such
38 refusal. The person shall be detained up to one hundred twenty hours,
39 if, in the opinion of the professional person in charge of the

1 facility, or his or her professional designee, the person presents a
2 likelihood of serious harm, or is gravely disabled. A person who has
3 been detained for one hundred twenty hours shall no later than the
4 end of such period be released, unless referred for further care on a
5 voluntary basis, or detained pursuant to court order for further
6 treatment as provided in this chapter.

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

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

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

34 (1) If a petition is filed for fourteen day involuntary treatment
35 or ninety days of less restrictive alternative treatment, the court
36 shall hold a probable cause hearing within one hundred twenty hours
37 of the initial detention of such person as determined in RCW
38 71.05.180, or at a time determined under RCW 71.05.148.

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

8 (3) If the person or his or her attorney alleges, prior to the
9 commencement of the hearing, that the person has in good faith
10 volunteered for treatment, the petitioner must show, by preponderance
11 of the evidence, that the person has not in good faith volunteered
12 for appropriate treatment. In order to qualify as a good faith
13 volunteer, the person must abide by procedures and a treatment plan
14 as prescribed by a treatment facility and professional staff.

15 (4)(a) Subject to (b) of this subsection, at the conclusion of
16 the probable cause hearing, if the court finds by a preponderance of
17 the evidence that such person, as the result of a behavioral health
18 disorder, presents a likelihood of serious harm, or is gravely
19 disabled, and, after considering less restrictive alternatives to
20 involuntary detention and treatment, finds that no such alternatives
21 are in the best interests of such person or others, the court shall
22 order that such person be detained for involuntary treatment not to
23 exceed fourteen days in a facility licensed or certified to provide
24 treatment by the department or under RCW 71.05.745.

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

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

36 (d) If the court finds by a preponderance of the evidence that
37 such person, as the result of a behavioral health disorder, is in
38 need of assisted outpatient behavioral health treatment, and that the
39 person does not present a likelihood of serious harm and is not

1 gravely disabled, the court shall order an appropriate less
2 restrictive alternative course of treatment for up to ninety days.

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

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

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

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

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

25 (1) If a petition is filed for fourteen day involuntary treatment
26 or ninety days of less restrictive alternative treatment, the court
27 shall hold a probable cause hearing within one hundred twenty hours
28 of the initial detention of such person as determined in RCW
29 71.05.180, or at a time determined under RCW 71.05.148.

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

37 (3) If the person or his or her attorney alleges, prior to the
38 commencement of the hearing, that the person has in good faith
39 volunteered for treatment, the petitioner must show, by preponderance

1 of the evidence, that the person has not in good faith volunteered
2 for appropriate treatment. In order to qualify as a good faith
3 volunteer, the person must abide by procedures and a treatment plan
4 as prescribed by a treatment facility and professional staff.

5 (4) (a) At the conclusion of the probable cause hearing, if the
6 court finds by a preponderance of the evidence that such person, as
7 the result of a behavioral health disorder, presents a likelihood of
8 serious harm, or is gravely disabled, and, after considering less
9 restrictive alternatives to involuntary detention and treatment,
10 finds that no such alternatives are in the best interests of such
11 person or others, the court shall order that such person be detained
12 for involuntary treatment not to exceed fourteen days in a facility
13 licensed or certified to provide treatment by the department or under
14 RCW 71.05.745.

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

22 (c) If the court finds by a preponderance of the evidence that
23 such person, as the result of a behavioral health disorder, is in
24 need of assisted outpatient behavioral health treatment, and that the
25 person does not present a likelihood of serious harm and is not
26 gravely disabled, the court shall order an appropriate less
27 restrictive alternative course of treatment for up to ninety days.

28 (5) An order for less restrictive alternative treatment must name
29 the behavioral health service provider responsible for identifying
30 the services the person will receive in accordance with RCW
31 71.05.585, and must include a requirement that the person cooperate
32 with the treatment recommendations of the behavioral health service
33 provider.

34 (6) The court shall notify the person orally and in writing that
35 if involuntary treatment is sought beyond the fourteen-day inpatient
36 or ninety-day less restrictive treatment period, such person has the
37 right to a full hearing or jury trial under RCW 71.05.310. If the
38 commitment is for mental health treatment, the court shall also
39 notify the person orally and in writing that the person is barred
40 from the possession of firearms and that the prohibition remains in

1 effect until a court restores his or her right to possess a firearm
2 under RCW 9.41.047.

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

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

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

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

18 (b) If the order for inpatient treatment is based on a substance
19 use disorder, treatment must take place at an approved substance use
20 disorder treatment program. The court may only enter an order for
21 commitment based on a substance use disorder if there is an available
22 approved substance use disorder treatment program with adequate space
23 for the person.

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

30 (2) If the court or jury finds that grounds set forth in RCW
31 71.05.280 have been proven, but finds that treatment less restrictive
32 than detention will be in the best interest of the person or others,
33 then the court shall remand him or her to the custody of the
34 department of social and health services or to a facility certified
35 for ninety day treatment by the department or to a less restrictive
36 alternative for a further period of less restrictive treatment not to
37 exceed ninety days from the date of judgment. If the grounds set
38 forth in RCW 71.05.280(3) are the basis of commitment, then the
39 period of treatment may be up to but not exceed one hundred eighty

1 days from the date of judgment. If the court or jury finds that the
2 grounds set forth in RCW 71.05.280(5) have been proven, and provide
3 the only basis for commitment, the court must enter an order for less
4 restrictive alternative treatment for up to ninety days from the date
5 of judgment and may not order inpatient treatment.

6 (3) An order for less restrictive alternative treatment entered
7 under subsection (2) of this section must name the behavioral health
8 service provider responsible for identifying the services the person
9 will receive in accordance with RCW 71.05.585, and must include a
10 requirement that the person cooperate with the services planned by
11 the behavioral health service provider.

12 (4) The person shall be released from involuntary treatment at
13 the expiration of the period of commitment imposed under subsection
14 (1) or (2) of this section unless the superintendent or professional
15 person in charge of the facility in which he or she is confined, or
16 in the event of a less restrictive alternative, the designated crisis
17 responder, files a new petition for involuntary treatment on the
18 grounds that the committed person:

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

24 (b) Was taken into custody as a result of conduct in which he or
25 she attempted or inflicted serious physical harm upon the person of
26 another, and continues to present, as a result of a behavioral health
27 disorder or developmental disability, a likelihood of serious harm;
28 or

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

34 (ii) In cases under this subsection where the court has made an
35 affirmative special finding under RCW 71.05.280(3)(b), the commitment
36 shall continue for up to an additional one hundred eighty-day period
37 whenever the petition presents prima facie evidence that the person
38 continues to suffer from a behavioral health disorder or
39 developmental disability that results in a substantial likelihood of
40 committing acts similar to the charged criminal behavior, unless the

1 person presents proof through an admissible expert opinion that the
2 person's condition has so changed such that the behavioral health
3 disorder or developmental disability no longer presents a substantial
4 likelihood of the person committing acts similar to the charged
5 criminal behavior. The initial or additional commitment period may
6 include transfer to a specialized program of intensive support and
7 treatment, which may be initiated prior to or after discharge from
8 the state hospital; or

9 (d) Continues to be gravely disabled; or

10 (e) Is in need of assisted outpatient behavioral health
11 treatment.

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

15 If less restrictive alternative treatment is sought, the petition
16 shall set forth any recommendations for less restrictive alternative
17 treatment services.

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

24 (6)(a) The hearing shall be held as provided in RCW 71.05.310,
25 and if the court or jury finds that the grounds for additional
26 confinement as set forth in this section are present, subject to
27 subsection (1)(b) of this section, the court may order the committed
28 person returned for an additional period of treatment not to exceed
29 one hundred eighty days from the date of judgment, except as provided
30 in subsection (7) of this section. If the court's order is based
31 solely on the grounds identified in subsection (4)(e) of this
32 section, the court may enter an order for less restrictive
33 alternative treatment not to exceed one hundred eighty days from the
34 date of judgment, and may not enter an order for inpatient treatment.
35 An order for less restrictive alternative treatment must name the
36 behavioral health service provider responsible for identifying the
37 services the person will receive in accordance with RCW 71.05.585,
38 and must include a requirement that the person cooperate with the
39 services planned by the behavioral health service provider.

1 (b) At the end of the one hundred eighty-day period of
2 commitment, or one-year period of commitment if subsection (7) of
3 this section applies, the committed person shall be released unless a
4 petition for an additional one hundred eighty-day period of continued
5 treatment is filed and heard in the same manner as provided in this
6 section. Successive one hundred eighty-day commitments are
7 permissible on the same grounds and pursuant to the same procedures
8 as the original one hundred eighty-day commitment.

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

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

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

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

22 (1) If the court or jury finds that grounds set forth in RCW
23 71.05.280 have been proven and that the best interests of the person
24 or others will not be served by a less restrictive treatment which is
25 an alternative to detention, the court shall remand him or her to the
26 custody of the department of social and health services or to a
27 facility certified for ninety day treatment by the department for a
28 further period of intensive treatment not to exceed ninety days from
29 the date of judgment.

30 If the order for inpatient treatment is based on a substance use
31 disorder, treatment must take place at an approved substance use
32 disorder treatment program. If the grounds set forth in RCW
33 71.05.280(3) are the basis of commitment, then the period of
34 treatment may be up to but not exceed one hundred eighty days from
35 the date of judgment to the custody of the department of social and
36 health services or to a facility certified for one hundred eighty-day
37 treatment by the department or under RCW 71.05.745.

38 (2) If the court or jury finds that grounds set forth in RCW
39 71.05.280 have been proven, but finds that treatment less restrictive

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

14 (3) An order for less restrictive alternative treatment entered
15 under subsection (2) of this section must name the behavioral health
16 service provider responsible for identifying the services the person
17 will receive in accordance with RCW 71.05.585, and must include a
18 requirement that the person cooperate with the services planned by
19 the behavioral health service provider.

20 (4) The person shall be released from involuntary treatment at
21 the expiration of the period of commitment imposed under subsection
22 (1) or (2) of this section unless the superintendent or professional
23 person in charge of the facility in which he or she is confined, or
24 in the event of a less restrictive alternative, the designated crisis
25 responder, files a new petition for involuntary treatment on the
26 grounds that the committed person:

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

32 (b) Was taken into custody as a result of conduct in which he or
33 she attempted or inflicted serious physical harm upon the person of
34 another, and continues to present, as a result of a behavioral health
35 disorder or developmental disability, a likelihood of serious harm;
36 or

37 (c) (i) Is in custody pursuant to RCW 71.05.280(3) and as a result
38 of a behavioral health disorder or developmental disability continues
39 to present a substantial likelihood of repeating acts similar to the

1 charged criminal behavior, when considering the person's life
2 history, progress in treatment, and the public safety.

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

18 (d) Continues to be gravely disabled; or

19 (e) Is in need of assisted outpatient behavioral health
20 treatment.

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

24 If less restrictive alternative treatment is sought, the petition
25 shall set forth any recommendations for less restrictive alternative
26 treatment services.

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

33 (6)(a) The hearing shall be held as provided in RCW 71.05.310,
34 and if the court or jury finds that the grounds for additional
35 confinement as set forth in this section are present, the court may
36 order the committed person returned for an additional period of
37 treatment not to exceed one hundred eighty days from the date of
38 judgment, except as provided in subsection (7) of this section. If
39 the court's order is based solely on the grounds identified in
40 subsection (4)(e) of this section, the court may enter an order for

1 less restrictive alternative treatment not to exceed one hundred
2 eighty days from the date of judgment, and may not enter an order for
3 inpatient treatment. An order for less restrictive alternative
4 treatment must name the behavioral health service provider
5 responsible for identifying the services the person will receive in
6 accordance with RCW 71.05.585, and must include a requirement that
7 the person cooperate with the services planned by the behavioral
8 health service provider.

9 (b) At the end of the one hundred eighty-day period of
10 commitment, or one-year period of commitment if subsection (7) of
11 this section applies, the committed person shall be released unless a
12 petition for an additional one hundred eighty-day period of continued
13 treatment is filed and heard in the same manner as provided in this
14 section. Successive one hundred eighty-day commitments are
15 permissible on the same grounds and pursuant to the same procedures
16 as the original one hundred eighty-day commitment.

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

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

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

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

30 (1)(a) When, in the opinion of the superintendent or the
31 professional person in charge of the hospital or facility providing
32 involuntary treatment, the committed person can be appropriately
33 served by outpatient treatment prior to or at the expiration of the
34 period of commitment, then such outpatient care may be required as a
35 term of conditional release for a period which, when ~~((added to the))~~
36 combined with the number of days the person has spent in inpatient
37 treatment ~~((period))~~, shall not exceed ~~((the period of commitment))~~
38 90 days if the underlying commitment was for a period of 14 or 90
39 days, or 180 days if the underlying commitment was for a period of

1 180 days. If the facility or agency designated to provide outpatient
2 treatment is other than the facility providing involuntary treatment,
3 the outpatient facility so designated must agree in writing to assume
4 such responsibility. A copy of the terms of conditional release shall
5 be given to the patient, the designated crisis responder in the
6 county in which the patient is to receive outpatient treatment, and
7 to the court of original commitment.

8 (b) Before a person committed under grounds set forth in RCW
9 71.05.280(3) or 71.05.320(4)(c) is conditionally released under (a)
10 of this subsection, the superintendent or professional person in
11 charge of the hospital or facility providing involuntary treatment
12 shall in writing notify the prosecuting attorney of the county in
13 which the criminal charges against the committed person were
14 dismissed, of the decision to conditionally release the person.
15 Notice and a copy of the terms of conditional release shall be
16 provided at least thirty days before the person is released from
17 inpatient care. Within twenty days after receiving notice, the
18 prosecuting attorney may petition the court in the county that issued
19 the commitment order to hold a hearing to determine whether the
20 person may be conditionally released and the terms of the conditional
21 release. The prosecuting attorney shall provide a copy of the
22 petition to the superintendent or professional person in charge of
23 the hospital or facility providing involuntary treatment, the
24 attorney, if any, and guardian or conservator of the committed
25 person, and the court of original commitment. If the county in which
26 the committed person is to receive outpatient treatment is the same
27 county in which the criminal charges against the committed person
28 were dismissed, then the court shall, upon the motion of the
29 prosecuting attorney, transfer the proceeding to the court in that
30 county. The court shall conduct a hearing on the petition within ten
31 days of the filing of the petition. The committed person shall have
32 the same rights with respect to notice, hearing, and counsel as for
33 an involuntary treatment proceeding, except as set forth in this
34 subsection and except that there shall be no right to jury trial. The
35 issue to be determined at the hearing is whether or not the person
36 may be conditionally released without substantial danger to other
37 persons, or substantial likelihood of committing criminal acts
38 jeopardizing public safety or security. If the court disapproves of
39 the conditional release, it may do so only on the basis of
40 substantial evidence. Pursuant to the determination of the court upon

1 the hearing, the conditional release of the person shall be approved
2 by the court on the same or modified conditions or the person shall
3 be returned for involuntary treatment on an inpatient basis subject
4 to release at the end of the period for which he or she was
5 committed, or otherwise in accordance with the provisions of this
6 chapter.

7 (2) The facility or agency designated to provide outpatient care
8 or the secretary of the department of social and health services may
9 modify the conditions for continued release when such modification is
10 in the best interest of the person. Notification of such changes
11 shall be sent to all persons receiving a copy of the original
12 conditions. Enforcement or revocation proceedings related to a
13 conditional release (~~order~~) may occur as provided under RCW
14 71.05.590.

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

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

19 (a) Assignment of a care coordinator;

20 (b) An intake evaluation with the provider of the less
21 restrictive alternative treatment;

22 (c) A psychiatric evaluation, a substance use disorder
23 evaluation, or both;

24 (d) A schedule of regular contacts with the provider of the
25 (~~less restrictive alternative~~) treatment services for the duration
26 of the order;

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

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

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

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

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

37 (a) Medication management;

38 (b) Psychotherapy;

39 (c) Nursing;

- 1 (d) Substance (~~abuse~~) use disorder counseling;
2 (e) Residential treatment; (~~and~~)
3 (f) Support for housing, benefits, education, and employment; and
4 (g) Periodic court review.

5 (3) If the person was provided with involuntary medication under
6 RCW 71.05.215 or pursuant to a judicial order during the involuntary
7 commitment period, the less restrictive alternative treatment order
8 may authorize the less restrictive alternative treatment provider or
9 its designee to administer involuntary antipsychotic medication to
10 the person if the provider has attempted and failed to obtain the
11 informed consent of the person and there is a concurring medical
12 opinion approving the medication by a psychiatrist, physician
13 assistant working with a supervising psychiatrist, psychiatric
14 advanced registered nurse practitioner, or physician or physician
15 assistant in consultation with an independent mental health
16 professional with prescribing authority.

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

21 (5) The care coordinator assigned to a person ordered to less
22 restrictive alternative treatment must submit an individualized plan
23 for the person's treatment services to the court that entered the
24 order. An initial plan must be submitted as soon as possible
25 following the intake evaluation and a revised plan must be submitted
26 upon any subsequent modification in which a type of service is
27 removed from or added to the treatment plan.

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

31 (7) For the purpose of this section, "care coordinator" means a
32 clinical practitioner who coordinates the activities of less
33 restrictive alternative treatment. The care coordinator coordinates
34 activities with the designated crisis responders that are necessary
35 for enforcement and continuation of less restrictive alternative
36 orders and is responsible for coordinating service activities with
37 other agencies and establishing and maintaining a therapeutic
38 relationship with the individual on a continuing basis.

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

3 (1) Either an agency or facility designated to monitor or provide
4 services under a less restrictive alternative order or conditional
5 release (~~(order)~~), or a designated crisis responder, may take action
6 to enforce, modify, or revoke a less restrictive alternative or
7 conditional release (~~(order)~~). The agency, facility, or designated
8 crisis responder must determine that:

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

11 (b) Substantial deterioration in the person's functioning has
12 occurred;

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

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

17 (2) Actions taken under this section must include a flexible
18 range of responses of varying levels of intensity appropriate to the
19 circumstances and consistent with the interests of the individual and
20 the public in personal autonomy, safety, recovery, and compliance.
21 Available actions may include, but are not limited to, any of the
22 following:

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

26 (b) To increase the intensity of outpatient services provided to
27 the person by increasing the frequency of contacts with the provider,
28 referring the person for an assessment for assertive community
29 services, or by other means;

30 (c) To request a court hearing for review and modification of the
31 court order. The request must be made to or by the court with
32 jurisdiction over the order and specify the circumstances that give
33 rise to the request and what modification is being sought. The county
34 prosecutor shall assist the agency or facility in requesting this
35 hearing and issuing an appropriate summons to the person. This
36 subsection does not limit the inherent authority of a treatment
37 provider to alter conditions of treatment for clinical reasons, and
38 is intended to be used only when court intervention is necessary or
39 advisable to secure the person's compliance and prevent
40 decompensation or deterioration;

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

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

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

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

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

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

1 (~~(4)~~) (5)(a) Except as provided in subsection (~~(6)~~) (7) of
2 this section, a designated crisis responder or the secretary of the
3 department of social and health services may upon their own motion or
4 notification by the facility or agency designated to provide
5 outpatient care order a person subject to a court order under this
6 chapter to be apprehended and taken into custody and temporary
7 detention in an evaluation and treatment facility, an available
8 secure withdrawal management and stabilization facility with adequate
9 space, or an available approved substance use disorder treatment
10 program with adequate space, in or near the county in which he or she
11 is receiving outpatient treatment. Proceedings under this subsection
12 (~~(4)~~) (5) may be initiated without ordering the apprehension and
13 detention of the person.

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

24 (c) The designated crisis responder or secretary of the
25 department of social and health services shall file a revocation
26 petition and order of apprehension and detention with the court of
27 the county where the person is currently located or being detained.
28 The designated crisis responder shall serve the person and their
29 attorney, guardian, and conservator, if any. The person has the same
30 rights with respect to notice, hearing, and counsel as in any
31 involuntary treatment proceeding, except as specifically set forth in
32 this section. There is no right to jury trial. The venue for
33 proceedings is the county where the petition is filed. Notice of the
34 filing must be provided to the court that originally ordered
35 commitment, if different from the court where the petition for
36 revocation is filed, within two judicial days of the person's
37 detention.

38 (d) Except as provided in subsection (~~(6)~~) (7) of this section,
39 the issues for the court to determine are whether: (i) The person
40 adhered to the terms and conditions of the court order; (ii)

1 substantial deterioration in the person's functioning has occurred;
2 (iii) there is evidence of substantial decompensation with a
3 reasonable probability that the decompensation can be reversed by
4 further inpatient treatment; or (iv) there is a likelihood of serious
5 harm; and, if any of the above conditions apply, whether the court
6 should reinstate or modify the person's less restrictive alternative
7 or conditional release (~~order~~) or order the person's detention for
8 inpatient treatment. The person may waive the court hearing and allow
9 the court to enter a stipulated order upon the agreement of all
10 parties. If the court orders detention for inpatient treatment, the
11 treatment period must be for fourteen days from the revocation
12 hearing if the outpatient order was based on a petition under RCW
13 71.05.160 or 71.05.230. If the court orders detention for inpatient
14 treatment and the outpatient order was based on a petition under RCW
15 71.05.290 or 71.05.320, the number of days remaining on the
16 outpatient order must be converted to days of inpatient treatment
17 authorized in the original court order. A court may not issue an
18 order to detain a person for inpatient treatment in a secure
19 withdrawal management and stabilization facility or approved
20 substance use disorder treatment program under this subsection unless
21 there is a secure withdrawal management and stabilization facility or
22 approved substance use disorder treatment program available and with
23 adequate space for the person.

24 ~~((+5))~~ (6) In determining whether or not to take action under
25 this section the designated crisis responder, agency, or facility
26 must consider the factors specified under RCW 71.05.212 and the court
27 must consider the factors specified under RCW 71.05.245 as they apply
28 to the question of whether to enforce, modify, or revoke a court
29 order for involuntary treatment.

30 ~~((+6))~~ (7)(a) If the current commitment is solely based on the
31 person being in need of assisted outpatient behavioral health
32 treatment as defined in RCW 71.05.020, a designated crisis responder
33 may initiate inpatient detention procedures under RCW 71.05.150 or
34 71.05.153 when appropriate. A designated crisis responder or the
35 secretary may, upon their own motion or notification by the facility
36 or agency designated to provide outpatient care to a person subject
37 to a less restrictive alternative treatment order under RCW 71.05.320
38 subsequent to an order for assisted outpatient behavioral health
39 treatment entered under RCW 71.05.148, order the person to be
40 apprehended and taken into custody and temporary detention for

1 inpatient evaluation in an evaluation and treatment facility, secure
2 withdrawal management and stabilization facility, or in an approved
3 substance use disorder treatment program, in or near the county in
4 which he or she is receiving outpatient treatment. Proceedings under
5 this subsection may be initiated without ordering the apprehension
6 and detention of the person.

7 (b) A person detained under this subsection may be held for
8 evaluation for up to one hundred twenty hours, excluding weekends and
9 holidays, pending a court hearing. If the person is not detained, the
10 hearing must be scheduled within one hundred twenty hours of service
11 on the person. The designated crisis responder or the secretary may
12 modify or rescind the order at any time prior to commencement of the
13 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 (d) A court may not issue an order to detain a person for
25 inpatient treatment in a secure withdrawal management and
26 stabilization facility or approved substance use disorder program
27 under this subsection unless there is a secure withdrawal management
28 and stabilization facility or approved substance use disorder
29 treatment program available and with adequate space for the person.

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

32 (1) Either an agency or facility designated to monitor or provide
33 services under a less restrictive alternative order or conditional
34 release (~~(order)~~), or a designated crisis responder, may take action
35 to enforce, modify, or revoke a less restrictive alternative or
36 conditional release (~~(order)~~). The agency, facility, or designated
37 crisis responder must determine that:

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

1 (b) Substantial deterioration in the person's functioning has
2 occurred;

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

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

7 (2) Actions taken under this section must include a flexible
8 range of responses of varying levels of intensity appropriate to the
9 circumstances and consistent with the interests of the individual and
10 the public in personal autonomy, safety, recovery, and compliance.
11 Available actions may include, but are not limited to, any of the
12 following:

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

16 (b) To increase the intensity of outpatient services provided to
17 the person by increasing the frequency of contacts with the provider,
18 referring the person for an assessment for assertive community
19 services, or by other means;

20 (c) To request a court hearing for review and modification of the
21 court order. The request must be made to or by the court with
22 jurisdiction over the order and specify the circumstances that give
23 rise to the request and what modification is being sought. The county
24 prosecutor shall assist the agency or facility in requesting this
25 hearing and issuing an appropriate summons to the person. This
26 subsection does not limit the inherent authority of a treatment
27 provider to alter conditions of treatment for clinical reasons, and
28 is intended to be used only when court intervention is necessary or
29 advisable to secure the person's compliance and prevent
30 decompensation or deterioration;

31 (d) To cause the person to be transported by a peace officer,
32 designated crisis responder, or other means to the agency or facility
33 monitoring or providing services under the court order, or to a
34 triage facility, crisis stabilization unit, emergency department,
35 evaluation and treatment facility, secure withdrawal management and
36 stabilization facility, or an approved substance use disorder
37 treatment program. The person may be detained at the facility for up
38 to twelve hours for the purpose of an evaluation to determine whether
39 modification, revocation, or commitment proceedings are necessary and
40 appropriate to stabilize the person and prevent decompensation,

1 deterioration, or physical harm. Temporary detention for evaluation
2 under this subsection is intended to occur only following a pattern
3 of noncompliance or the failure of reasonable attempts at outreach
4 and engagement, and may occur only when in the clinical judgment of a
5 designated crisis responder or the professional person in charge of
6 an agency or facility designated to monitor less restrictive
7 alternative services temporary detention is appropriate. This
8 subsection does not limit the ability or obligation to pursue
9 revocation procedures under subsection ~~((4))~~ (5) of this section in
10 appropriate circumstances; and

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

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

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

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

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

31 ~~((4))~~ (5)(a) Except as provided in subsection ~~((6))~~ (7) of
32 this section, a designated crisis responder or the secretary of the
33 department of social and health services may upon their own motion or
34 notification by the facility or agency designated to provide
35 outpatient care order a person subject to a court order under this
36 chapter to be apprehended and taken into custody and temporary
37 detention in an evaluation and treatment facility, in a secure
38 withdrawal management and stabilization facility, or in an approved
39 substance use disorder treatment program, in or near the county in
40 which he or she is receiving outpatient treatment. Proceedings under

1 this subsection (~~((4))~~) (5) may be initiated without ordering the
2 apprehension and detention of the person.

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

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

27 (d) Except as provided in subsection (~~((6))~~) (7) of this section,
28 the issues for the court to determine are whether: (i) The person
29 adhered to the terms and conditions of the court order; (ii)
30 substantial deterioration in the person's functioning has occurred;
31 (iii) there is evidence of substantial decompensation with a
32 reasonable probability that the decompensation can be reversed by
33 further inpatient treatment; or (iv) there is a likelihood of serious
34 harm; and, if any of the above conditions apply, whether the court
35 should reinstate or modify the person's less restrictive alternative
36 or conditional release (~~(order)~~) or order the person's detention for
37 inpatient treatment. The person may waive the court hearing and allow
38 the court to enter a stipulated order upon the agreement of all
39 parties. If the court orders detention for inpatient treatment, the
40 treatment period must be for fourteen days from the revocation

1 hearing if the outpatient order was based on a petition under RCW
2 71.05.160 or 71.05.230. If the court orders detention for inpatient
3 treatment and the outpatient order was based on a petition under RCW
4 71.05.290 or 71.05.320, the number of days remaining on the
5 outpatient order must be converted to days of inpatient treatment
6 authorized in the original court order.

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

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

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

35 (c) The issues for the court to determine are whether to continue
36 the detention of the person for inpatient treatment or whether the
37 court should reinstate or modify the person's less restrictive
38 alternative order or order the person's detention for inpatient
39 treatment. To continue detention after the one hundred twenty hour
40 period, the court must find that the person, as a result of a

1 behavioral health disorder, presents a likelihood of serious harm or
2 is gravely disabled and, after considering less restrictive
3 alternatives to involuntary detention and treatment, that no such
4 alternatives are in the best interest of the person or others.

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

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

9 (a) Assignment of a care coordinator;

10 (b) An intake evaluation with the provider of the less
11 restrictive alternative treatment;

12 (c) A psychiatric evaluation, a substance use disorder
13 evaluation, or both;

14 (d) A schedule of regular contacts with the provider of the less
15 restrictive alternative treatment services for the duration of the
16 order;

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

19 (f) An individual crisis plan; and

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

23 (2) Less restrictive alternative treatment may include the
24 following additional services:

25 (a) Medication management;

26 (b) Psychotherapy;

27 (c) Nursing;

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

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

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

31 (g) Periodic court review.

32 (3) If the minor was provided with involuntary medication during
33 the involuntary commitment period, the less restrictive alternative
34 treatment order may authorize the less restrictive alternative
35 treatment provider or its designee to administer involuntary
36 antipsychotic medication to the person if the provider has attempted
37 and failed to obtain the informed consent of the person and there is
38 a concurring medical opinion approving the medication by a
39 psychiatrist, physician assistant working with a supervising

1 psychiatrist, psychiatric advanced registered nurse practitioner, or
2 physician or physician assistant in consultation with an independent
3 mental health professional with prescribing authority.

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

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

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

18 (7) For the purpose of this section, "care coordinator" means a
19 clinical practitioner who coordinates the activities of less
20 restrictive alternative treatment. The care coordinator coordinates
21 activities with the designated crisis responders that are necessary
22 for enforcement and continuation of less restrictive alternative
23 treatment orders and is responsible for coordinating service
24 activities with other agencies and establishing and maintaining a
25 therapeutic relationship with the individual on a continuing basis.

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

28 (1) (~~Except as provided in this section, RCW 70.02.050,~~
29 ~~71.05.445, 74.09.295, 70.02.210, 70.02.240, 70.02.250, 70.02.260, and~~
30 ~~70.02.265, or pursuant to a valid authorization under RCW 70.02.030,~~
31 ~~the~~) The fact of admission to a provider for mental health services
32 and all information and records compiled, obtained, or maintained in
33 the course of providing mental health services to either voluntary or
34 involuntary recipients of services at public or private agencies
35 ((must be confidential)) may not be disclosed except as provided in
36 this section, RCW 70.02.050, 71.05.445, 74.09.295, 70.02.210,
37 70.02.240, 70.02.250, 70.02.260, and 70.02.265, or under a valid
38 authorization under RCW 70.02.030.

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

4 (a) In communications between qualified professional persons to
5 meet the requirements of chapter 71.05 RCW, including Indian health
6 care providers, in the provision of services or appropriate
7 referrals, or in the course of guardianship proceedings if provided
8 to a professional person:

9 (i) Employed by the facility;

10 (ii) Who has medical responsibility for the patient's care;

11 (iii) Who is a designated crisis responder;

12 (iv) Who is providing services under chapter 71.24 RCW;

13 (v) Who is employed by a state or local correctional facility
14 where the person is confined or supervised; or

15 (vi) Who is providing evaluation, treatment, or follow-up
16 services under chapter 10.77 RCW;

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

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

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

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

30 (B) A statement evaluating the mental and physical condition of
31 the patient, and a statement of the probable duration of the
32 patient's confinement, if such information is requested by the next
33 of kin, attorney, personal representative, guardian, or conservator;
34 and

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

38 (d)(i) To the courts, including tribal courts, as necessary to
39 the administration of chapter 71.05 RCW or to a court ordering an
40 evaluation or treatment under chapter 10.77 RCW solely for the

1 purpose of preventing the entry of any evaluation or treatment order
2 that is inconsistent with any order entered under chapter 71.05 RCW.

3 (ii) To a court or its designee in which a motion under chapter
4 10.77 RCW has been made for involuntary medication of a defendant for
5 the purpose of competency restoration.

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

9 (e)(i) When a mental health professional or designated crisis
10 responder is requested by a representative of a law enforcement or
11 corrections agency, including a police officer, sheriff, community
12 corrections officer, a municipal attorney, or prosecuting attorney to
13 undertake an investigation or provide treatment under RCW 71.05.150,
14 10.31.110, or 71.05.153, the mental health professional or designated
15 crisis responder shall, if requested to do so, advise the
16 representative in writing of the results of the investigation
17 including a statement of reasons for the decision to detain or
18 release the person investigated. The written report must be submitted
19 within seventy-two hours of the completion of the investigation or
20 the request from the law enforcement or corrections representative,
21 whichever occurs later.

22 (ii) Disclosure under this subsection is mandatory for the
23 purposes of the federal health insurance portability and
24 accountability act;

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

26 (g) To the prosecuting attorney as necessary to carry out the
27 responsibilities of the office under RCW 71.05.330(2),
28 71.05.340(1)(b), and 71.05.335. The prosecutor must be provided
29 access to records regarding the committed person's treatment and
30 prognosis, medication, behavior problems, and other records relevant
31 to the issue of whether treatment less restrictive than inpatient
32 treatment is in the best interest of the committed person or others.
33 Information must be disclosed only after giving notice to the
34 committed person and the person's counsel;

35 (h)(i) To appropriate law enforcement agencies and to a person,
36 when the identity of the person is known to the public or private
37 agency, whose health and safety has been threatened, or who is known
38 to have been repeatedly harassed, by the patient. The person may
39 designate a representative to receive the disclosure. The disclosure
40 must be made by the professional person in charge of the public or

1 private agency or his or her designee and must include the dates of
2 commitment, admission, discharge, or release, authorized or
3 unauthorized absence from the agency's facility, and only any other
4 information that is pertinent to the threat or harassment. The agency
5 or its employees are not civilly liable for the decision to disclose
6 or not, so long as the decision was reached in good faith and without
7 gross negligence.

8 (ii) Disclosure under this subsection is mandatory for the
9 purposes of the federal health insurance portability and
10 accountability act;

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

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

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

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

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

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

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

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

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

11 (iii) Disclosure under this subsection is mandatory for the
12 purposes of the federal health insurance portability and
13 accountability act;

14 ~~((n))~~ (o) When a patient would otherwise be subject to the
15 provisions of this section and disclosure is necessary for the
16 protection of the patient or others due to his or her unauthorized
17 disappearance from the facility, and his or her whereabouts is
18 unknown, notice of the disappearance, along with relevant
19 information, may be made to relatives, the department of corrections
20 when the person is under the supervision of the department, and
21 governmental law enforcement agencies designated by the physician or
22 psychiatric advanced registered nurse practitioner in charge of the
23 patient or the professional person in charge of the facility, or his
24 or her professional designee;

25 ~~((o))~~ (p) Pursuant to lawful order of a court, including a
26 tribal court;

27 ~~((p))~~ (q) To qualified staff members of the department, to the
28 authority, to behavioral health administrative services
29 organizations, to managed care organizations, to resource management
30 services responsible for serving a patient, or to service providers
31 designated by resource management services as necessary to determine
32 the progress and adequacy of treatment and to determine whether the
33 person should be transferred to a less restrictive or more
34 appropriate treatment modality or facility;

35 ~~((q))~~ (r) Within the mental health service agency or Indian
36 health care provider facility where the patient is receiving
37 treatment, confidential information may be disclosed to persons
38 employed, serving in bona fide training programs, or participating in
39 supervised volunteer programs, at the facility when it is necessary
40 to perform their duties;

1 (~~(r)~~) (s) Within the department and the authority as necessary
2 to coordinate treatment for mental illness, developmental
3 disabilities, (~~(alcoholism)~~) or substance use disorder of persons
4 who are under the supervision of the department;

5 (~~(s)~~) (t) Between the department of social and health services,
6 the department of children, youth, and families, and the health care
7 authority as necessary to coordinate treatment for mental illness,
8 developmental disabilities, (~~(alcoholism, or drug abuse)~~) or
9 substance use disorder of persons who are under the supervision of
10 the department of social and health services or the department of
11 children, youth, and families;

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

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

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

23 (B) Any other person who is working in a care coordinator role
24 for a health care facility, health care provider, or Indian health
25 care provider, or is under an agreement pursuant to the federal
26 health insurance portability and accountability act with a health
27 care facility or a health care provider and requires the information
28 and records to assure coordinated care and treatment of that patient.

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

33 (iii) Psychotherapy notes may not be released without
34 authorization of the patient who is the subject of the request for
35 release of information;

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

39 (~~(w)~~) (x) To a facility that is to receive a person who is
40 involuntarily committed under chapter 71.05 RCW, or upon transfer of

1 the person from one evaluation and treatment facility to another. The
2 release of records under this subsection is limited to the
3 information and records related to mental health services required by
4 law, a record or summary of all somatic treatments, and a discharge
5 summary. The discharge summary may include a statement of the
6 patient's problem, the treatment goals, the type of treatment which
7 has been provided, and recommendation for future treatment, but may
8 not include the patient's complete treatment record;

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

14 ~~((y))~~ (z) To staff members of the protection and advocacy
15 agency or to staff members of a private, nonprofit corporation for
16 the purpose of protecting and advocating the rights of persons with
17 mental disorders or developmental disabilities. Resource management
18 services may limit the release of information to the name, birthdate,
19 and county of residence of the patient, information regarding whether
20 the patient was voluntarily admitted, or involuntarily committed, the
21 date and place of admission, placement, or commitment, the name and
22 address of a guardian of the patient, and the date and place of the
23 guardian's appointment. Any staff member who wishes to obtain
24 additional information must notify the patient's resource management
25 services in writing of the request and of the resource management
26 services' right to object. The staff member shall send the notice by
27 mail to the guardian's address. If the guardian does not object in
28 writing within fifteen days after the notice is mailed, the staff
29 member may obtain the additional information. If the guardian objects
30 in writing within fifteen days after the notice is mailed, the staff
31 member may not obtain the additional information;

32 ~~((z))~~ (aa) To all current treating providers, including Indian
33 health care providers, of the patient with prescriptive authority who
34 have written a prescription for the patient within the last twelve
35 months. For purposes of coordinating health care, the department or
36 the authority may release without written authorization of the
37 patient, information acquired for billing and collection purposes as
38 described in RCW 70.02.050(1)(d). The department, or the authority,
39 if applicable, shall notify the patient that billing and collection
40 information has been released to named providers, and provide the

1 substance of the information released and the dates of such release.
2 Neither the department nor the authority may release counseling,
3 inpatient psychiatric hospitalization, or drug and alcohol treatment
4 information without a signed written release from the client;

5 ~~((aa))~~ (bb) (i) To the secretary of social and health services
6 and the director of the health care authority for either program
7 evaluation or research, or both so long as the secretary or director,
8 where applicable, adopts rules for the conduct of the evaluation or
9 research, or both. Such rules must include, but need not be limited
10 to, the requirement that all evaluators and researchers sign an oath
11 of confidentiality substantially as follows:

12 "As a condition of conducting evaluation or research concerning
13 persons who have received services from (fill in the facility,
14 agency, or person) I,, agree not to divulge, publish, or
15 otherwise make known to unauthorized persons or the public any
16 information obtained in the course of such evaluation or research
17 regarding persons who have received services such that the person who
18 received such services is identifiable.

19 I recognize that unauthorized release of confidential information
20 may subject me to civil liability under the provisions of state law.
21 /s/"

22 (ii) Nothing in this chapter may be construed to prohibit the
23 compilation and publication of statistical data for use by government
24 or researchers under standards, including standards to assure
25 maintenance of confidentiality, set forth by the secretary, or
26 director, where applicable;

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

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

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

33 (3) Whenever federal law or federal regulations restrict the
34 release of information contained in the information and records
35 related to mental health services of any patient who receives
36 treatment for a substance use disorder, the department or the
37 authority may restrict the release of the information as necessary to
38 comply with federal law and regulations.

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

6 (5) The fact of admission to a provider of mental health
7 services, as well as all records, files, evidence, findings, or
8 orders made, prepared, collected, or maintained pursuant to chapter
9 71.05 RCW are not admissible as evidence in any legal proceeding
10 outside that chapter without the written authorization of the person
11 who was the subject of the proceeding except as provided in RCW
12 70.02.260, in a subsequent criminal prosecution of a person committed
13 pursuant to RCW 71.05.280(3) or 71.05.320(4)(c) on charges that were
14 dismissed pursuant to chapter 10.77 RCW due to incompetency to stand
15 trial, in a civil commitment proceeding pursuant to chapter 71.09
16 RCW, or, in the case of a minor, a guardianship or dependency
17 proceeding. The records and files maintained in any court proceeding
18 pursuant to chapter 71.05 RCW must be confidential and available
19 subsequent to such proceedings only to the person who was the subject
20 of the proceeding or his or her attorney. In addition, the court may
21 order the subsequent release or use of such records or files only
22 upon good cause shown if the court finds that appropriate safeguards
23 for strict confidentiality are and will be maintained.

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

29 (i) One thousand dollars; or

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

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

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

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

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

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

5 The fact of admission and all information and records related to
6 mental health services obtained through inpatient or outpatient
7 treatment of a minor under chapter 71.34 RCW must be kept
8 confidential, except as authorized by this section or under RCW
9 70.02.050, 70.02.210, 70.02.230, 70.02.250, 70.02.260, and 70.02.265.
10 Confidential information under this section may be disclosed only:

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

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

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

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

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

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

28 ~~((6))~~ (7) To law enforcement officers, public health officers,
29 relatives, and other governmental law enforcement agencies, if a
30 minor has escaped from custody, disappeared from an evaluation and
31 treatment facility, violated conditions of a less restrictive
32 treatment order, or failed to return from an authorized leave, and
33 then only such information as may be necessary to provide for public
34 safety or to assist in the apprehension of the minor. The officers
35 are obligated to keep the information confidential in accordance with
36 this chapter;

37 ~~((7))~~ (8) To the secretary of social and health services and
38 the director of the health care authority for assistance in data
39 collection and program evaluation or research so long as the

1 secretary or director, where applicable, adopts rules for the conduct
2 of such evaluation and research. The rules must include, but need not
3 be limited to, the requirement that all evaluators and researchers
4 sign an oath of confidentiality substantially as follows:

5 "As a condition of conducting evaluation or research concerning
6 persons who have received services from (fill in the facility,
7 agency, or person) I,, agree not to divulge, publish, or
8 otherwise make known to unauthorized persons or the public any
9 information obtained in the course of such evaluation or research
10 regarding minors who have received services in a manner such that the
11 minor is identifiable.

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

14 /s/";

15 ~~((8))~~ (9) To appropriate law enforcement agencies, upon
16 request, all necessary and relevant information in the event of a
17 crisis or emergent situation that poses a significant and imminent
18 risk to the public. The mental health service agency or its employees
19 are not civilly liable for the decision to disclose or not, so long
20 as the decision was reached in good faith and without gross
21 negligence;

22 ~~((9))~~ (10) To appropriate law enforcement agencies and to a
23 person, when the identity of the person is known to the public or
24 private agency, whose health and safety has been threatened, or who
25 is known to have been repeatedly harassed, by the patient. The person
26 may designate a representative to receive the disclosure. The
27 disclosure must be made by the professional person in charge of the
28 public or private agency or his or her designee and must include the
29 dates of admission, discharge, authorized or unauthorized absence
30 from the agency's facility, and only any other information that is
31 pertinent to the threat or harassment. The agency or its employees
32 are not civilly liable for the decision to disclose or not, so long
33 as the decision was reached in good faith and without gross
34 negligence;

35 ~~((10))~~ (11) To a minor's next of kin, attorney, guardian, or
36 conservator, if any, the information that the minor is presently in
37 the facility or that the minor is seriously physically ill and a
38 statement evaluating the mental and physical condition of the minor

1 as well as a statement of the probable duration of the minor's
2 confinement;

3 ~~((11))~~ (12) Upon the death of a minor, to the minor's next of
4 kin;

5 ~~((12))~~ (13) To a facility in which the minor resides or will
6 reside;

7 ~~((13))~~ (14) To law enforcement officers and to prosecuting
8 attorneys as are necessary to enforce RCW 9.41.040(2)(a)(iv). The
9 extent of information that may be released is limited as follows:

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

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

20 (c) Disclosure under this subsection is mandatory for the
21 purposes of the federal health insurance portability and
22 accountability act;

23 ~~((14))~~ (15) This section may not be construed to prohibit the
24 compilation and publication of statistical data for use by government
25 or researchers under standards, including standards to assure
26 maintenance of confidentiality, set forth by the director of the
27 health care authority or the secretary of the department of social
28 and health services, where applicable. The fact of admission and all
29 information obtained pursuant to chapter 71.34 RCW are not admissible
30 as evidence in any legal proceeding outside chapter 71.34 RCW, except
31 guardianship or dependency, without the written consent of the minor
32 or the minor's parent;

33 ~~((15))~~ (16) For the purpose of a correctional facility
34 participating in the postinstitutional medical assistance system
35 supporting the expedited medical determinations and medical
36 suspensions as provided in RCW 74.09.555 and 74.09.295;

37 ~~((16))~~ (17) Pursuant to a lawful order of a court.

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

1 (1)(a) Except as provided in subsection (2) of this section, at
2 the earliest possible date, and in no event later than thirty days
3 before conditional release, final release, authorized leave under RCW
4 71.05.325(2), or transfer to a facility other than a state mental
5 hospital, the superintendent shall send written notice of conditional
6 release, release, authorized leave, or transfer of a person committed
7 under RCW 71.05.280(3) or 71.05.320(4)(c) following dismissal of a
8 sex, violent, or felony harassment offense pursuant to RCW
9 10.77.086(4) to the following:

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

12 (ii) The sheriff of the county in which the person will reside;
13 and

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

16 (b) The same notice as required by (a) of this subsection shall
17 be sent to the following, if such notice has been requested in
18 writing about a specific person committed under RCW 71.05.280(3) or
19 71.05.320(4)(c) following dismissal of a sex, violent, or felony
20 harassment offense pursuant to RCW 10.77.086(4):

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

25 (ii) Any witnesses who testified against the person in any court
26 proceedings;

27 (iii) Any person specified in writing by the prosecuting
28 attorney. Information regarding victims, next of kin, or witnesses
29 requesting the notice, information regarding any other person
30 specified in writing by the prosecuting attorney to receive the
31 notice, and the notice are confidential and shall not be available to
32 the person committed under this chapter; and

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

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

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

1 (2) If a person committed under RCW 71.05.280(3) or
2 71.05.320(4)(c) following dismissal of a sex, violent, or felony
3 harassment offense pursuant to RCW 10.77.086(4) escapes, the
4 superintendent shall immediately notify, by the most reasonable and
5 expedient means available, the chief of police of the city and the
6 sheriff of the county in which the person escaped and in which the
7 person resided immediately before the person's arrest and the
8 prosecuting attorney of the county in which the criminal charges
9 against the committed person were dismissed. If previously requested,
10 the superintendent shall also notify the witnesses and the victim of
11 the sex, violent, or felony harassment offense that was dismissed
12 pursuant to RCW 10.77.086(4) preceding commitment under RCW
13 71.05.280(3) or 71.05.320(4) or the victim's next of kin if the crime
14 was a homicide. In addition, the secretary shall also notify
15 appropriate parties pursuant to RCW 70.02.230(2)((~~n~~)) (o). If the
16 person is recaptured, the superintendent shall send notice to the
17 persons designated in this subsection as soon as possible but in no
18 event later than two working days after the department of social and
19 health services learns of such recapture.

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

23 (4) The superintendent shall send the notices required by this
24 chapter to the last address provided to the department of social and
25 health services by the requesting party. The requesting party shall
26 furnish the department of social and health services with a current
27 address.

28 (5) For purposes of this section the following terms have the
29 following meanings:

30 (a) "Violent offense" means a violent offense under RCW
31 9.94A.030;

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

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

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

37 **Sec. 20.** RCW 71.05.020 and 2020 c 302 s 3, 2020 c 256 s 301, and
38 2020 c 5 s 1 are each reenacted and amended to read as follows:

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

3 (1) "Admission" or "admit" means a decision by a physician,
4 physician assistant, or psychiatric advanced registered nurse
5 practitioner that a person should be examined or treated as a patient
6 in a hospital;

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

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

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

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

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

25 (7) "Behavioral health disorder" means either a mental disorder
26 as defined in this section, a substance use disorder as defined in
27 this section, or a co-occurring mental disorder and substance use
28 disorder;

29 (8) "Behavioral health service provider" means a public or
30 private agency that provides mental health, substance use disorder,
31 or co-occurring disorder services to persons with behavioral health
32 disorders as defined under this section and receives funding from
33 public sources. This includes, but is not limited to(~~(hospitals))~~;
34 Hospitals licensed under chapter 70.41 RCW(~~(τ)~~); evaluation and
35 treatment facilities as defined in this section(~~(τ)~~); community
36 mental health service delivery systems or community behavioral health
37 programs as defined in RCW 71.24.025(~~(τ)~~); licensed or certified
38 behavioral health agencies under RCW 71.24.037; facilities conducting
39 competency evaluations and restoration under chapter 10.77 RCW(~~(τ)~~);
40 approved substance use disorder treatment programs as defined in this

1 section((~~T~~)); secure withdrawal management and stabilization
2 facilities as defined in this section((~~T~~)); and correctional
3 facilities operated by state and local governments;

4 (9) "Co-occurring disorder specialist" means an individual
5 possessing an enhancement granted by the department of health under
6 chapter 18.205 RCW that certifies the individual to provide substance
7 use disorder counseling subject to the practice limitations under RCW
8 18.205.105;

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

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

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

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

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

24 (15) "Designated crisis responder" means a mental health
25 professional appointed by the county, by an entity appointed by the
26 county, or by the authority in consultation with a federally
27 recognized Indian tribe or after meeting and conferring with an
28 Indian health care provider, to perform the duties specified in this
29 chapter;

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

32 (17) "Developmental disabilities professional" means a person who
33 has specialized training and three years of experience in directly
34 treating or working with persons with developmental disabilities and
35 is a psychiatrist, physician assistant working with a supervising
36 psychiatrist, psychologist, psychiatric advanced registered nurse
37 practitioner, or social worker, and such other developmental
38 disabilities professionals as may be defined by rules adopted by the
39 secretary of the department of social and health services;

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

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

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

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

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

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

34 (24) "Habilitative services" means those services provided by
35 program personnel to assist persons in acquiring and maintaining life
36 skills and in raising their levels of physical, mental, social, and
37 vocational functioning. Habilitative services include education,
38 training for employment, and therapy. The habilitative process shall
39 be undertaken with recognition of the risk to the public safety

1 presented by the person being assisted as manifested by prior charged
2 criminal conduct;

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

5 (26) "History of one or more violent acts" refers to the period
6 of time ten 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 behavioral health facility, or in confinement as a
9 result of a criminal conviction;

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

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

25 (29) "Individualized service plan" means a plan prepared by a
26 developmental disabilities professional with other professionals as a
27 team, for a person with developmental disabilities, which shall
28 state:

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

31 (b) The conditions and strategies necessary to achieve the
32 purposes of habilitation;

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

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

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

38 (f) Where relevant in light of past criminal behavior and due
39 consideration for public safety, the criteria for proposed movement
40 to less-restrictive settings, criteria for proposed eventual

1 discharge or release, and a projected possible date for discharge or
2 release; and

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

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

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

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

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

22 (34) "Licensed physician" means a person licensed to practice
23 medicine or osteopathic medicine and surgery in the state of
24 Washington;

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

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

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

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

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

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

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

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

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

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

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

33 (44) "Psychiatrist" means a person having a license as a
34 physician and surgeon in this state who has in addition completed
35 three years of graduate training in psychiatry in a program approved
36 by the American medical association or the American osteopathic
37 association and is certified or eligible to be certified by the
38 American board of psychiatry and neurology;

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

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

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

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

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

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

22 (a) Provide the following services:

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

25 (ii) Clinical stabilization services;

26 (iii) Acute or subacute detoxification services for intoxicated
27 individuals; and

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

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

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

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

39 (52) "Substance use disorder" means a cluster of cognitive,
40 behavioral, and physiological symptoms indicating that an individual

1 continues using the substance despite significant substance-related
2 problems. The diagnosis of a substance use disorder is based on a
3 pathological pattern of behaviors related to the use of the
4 substances;

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

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

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

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

37 (57) "Video," unless the context clearly indicates otherwise,
38 means the delivery of behavioral health services through the use of
39 interactive audio and video technology, permitting real-time
40 communication between a person and a designated crisis responder, for

1 the purpose of evaluation. "Video" does not include the use of audio-
2 only telephone, facsimile, email, or store and forward technology.
3 "Store and forward technology" means use of an asynchronous
4 transmission of a person's medical information from a mental health
5 service provider to the designated crisis responder which results in
6 medical diagnosis, consultation, or treatment;

7 (58) "Violent act" means behavior that resulted in homicide,
8 attempted suicide, injury, or substantial loss or damage to
9 property(†

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

15 **Sec. 21.** RCW 71.05.020 and 2020 c 302 s 3, 2020 c 256 s 301,
16 2020 c 80 s 51, and 2020 c 5 s 1 are each reenacted and amended to
17 read as follows:

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

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

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

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

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

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

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

5 (7) "Behavioral health disorder" means either a mental disorder
6 as defined in this section, a substance use disorder as defined in
7 this section, or a co-occurring mental disorder and substance use
8 disorder;

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

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

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

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

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

39 (13) "Custody" means involuntary detention under the provisions
40 of this chapter or chapter 10.77 RCW, uninterrupted by any period of

1 unconditional release from commitment from a facility providing
2 involuntary care and treatment;

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

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

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

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

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

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

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

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

32 (22) "Evaluation and treatment facility" means any facility which
33 can provide directly, or by direct arrangement with other public or
34 private agencies, emergency evaluation and treatment, outpatient
35 care, and timely and appropriate inpatient care to persons suffering
36 from a mental disorder, and which is licensed or certified as such by
37 the department. The authority may certify single beds as temporary
38 evaluation and treatment beds under RCW 71.05.745. A physically
39 separate and separately operated portion of a state hospital may be
40 designated as an evaluation and treatment facility. A facility which

1 is part of, or operated by, the department of social and health
2 services or any federal agency will not require certification. No
3 correctional institution or facility, or jail, shall be an evaluation
4 and treatment facility within the meaning of this chapter;

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

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

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

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

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

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

1 harm or the person becoming gravely disabled within a reasonably
2 short period of time;

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

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

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

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

32 (33) "Less restrictive alternative treatment" means a program of
33 individualized treatment in a less restrictive setting than inpatient
34 treatment that includes the services described in RCW 71.05.585. This
35 term includes: Treatment pursuant to a less restrictive alternative
36 treatment order under RCW 71.05.240 or 71.05.320; treatment pursuant
37 to a conditional release under RCW 71.05.340; and treatment pursuant
38 to an assisted outpatient behavioral health treatment order under RCW
39 71.05.148;

1 (34) "Licensed physician" means a person licensed to practice
2 medicine or osteopathic medicine and surgery in the state of
3 Washington;

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

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

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

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

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

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

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

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

34 (41) "Private agency" means any person, partnership, corporation,
35 or association that is not a public agency, whether or not financed
36 in whole or in part by public funds, which constitutes an evaluation
37 and treatment facility or private institution, or hospital, or
38 approved substance use disorder treatment program, which is conducted
39 for, or includes a department or ward conducted for, the care and
40 treatment of persons with behavioral health disorders;

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

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

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

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

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

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

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

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

33 (50) "Secure withdrawal management and stabilization facility"
34 means a facility operated by either a public or private agency or by
35 the program of an agency which provides care to voluntary individuals
36 and individuals involuntarily detained and committed under this
37 chapter for whom there is a likelihood of serious harm or who are
38 gravely disabled due to the presence of a substance use disorder.
39 Secure withdrawal management and stabilization facilities must:

40 (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 (51) "Social worker" means a person with a master's or further
15 advanced degree from a social work educational program accredited and
16 approved as provided in RCW 18.320.010;
- 17 (52) "Substance use disorder" means a cluster of cognitive,
18 behavioral, and physiological symptoms indicating that an individual
19 continues using the substance despite significant substance-related
20 problems. The diagnosis of a substance use disorder is based on a
21 pathological pattern of behaviors related to the use of the
22 substances;
- 23 (53) "Substance use disorder professional" means a person
24 certified as a substance use disorder professional by the department
25 of health under chapter 18.205 RCW;
- 26 (54) "Therapeutic court personnel" means the staff of a mental
27 health court or other therapeutic court which has jurisdiction over
28 defendants who are dually diagnosed with mental disorders, including
29 court personnel, probation officers, a court monitor, prosecuting
30 attorney, or defense counsel acting within the scope of therapeutic
31 court duties;
- 32 (55) "Treatment records" include registration and all other
33 records concerning persons who are receiving or who at any time have
34 received services for behavioral health disorders, which are
35 maintained by the department of social and health services, the
36 department, the authority, behavioral health administrative services
37 organizations and their staffs, managed care organizations and their
38 staffs, and by treatment facilities. Treatment records include mental
39 health information contained in a medical bill including but not
40 limited to mental health drugs, a mental health diagnosis, provider

1 name, and dates of service stemming from a medical service. Treatment
2 records do not include notes or records maintained for personal use
3 by a person providing treatment services for the department of social
4 and health services, the department, the authority, behavioral health
5 administrative services organizations, managed care organizations, or
6 a treatment facility if the notes or records are not available to
7 others;

8 (56) "Triage facility" means a short-term facility or a portion
9 of a facility licensed or certified by the department, which is
10 designed as a facility to assess and stabilize an individual or
11 determine the need for involuntary commitment of an individual, and
12 must meet department residential treatment facility standards. A
13 triage facility may be structured as a voluntary or involuntary
14 placement facility;

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

25 (58) "Violent act" means behavior that resulted in homicide,
26 attempted suicide, injury, or substantial loss or damage to
27 property(†

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

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

36 The definitions in this section apply throughout this chapter
37 unless the context clearly requires otherwise.

38 (1) "Admission" or "admit" means a decision by a physician,
39 physician assistant, or psychiatric advanced registered nurse

1 practitioner that a person should be examined or treated as a patient
2 in a hospital;

3 (2) "Alcoholism" means a disease, characterized by a dependency
4 on alcoholic beverages, loss of control over the amount and
5 circumstances of use, symptoms of tolerance, physiological or
6 psychological withdrawal, or both, if use is reduced or discontinued,
7 and impairment of health or disruption of social or economic
8 functioning;

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

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

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

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

21 (7) "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 (8) "Behavioral health service provider" means a public or
26 private agency that provides mental health, substance use disorder,
27 or co-occurring disorder services to persons with behavioral health
28 disorders as defined under this section and receives funding from
29 public sources. This includes, but is not limited to(~~(hospitals))~~;
30 Hospitals licensed under chapter 70.41 RCW(~~(τ)~~);
31 evaluation and treatment facilities as defined in this section(~~(τ)~~);
32 community mental health service delivery systems or community behavioral health
33 programs as defined in RCW 71.24.025(~~(τ)~~); licensed or certified
34 behavioral health agencies under RCW 71.24.037; facilities conducting
35 competency evaluations and restoration under chapter 10.77 RCW(~~(τ)~~);
36 approved substance use disorder treatment programs as defined in this
37 section(~~(τ)~~);
38 secure withdrawal management and stabilization
39 facilities as defined in this section(~~(τ)~~); and correctional
facilities operated by state and local governments;

1 (9) "Co-occurring disorder specialist" means an individual
2 possessing an enhancement granted by the department of health under
3 chapter 18.205 RCW that certifies the individual to provide substance
4 use disorder counseling subject to the practice limitations under RCW
5 18.205.105;

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

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

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

16 (13) "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 (14) "Department" means the department of health;

21 (15) "Designated crisis responder" means a mental health
22 professional appointed by the county, by an entity appointed by the
23 county, or by the authority in consultation with a federally
24 recognized Indian tribe or after meeting and conferring with an
25 Indian health care provider, to perform the duties specified in this
26 chapter;

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

29 (17) "Developmental disabilities professional" means a person who
30 has specialized training and three years of experience in directly
31 treating or working with persons with developmental disabilities and
32 is a psychiatrist, physician assistant working with a supervising
33 psychiatrist, psychologist, psychiatric advanced registered nurse
34 practitioner, or social worker, and such other developmental
35 disabilities professionals as may be defined by rules adopted by the
36 secretary of the department of social and health services;

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

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

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

4 (21) "Drug addiction" means a disease, characterized by a
5 dependency on psychoactive chemicals, loss of control over the amount
6 and circumstances of use, symptoms of tolerance, physiological or
7 psychological withdrawal, or both, if use is reduced or discontinued,
8 and impairment of health or disruption of social or economic
9 functioning;

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

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

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

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

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

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

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

21 (29) "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 shall
24 state:

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

27 (b) The conditions and strategies necessary to achieve the
28 purposes of habilitation;

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

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

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

34 (f) Where relevant in light of past criminal behavior and due
35 consideration for public safety, the criteria for proposed movement
36 to less-restrictive settings, criteria for proposed eventual
37 discharge or release, and a projected possible date for discharge or
38 release; and

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

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

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

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

10 (33) "Less restrictive alternative treatment" means a program of
11 individualized treatment in a less restrictive setting than inpatient
12 treatment that includes the services described in RCW 71.05.585. This
13 term includes: Treatment pursuant to a less restrictive alternative
14 treatment order under RCW 71.05.240 or 71.05.320; treatment pursuant
15 to a conditional release under RCW 71.05.340; and treatment pursuant
16 to an assisted outpatient behavioral health treatment order under RCW
17 71.05.148;

18 (34) "Licensed physician" means a person licensed to practice
19 medicine or osteopathic medicine and surgery in the state of
20 Washington;

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

22 (a) A substantial risk that: (i) Physical harm will be inflicted
23 by a person 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 person upon another, as
26 evidenced by behavior which has caused harm, substantial pain, or
27 which places another person or persons in reasonable fear of harm to
28 themselves or others; or (iii) physical harm will be inflicted by a
29 person upon the property of others, as evidenced by behavior which
30 has caused substantial loss or damage to the property of others; or

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

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

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

39 (38) "Mental health professional" means a psychiatrist,
40 psychologist, physician assistant working with a supervising

1 psychiatrist, psychiatric advanced registered nurse practitioner,
2 psychiatric nurse, or social worker, and such other mental health
3 professionals as may be defined by rules adopted by the secretary
4 pursuant to the provisions of this chapter;

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

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

11 (41) "Private agency" means any person, partnership, corporation,
12 or association that is not a public agency, whether or not financed
13 in whole or in part by public funds, which constitutes an evaluation
14 and treatment facility or private institution, or hospital, or
15 approved substance use disorder treatment program, which is conducted
16 for, or includes a department or ward conducted for, the care and
17 treatment of persons with behavioral health disorders;

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

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

28 (44) "Psychiatrist" means a person having a license as a
29 physician and surgeon in this state who has in addition completed
30 three years of graduate training in psychiatry in a program approved
31 by the American medical association or the American osteopathic
32 association and is certified or eligible to be certified by the
33 American board of psychiatry and neurology;

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

36 (46) "Public agency" means any evaluation and treatment facility
37 or institution, secure withdrawal management and stabilization
38 facility, approved substance use disorder treatment program, or
39 hospital which is conducted for, or includes a department or ward
40 conducted for, the care and treatment of persons with behavioral

1 health disorders, if the agency is operated directly by federal,
2 state, county, or municipal government, or a combination of such
3 governments;

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

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

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

10 (50) "Secure withdrawal management and stabilization facility"
11 means a facility operated by either a public or private agency or by
12 the program of an agency which provides care to voluntary individuals
13 and individuals involuntarily detained and committed under this
14 chapter for whom there is a likelihood of serious harm or who are
15 gravely disabled due to the presence of a substance use disorder.
16 Secure withdrawal management and stabilization facilities must:

17 (a) Provide the following services:

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

20 (ii) Clinical stabilization services;

21 (iii) Acute or subacute detoxification services for intoxicated
22 individuals; and

23 (iv) Discharge assistance provided by certified substance use
24 disorder professionals or co-occurring disorder specialists,
25 including facilitating transitions to appropriate voluntary or
26 involuntary inpatient services or to less restrictive alternatives as
27 appropriate for the individual;

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

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

31 (51) "Severe deterioration from safe behavior" means that a
32 person will, if not treated, suffer or continue to suffer severe and
33 abnormal mental, emotional, or physical distress, and this distress
34 is associated with significant impairment of judgment, reason, or
35 behavior;

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

39 (53) "Substance use disorder" means a cluster of cognitive,
40 behavioral, and physiological symptoms indicating that an individual

1 continues using the substance despite significant substance-related
2 problems. The diagnosis of a substance use disorder is based on a
3 pathological pattern of behaviors related to the use of the
4 substances;

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

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

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

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

37 (58) "Video," unless the context clearly indicates otherwise,
38 means the delivery of behavioral health services through the use of
39 interactive audio and video technology, permitting real-time
40 communication between a person and a designated crisis responder, for

1 the purpose of evaluation. "Video" does not include the use of audio-
2 only telephone, facsimile, email, or store and forward technology.
3 "Store and forward technology" means use of an asynchronous
4 transmission of a person's medical information from a mental health
5 service provider to the designated crisis responder which results in
6 medical diagnosis, consultation, or treatment;

7 (59) "Violent act" means behavior that resulted in homicide,
8 attempted suicide, injury, or substantial loss or damage to
9 property(†

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

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

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

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

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

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

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

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

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

5 (7) "Behavioral health disorder" means either a mental disorder
6 as defined in this section, a substance use disorder as defined in
7 this section, or a co-occurring mental disorder and substance use
8 disorder;

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

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

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

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

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

39 (13) "Custody" means involuntary detention under the provisions
40 of this chapter or chapter 10.77 RCW, uninterrupted by any period of

1 unconditional release from commitment from a facility providing
2 involuntary care and treatment;

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

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

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

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

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

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

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

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

32 (22) "Evaluation and treatment facility" means any facility which
33 can provide directly, or by direct arrangement with other public or
34 private agencies, emergency evaluation and treatment, outpatient
35 care, and timely and appropriate inpatient care to persons suffering
36 from a mental disorder, and which is licensed or certified as such by
37 the department. The authority may certify single beds as temporary
38 evaluation and treatment beds under RCW 71.05.745. A physically
39 separate and separately operated portion of a state hospital may be
40 designated as an evaluation and treatment facility. A facility which

1 is part of, or operated by, the department of social and health
2 services or any federal agency will not require certification. No
3 correctional institution or facility, or jail, shall be an evaluation
4 and treatment facility within the meaning of this chapter;

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

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

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

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

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

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

1 harm or the person becoming gravely disabled within a reasonably
2 short period of time;

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

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

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

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

32 (33) "Less restrictive alternative treatment" means a program of
33 individualized treatment in a less restrictive setting than inpatient
34 treatment that includes the services described in RCW 71.05.585. This
35 term includes: Treatment pursuant to a less restrictive alternative
36 treatment order under RCW 71.05.240 or 71.05.320; treatment pursuant
37 to a conditional release under RCW 71.05.340; and treatment pursuant
38 to an assisted outpatient behavioral health treatment order under RCW
39 71.05.148;

1 (34) "Licensed physician" means a person licensed to practice
2 medicine or osteopathic medicine and surgery in the state of
3 Washington;

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

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

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

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

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

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

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

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

34 (41) "Private agency" means any person, partnership, corporation,
35 or association that is not a public agency, whether or not financed
36 in whole or in part by public funds, which constitutes an evaluation
37 and treatment facility or private institution, or hospital, or
38 approved substance use disorder treatment program, which is conducted
39 for, or includes a department or ward conducted for, the care and
40 treatment of persons with behavioral health disorders;

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

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

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

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

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

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

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

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

33 (50) "Secure withdrawal management and stabilization facility"
34 means a facility operated by either a public or private agency or by
35 the program of an agency which provides care to voluntary individuals
36 and individuals involuntarily detained and committed under this
37 chapter for whom there is a likelihood of serious harm or who are
38 gravely disabled due to the presence of a substance use disorder.
39 Secure withdrawal management and stabilization facilities must:

40 (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 (51) "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 (52) "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 (53) "Substance use disorder" means a cluster of cognitive,
23 behavioral, and physiological symptoms indicating that an individual
24 continues using the substance despite significant substance-related
25 problems. The diagnosis of a substance use disorder is based on a
26 pathological pattern of behaviors related to the use of the
27 substances;
28 (54) "Substance use disorder professional" means a person
29 certified as a substance use disorder professional by the department
30 of health under chapter 18.205 RCW;
31 (55) "Therapeutic court personnel" means the staff of a mental
32 health court or other therapeutic court which has jurisdiction over
33 defendants who are dually diagnosed with mental disorders, including
34 court personnel, probation officers, a court monitor, prosecuting
35 attorney, or defense counsel acting within the scope of therapeutic
36 court duties;
37 (56) "Treatment records" include registration and all other
38 records concerning persons who are receiving or who at any time have
39 received services for behavioral health disorders, which are
40 maintained by the department of social and health services, the

1 department, the authority, behavioral health administrative services
2 organizations and their staffs, managed care organizations and their
3 staffs, and by treatment facilities. Treatment records include mental
4 health information contained in a medical bill including but not
5 limited to mental health drugs, a mental health diagnosis, provider
6 name, and dates of service stemming from a medical service. Treatment
7 records do not include notes or records maintained for personal use
8 by a person providing treatment services for the department of social
9 and health services, the department, the authority, behavioral health
10 administrative services organizations, managed care organizations, or
11 a treatment facility if the notes or records are not available to
12 others;

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

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

30 (59) "Violent act" means behavior that resulted in homicide,
31 attempted suicide, injury, or substantial loss or damage to
32 property(†

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

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

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

6 (2) The health care authority must provide written notice of the
7 effective date of sections 4 and 28 (~~of this act~~), chapter 302,
8 Laws of 2020 and sections 22 and 23 of this act to affected parties,
9 the chief clerk of the house of representatives, the secretary of the
10 senate, the office of the code reviser, and others as deemed
11 appropriate by the authority.

12 **Sec. 25.** RCW 71.34.020 and 2020 c 302 s 63, 2020 c 274 s 50, and
13 2020 c 185 s 2 are each reenacted and amended to read as follows:

14 Unless the context clearly requires otherwise, the definitions in
15 this section apply throughout this chapter.

16 (1) "Admission" or "admit" means a decision by a physician,
17 physician assistant, or psychiatric advanced registered nurse
18 practitioner that a minor should be examined or treated as a patient
19 in a hospital.

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

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

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

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

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

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

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

3 (9) "Behavioral health disorder" means either a mental disorder
4 as defined in this section, a substance use disorder as defined in
5 this section, or a co-occurring mental disorder and substance use
6 disorder.

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

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

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

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

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

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

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

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

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

1 (17) "Department" means the department of social and health
2 services.

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

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

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

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

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

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

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

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

36 (26) "Gravely disabled minor" means a minor who, as a result of a
37 behavioral health disorder, (a) is in danger of serious physical harm
38 resulting from a failure to provide for his or her essential human
39 needs of health or safety, or (b) manifests severe deterioration in
40 routine functioning evidenced by repeated and escalating loss of

1 cognitive or volitional control over his or her actions and is not
2 receiving such care as is essential for his or her health or safety.

3 (27) "Habilitative services" means those services provided by
4 program personnel to assist minors in acquiring and maintaining life
5 skills and in raising their levels of physical, behavioral, social,
6 and vocational functioning. Habilitative services include education,
7 training for employment, and therapy.

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

10 (29) "History of one or more violent acts" refers to the period
11 of time five years prior to the filing of a petition under this
12 chapter, excluding any time spent, but not any violent acts
13 committed, in a mental health facility, a long-term (~~alcoholism or~~
14 ~~drug~~) substance use disorder treatment facility, or in confinement
15 as a result of a criminal conviction.

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

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

21 (b) The conditions and strategies necessary to achieve the
22 purposes of habilitation;

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

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

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

28 (f) Where relevant in light of past criminal behavior and due
29 consideration for public safety, the criteria for proposed movement
30 to less-restrictive settings, criteria for proposed eventual
31 discharge or release, and a projected possible date for discharge or
32 release; and

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

35 (31)(a) "Inpatient treatment" means twenty-four-hour-per-day
36 mental health care provided within a general hospital, psychiatric
37 hospital, residential treatment facility licensed or certified by the
38 department of health as an evaluation and treatment facility for
39 minors, secure withdrawal management and stabilization facility for

1 minors, or approved substance use disorder treatment program for
2 minors.

3 (b) For purposes of family-initiated treatment under RCW
4 71.34.600 through 71.34.670, "inpatient treatment" has the meaning
5 included in (a) of this subsection and any other residential
6 treatment facility licensed under chapter 71.12 RCW.

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

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

12 (34) "Kinship caregiver" has the same meaning as in RCW
13 74.13.031(19) (a).

14 (35) "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 (36) "Less restrictive alternative" or "less restrictive setting"
19 means outpatient treatment provided to a minor (~~who is not residing~~
20 ~~in a facility providing inpatient treatment as defined in this~~
21 ~~chapter~~) as a program of individualized treatment in a less
22 restrictive setting than inpatient treatment that includes the
23 services described in RCW 71.34.755, including residential treatment.

24 (37) "Licensed physician" means a person licensed to practice
25 medicine or osteopathic medicine and surgery in the state of
26 Washington.

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

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

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

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

1 (40) "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 (41) "Medical necessity" for inpatient care means a requested
5 service which is reasonably calculated to: (a) Diagnose, correct,
6 cure, or alleviate a mental disorder or substance use disorder; or
7 (b) prevent the progression of a mental disorder or substance use
8 disorder that endangers life or causes suffering and pain, or results
9 in illness or infirmity or threatens to cause or aggravate a
10 disability, or causes physical deformity or malfunction, and there is
11 no adequate less restrictive alternative available.

12 (42) "Mental disorder" means any organic, mental, or emotional
13 impairment that has substantial adverse effects on an individual's
14 cognitive or volitional functions. The presence of alcohol abuse,
15 drug abuse, juvenile criminal history, antisocial behavior, or
16 intellectual disabilities alone is insufficient to justify a finding
17 of "mental disorder" within the meaning of this section.

18 (43) "Mental health professional" means a psychiatrist,
19 psychiatric advanced registered nurse practitioner, physician
20 assistant working with a supervising psychiatrist, psychologist,
21 psychiatric nurse, social worker, and such other mental health
22 professionals as defined by rules adopted by the secretary of the
23 department of health under this chapter.

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

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

28 (46)(a) "Parent" has the same meaning as defined in RCW
29 26.26A.010, including either parent if custody is shared under a
30 joint custody agreement, or a person or agency judicially appointed
31 as legal guardian or custodian of the child.

32 (b) For purposes of family-initiated treatment under RCW
33 71.34.600 through 71.34.670, "parent" also includes a person to whom
34 a parent defined in (a) of this subsection has given a signed
35 authorization to make health care decisions for the adolescent, a
36 stepparent who is involved in caring for the adolescent, a kinship
37 caregiver who is involved in caring for the adolescent, or another
38 relative who is responsible for the health care of the adolescent,
39 who may be required to provide a declaration under penalty of perjury
40 stating that he or she is a relative responsible for the health care

1 of the adolescent pursuant to chapter 5.50 RCW. If a dispute arises
2 between individuals authorized to act as a parent for the purpose of
3 RCW 71.34.600 through 71.34.670, the disagreement must be resolved
4 according to the priority established under RCW 7.70.065(2) (a).

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

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

11 (49) "Private agency" means any person, partnership, corporation,
12 or association that is not a public agency, whether or not financed
13 in whole or in part by public funds, that constitutes an evaluation
14 and treatment facility or private institution, or hospital, or
15 approved substance use disorder treatment program, that is conducted
16 for, or includes a distinct unit, floor, or ward conducted for, the
17 care and treatment of persons with mental illness, substance use
18 disorders, or both mental illness and substance use disorders.

19 (50) "Professional person in charge" or "professional person"
20 means a physician, other mental health professional, or other person
21 empowered by an evaluation and treatment facility, secure withdrawal
22 management and stabilization facility, or approved substance use
23 disorder treatment program with authority to make admission and
24 discharge decisions on behalf of that facility.

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

29 (52) "Psychiatrist" means a person having a license as a
30 physician in this state who has completed residency training in
31 psychiatry in a program approved by the American Medical Association
32 or the American Osteopathic Association, and is board eligible or
33 board certified in psychiatry.

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

36 (54) "Public agency" means any evaluation and treatment facility
37 or institution, or hospital, or approved substance use disorder
38 treatment program that is conducted for, or includes a distinct unit,
39 floor, or ward conducted for, the care and treatment of persons with
40 mental illness, substance use disorders, or both mental illness and

1 substance use disorders if the agency is operated directly by
2 federal, state, county, or municipal government, or a combination of
3 such governments.

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

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

8 (57) "Responsible other" means the minor, the minor's parent or
9 estate, or any other person legally responsible for support of the
10 minor.

11 (58) "Secretary" means the secretary of the department or
12 secretary's designee.

13 (59) "Secure withdrawal management and stabilization facility"
14 means a facility operated by either a public or private agency or by
15 the program of an agency which provides care to voluntary individuals
16 and individuals involuntarily detained and committed under this
17 chapter for whom there is a likelihood of serious harm or who are
18 gravely disabled due to the presence of a substance use disorder.
19 Secure withdrawal management and stabilization facilities must:

20 (a) Provide the following services:

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

23 (ii) Clinical stabilization services;

24 (iii) Acute or subacute detoxification services for intoxicated
25 individuals; and

26 (iv) Discharge assistance provided by certified substance use
27 disorder professionals or co-occurring disorder specialists,
28 including facilitating transitions to appropriate voluntary or
29 involuntary inpatient services or to less restrictive alternatives as
30 appropriate for the individual;

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

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

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

37 (61) "Start of initial detention" means the time of arrival of
38 the minor at the first evaluation and treatment facility, secure
39 withdrawal management and stabilization facility, or approved
40 substance use disorder treatment program offering inpatient treatment

1 if the minor is being involuntarily detained at the time. With regard
2 to voluntary patients, "start of initial detention" means the time at
3 which the minor gives notice of intent to leave under the provisions
4 of this chapter.

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

9 (63) "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 ~~((63))~~ (64) "Substance use disorder professional" means a
16 person certified as a substance use disorder professional by the
17 department of health under chapter 18.205 RCW.

18 ~~((64))~~ (65) "Therapeutic court personnel" means the staff of a
19 mental health court or other therapeutic court which has jurisdiction
20 over defendants who are dually diagnosed with mental disorders,
21 including court personnel, probation officers, a court monitor,
22 prosecuting attorney, or defense counsel acting within the scope of
23 therapeutic court duties.

24 ~~((65))~~ (66) "Treatment records" include registration and all
25 other records concerning persons who are receiving or who at any time
26 have received services for mental illness, which are maintained by
27 the department, the department of health, the authority, behavioral
28 health organizations and their staffs, and by treatment facilities.
29 Treatment records include mental health information contained in a
30 medical bill including but not limited to mental health drugs, a
31 mental health diagnosis, provider name, and dates of service stemming
32 from a medical service. Treatment records do not include notes or
33 records maintained for personal use by a person providing treatment
34 services for the department, the department of health, the authority,
35 behavioral health organizations, or a treatment facility if the notes
36 or records are not available to others.

37 ~~((66))~~ (67) "Triage facility" means a short-term facility or a
38 portion of a facility licensed or certified by the department of
39 health under RCW 71.24.035, which is designed as a facility to assess
40 and stabilize an individual or determine the need for involuntary

1 commitment of an individual, and must meet department of health
2 residential treatment facility standards. A triage facility may be
3 structured as a voluntary or involuntary placement facility.

4 ~~((67))~~ (68) "Video" means the delivery of behavioral health
5 services through the use of interactive audio and video technology,
6 permitting real-time communication between a person and a designated
7 crisis responder, for the purpose of evaluation. "Video" does not
8 include the use of audio-only telephone, facsimile, email, or store
9 and forward technology.

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

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

17 **Sec. 26.** RCW 71.34.020 and 2020 c 302 s 63, 2020 c 274 s 50,
18 2020 c 185 s 2, and 2020 c 80 s 54 are each reenacted and amended to
19 read as follows:

20 Unless the context clearly requires otherwise, the definitions in
21 this section apply throughout this chapter.

22 (1) "Admission" or "admit" means a decision by a physician,
23 physician assistant, or psychiatric advanced registered nurse
24 practitioner that a minor should be examined or treated as a patient
25 in a hospital.

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

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

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

37 (5) "Approved substance use disorder treatment program" means a
38 program for minors with substance use disorders provided by a

1 treatment program licensed or certified by the department of health
2 as meeting standards adopted under chapter 71.24 RCW.

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

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

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

9 (9) "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 (10) "Child psychiatrist" means a person having a license as a
14 physician and surgeon in this state, who has had graduate training in
15 child psychiatry in a program approved by the American Medical
16 Association or the American Osteopathic Association, and who is board
17 eligible or board certified in child psychiatry.

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

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

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

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

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

32 (14) "Co-occurring disorder specialist" means an individual
33 possessing an enhancement granted by the department of health under
34 chapter 18.205 RCW that certifies the individual to provide substance
35 use disorder counseling subject to the practice limitations under RCW
36 18.205.105.

37 (15) "Crisis stabilization unit" means a short-term facility or a
38 portion of a facility licensed or certified by the department of
39 health under RCW 71.24.035, such as a residential treatment facility
40 or a hospital, which has been designed to assess, diagnose, and treat

1 individuals experiencing an acute crisis without the use of long-term
2 hospitalization.

3 (16) "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 (17) "Department" means the department of social and health
8 services.

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

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

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

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

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

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

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

38 (25) "Evaluation and treatment program" means the total system of
39 services and facilities coordinated and approved by a county or

1 combination of counties for the evaluation and treatment of minors
2 under this chapter.

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

10 (27) "Habilitative services" means those services provided by
11 program personnel to assist minors in acquiring and maintaining life
12 skills and in raising their levels of physical, behavioral, social,
13 and vocational functioning. Habilitative services include education,
14 training for employment, and therapy.

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

17 (29) "History of one or more violent acts" refers to the period
18 of time five years prior to the filing of a petition under this
19 chapter, excluding any time spent, but not any violent acts
20 committed, in a mental health facility, a long-term (~~alcoholism or~~
21 ~~drug~~) substance use disorder treatment facility, or in confinement
22 as a result of a criminal conviction.

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

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

28 (b) The conditions and strategies necessary to achieve the
29 purposes of habilitation;

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

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

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

35 (f) Where relevant in light of past criminal behavior and due
36 consideration for public safety, the criteria for proposed movement
37 to less-restrictive settings, criteria for proposed eventual
38 discharge or release, and a projected possible date for discharge or
39 release; and

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

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

10 (b) For purposes of family-initiated treatment under RCW
11 71.34.600 through 71.34.670, "inpatient treatment" has the meaning
12 included in (a) of this subsection and any other residential
13 treatment facility licensed under chapter 71.12 RCW.

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

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

19 (34) "Kinship caregiver" has the same meaning as in RCW
20 74.13.031(19)(a).

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

25 (36) "Less restrictive alternative" or "less restrictive setting"
26 means outpatient treatment provided to a minor (~~who is not residing~~
27 ~~in a facility providing inpatient treatment as defined in this~~
28 ~~chapter~~) as a program of individualized treatment in a less
29 restrictive setting than inpatient treatment that includes the
30 services described in RCW 71.34.755, including residential treatment.

31 (37) "Licensed physician" means a person licensed to practice
32 medicine or osteopathic medicine and surgery in the state of
33 Washington.

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

35 (a) A substantial risk that: (i) Physical harm will be inflicted
36 by a minor upon his or her own person, as evidenced by threats or
37 attempts to commit suicide or inflict physical harm on oneself; (ii)
38 physical harm will be inflicted by a minor upon another individual,
39 as evidenced by behavior which has caused such harm or which places
40 another person or persons in reasonable fear of sustaining such harm;

1 or (iii) physical harm will be inflicted by a minor upon the property
2 of others, as evidenced by behavior which has caused substantial loss
3 or damage to the property of others; or

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

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

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

11 (41) "Medical necessity" for inpatient care means a requested
12 service which is reasonably calculated to: (a) Diagnose, correct,
13 cure, or alleviate a mental disorder or substance use disorder; or
14 (b) prevent the progression of a mental disorder or substance use
15 disorder that endangers life or causes suffering and pain, or results
16 in illness or infirmity or threatens to cause or aggravate a
17 disability, or causes physical deformity or malfunction, and there is
18 no adequate less restrictive alternative available.

19 (42) "Mental disorder" means any organic, mental, or emotional
20 impairment that has substantial adverse effects on an individual's
21 cognitive or volitional functions. The presence of alcohol abuse,
22 drug abuse, juvenile criminal history, antisocial behavior, or
23 intellectual disabilities alone is insufficient to justify a finding
24 of "mental disorder" within the meaning of this section.

25 (43) "Mental health professional" means a psychiatrist,
26 psychiatric advanced registered nurse practitioner, physician
27 assistant working with a supervising psychiatrist, psychologist,
28 psychiatric nurse, social worker, and such other mental health
29 professionals as defined by rules adopted by the secretary of the
30 department of health under this chapter.

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

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

35 (46)(a) "Parent" has the same meaning as defined in RCW
36 26.26A.010, including either parent if custody is shared under a
37 joint custody agreement, or a person or agency judicially appointed
38 as legal guardian or custodian of the child.

39 (b) For purposes of family-initiated treatment under RCW
40 71.34.600 through 71.34.670, "parent" also includes a person to whom

1 a parent defined in (a) of this subsection has given a signed
2 authorization to make health care decisions for the adolescent, a
3 stepparent who is involved in caring for the adolescent, a kinship
4 caregiver who is involved in caring for the adolescent, or another
5 relative who is responsible for the health care of the adolescent,
6 who may be required to provide a declaration under penalty of perjury
7 stating that he or she is a relative responsible for the health care
8 of the adolescent pursuant to chapter 5.50 RCW. If a dispute arises
9 between individuals authorized to act as a parent for the purpose of
10 RCW 71.34.600 through 71.34.670, the disagreement must be resolved
11 according to the priority established under RCW 7.70.065(2)(a).

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

16 (48) "Physician assistant" means a person licensed as a physician
17 assistant under chapter 18.71A RCW.

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

26 (50) "Professional person in charge" or "professional person"
27 means a physician, other mental health professional, or other person
28 empowered by an evaluation and treatment facility, secure withdrawal
29 management and stabilization facility, or approved substance use
30 disorder treatment program with authority to make admission and
31 discharge decisions on behalf of that facility.

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

36 (52) "Psychiatrist" means a person having a license as a
37 physician in this state who has completed residency training in
38 psychiatry in a program approved by the American Medical Association
39 or the American Osteopathic Association, and is board eligible or
40 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) "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 (61) "Start of initial detention" means the time of arrival of
5 the minor at the first evaluation and treatment facility, secure
6 withdrawal management and stabilization facility, or approved
7 substance use disorder treatment program offering inpatient treatment
8 if the minor is being involuntarily detained at the time. With regard
9 to voluntary patients, "start of initial detention" means the time at
10 which the minor gives notice of intent to leave under the provisions
11 of this chapter.

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

16 (63) "Substance use disorder" means a cluster of cognitive,
17 behavioral, and physiological symptoms indicating that an individual
18 continues using the substance despite significant substance-related
19 problems. The diagnosis of a substance use disorder is based on a
20 pathological pattern of behaviors related to the use of the
21 substances.

22 ~~((63))~~ (64) "Substance use disorder professional" means a
23 person certified as a substance use disorder professional by the
24 department of health under chapter 18.205 RCW.

25 ~~((64))~~ (65) "Therapeutic court personnel" means the staff of a
26 mental health court or other therapeutic court which has jurisdiction
27 over defendants who are dually diagnosed with mental disorders,
28 including court personnel, probation officers, a court monitor,
29 prosecuting attorney, or defense counsel acting within the scope of
30 therapeutic court duties.

31 ~~((65))~~ (66) "Treatment records" include registration and all
32 other records concerning persons who are receiving or who at any time
33 have received services for mental illness, which are maintained by
34 the department, the department of health, the authority, behavioral
35 health organizations and their staffs, and by treatment facilities.
36 Treatment records include mental health information contained in a
37 medical bill including but not limited to mental health drugs, a
38 mental health diagnosis, provider name, and dates of service stemming
39 from a medical service. Treatment records do not include notes or
40 records maintained for personal use by a person providing treatment

1 services for the department, the department of health, the authority,
2 behavioral health organizations, or a treatment facility if the notes
3 or records are not available to others.

4 ~~((66))~~ (67) "Triage facility" means a short-term facility or a
5 portion of a facility licensed or certified by the department of
6 health under RCW 71.24.035, which is designed as a facility to assess
7 and stabilize an individual or determine the need for involuntary
8 commitment of an individual, and must meet department of health
9 residential treatment facility standards. A triage facility may be
10 structured as a voluntary or involuntary placement facility.

11 ~~((67))~~ (68) "Video" means the delivery of behavioral health
12 services through the use of interactive audio and video technology,
13 permitting real-time communication between a person and a designated
14 crisis responder, for the purpose of evaluation. "Video" does not
15 include the use of audio-only telephone, facsimile, email, or store
16 and forward technology.

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

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

24 **Sec. 27.** RCW 71.34.020 and 2020 c 302 s 64, 2020 c 302 s 63,
25 2020 c 274 s 50, and 2020 c 185 s 2 are each reenacted and amended to
26 read as follows:

27 Unless the context clearly requires otherwise, the definitions in
28 this section apply throughout this chapter.

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

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

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

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

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

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

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

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

15 (9) "Behavioral health disorder" means either a mental disorder
16 as defined in this section, a substance use disorder as defined in
17 this section, or a co-occurring mental disorder and substance use
18 disorder.

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

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

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

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

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

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

38 (14) "Co-occurring disorder specialist" means an individual
39 possessing an enhancement granted by the department of health under
40 chapter 18.205 RCW that certifies the individual to provide substance

1 use disorder counseling subject to the practice limitations under RCW
2 18.205.105.

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

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

13 (17) "Department" means the department of social and health
14 services.

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

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

19 (20) "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.

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

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

30 (23) "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 (24) "Evaluation and treatment facility" means a public or
34 private facility or unit that is licensed or certified by the
35 department of health to provide emergency, inpatient, residential, or
36 outpatient mental health evaluation and treatment services for
37 minors. A physically separate and separately operated portion of a
38 state hospital may be designated as an evaluation and treatment
39 facility for minors. A facility which is part of or operated by the
40 state or federal agency does not require licensure or certification.

1 No correctional institution or facility, juvenile court detention
2 facility, or jail may be an evaluation and treatment facility within
3 the meaning of this chapter.

4 (25) "Evaluation and treatment program" means the total system of
5 services and facilities coordinated and approved by a county or
6 combination of counties for the evaluation and treatment of minors
7 under this chapter.

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

15 (27) "Habilitative services" means those services provided by
16 program personnel to assist minors in acquiring and maintaining life
17 skills and in raising their levels of physical, behavioral, social,
18 and vocational functioning. Habilitative services include education,
19 training for employment, and therapy.

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

22 (29) "History of one or more violent acts" refers to the period
23 of time five years prior to the filing of a petition under this
24 chapter, excluding any time spent, but not any violent acts
25 committed, in a mental health facility, a long-term (~~alcoholism or~~
26 ~~drug~~) substance use disorder treatment facility, or in confinement
27 as a result of a criminal conviction.

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

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

33 (b) The conditions and strategies necessary to achieve the
34 purposes of habilitation;

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

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

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

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

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

8 (31)(a) "Inpatient treatment" means twenty-four-hour-per-day
9 mental health care provided within a general hospital, psychiatric
10 hospital, residential treatment facility licensed or certified by the
11 department of health as an evaluation and treatment facility for
12 minors, secure withdrawal management and stabilization facility for
13 minors, or approved substance use disorder treatment program for
14 minors.

15 (b) For purposes of family-initiated treatment under RCW
16 71.34.600 through 71.34.670, "inpatient treatment" has the meaning
17 included in (a) of this subsection and any other residential
18 treatment facility licensed under chapter 71.12 RCW.

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

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

24 (34) "Kinship caregiver" has the same meaning as in RCW
25 74.13.031(19)(a).

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

30 (36) "Less restrictive alternative" or "less restrictive setting"
31 means outpatient treatment provided to a minor (~~who is not residing~~
32 ~~in a facility providing inpatient treatment as defined in this~~
33 ~~chapter~~) as a program of individualized treatment in a less
34 restrictive setting than inpatient treatment that includes the
35 services described in RCW 71.34.755, including residential treatment.

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

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

1 (a) A substantial risk that: (i) Physical harm will be inflicted
2 by a minor upon his or her own person, as evidenced by threats or
3 attempts to commit suicide or inflict physical harm on oneself; (ii)
4 physical harm will be inflicted by a minor upon another individual,
5 as evidenced by behavior which has caused harm, substantial pain, or
6 which places another person or persons in reasonable fear of harm to
7 themselves or others; or (iii) physical harm will be inflicted by a
8 minor upon the property of others, as evidenced by behavior which has
9 caused substantial loss or damage to the property of others; or

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

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

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

17 (41) "Medical necessity" for inpatient care means a requested
18 service which is reasonably calculated to: (a) Diagnose, correct,
19 cure, or alleviate a mental disorder or substance use disorder; or
20 (b) prevent the progression of a mental disorder or substance use
21 disorder that endangers life or causes suffering and pain, or results
22 in illness or infirmity or threatens to cause or aggravate a
23 disability, or causes physical deformity or malfunction, and there is
24 no adequate less restrictive alternative available.

25 (42) "Mental disorder" means any organic, mental, or emotional
26 impairment that has substantial adverse effects on an individual's
27 cognitive or volitional functions. The presence of alcohol abuse,
28 drug abuse, juvenile criminal history, antisocial behavior, or
29 intellectual disabilities alone is insufficient to justify a finding
30 of "mental disorder" within the meaning of this section.

31 (43) "Mental health professional" means a psychiatrist,
32 psychiatric advanced registered nurse practitioner, physician
33 assistant working with a supervising psychiatrist, psychologist,
34 psychiatric nurse, social worker, and such other mental health
35 professionals as defined by rules adopted by the secretary of the
36 department of health under this chapter.

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

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

1 (46) (a) "Parent" has the same meaning as defined in RCW
2 26.26A.010, including either parent if custody is shared under a
3 joint custody agreement, or a person or agency judicially appointed
4 as legal guardian or custodian of the child.

5 (b) For purposes of family-initiated treatment under RCW
6 71.34.600 through 71.34.670, "parent" also includes a person to whom
7 a parent defined in (a) of this subsection has given a signed
8 authorization to make health care decisions for the adolescent, a
9 stepparent who is involved in caring for the adolescent, a kinship
10 caregiver who is involved in caring for the adolescent, or another
11 relative who is responsible for the health care of the adolescent,
12 who may be required to provide a declaration under penalty of perjury
13 stating that he or she is a relative responsible for the health care
14 of the adolescent pursuant to chapter 5.50 RCW. If a dispute arises
15 between individuals authorized to act as a parent for the purpose of
16 RCW 71.34.600 through 71.34.670, the disagreement must be resolved
17 according to the priority established under RCW 7.70.065(2) (a).

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

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

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

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

38 (51) "Psychiatric nurse" means a registered nurse who has
39 experience in the direct treatment of persons who have a mental

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

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

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

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

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

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

22 (57) "Responsible other" means the minor, the minor's parent or
23 estate, or any other person legally responsible for support of the
24 minor.

25 (58) "Secretary" means the secretary of the department or
26 secretary's designee.

27 (59) "Secure withdrawal management and stabilization facility"
28 means a facility operated by either a public or private agency or by
29 the program of an agency which provides care to voluntary individuals
30 and individuals involuntarily detained and committed under this
31 chapter for whom there is a likelihood of serious harm or who are
32 gravely disabled due to the presence of a substance use disorder.
33 Secure withdrawal management and stabilization facilities must:

34 (a) Provide the following services:

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

37 (ii) Clinical stabilization services;

38 (iii) Acute or subacute detoxification services for intoxicated
39 individuals; and

1 (iv) Discharge assistance provided by certified substance use
2 disorder professionals or co-occurring disorder specialists,
3 including facilitating transitions to appropriate voluntary or
4 involuntary inpatient services or to less restrictive alternatives as
5 appropriate for the individual;

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

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

9 (60) "Severe deterioration from safe behavior" means that a
10 person will, if not treated, suffer or continue to suffer severe and
11 abnormal mental, emotional, or physical distress, and this distress
12 is associated with significant impairment of judgment, reason, or
13 behavior.

14 (61) "Social worker" means a person with a master's or further
15 advanced degree from a social work educational program accredited and
16 approved as provided in RCW 18.320.010.

17 (62) "Start of initial detention" means the time of arrival of
18 the minor at the first evaluation and treatment facility, secure
19 withdrawal management and stabilization facility, or approved
20 substance use disorder treatment program offering inpatient treatment
21 if the minor is being involuntarily detained at the time. With regard
22 to voluntary patients, "start of initial detention" means the time at
23 which the minor gives notice of intent to leave under the provisions
24 of this chapter.

25 (63) "Store and forward technology" means use of an asynchronous
26 transmission of a person's medical information from a mental health
27 service provider to the designated crisis responder which results in
28 medical diagnosis, consultation, or treatment.

29 (64) "Substance use disorder" means a cluster of cognitive,
30 behavioral, and physiological symptoms indicating that an individual
31 continues using the substance despite significant substance-related
32 problems. The diagnosis of a substance use disorder is based on a
33 pathological pattern of behaviors related to the use of the
34 substances.

35 ((+64)) (65) "Substance use disorder professional" means a
36 person certified as a substance use disorder professional by the
37 department of health under chapter 18.205 RCW.

38 ((+65)) (66) "Therapeutic court personnel" means the staff of a
39 mental health court or other therapeutic court which has jurisdiction
40 over defendants who are dually diagnosed with mental disorders,

1 including court personnel, probation officers, a court monitor,
2 prosecuting attorney, or defense counsel acting within the scope of
3 therapeutic court duties.

4 ~~((66))~~ (67) "Treatment records" include registration and all
5 other records concerning persons who are receiving or who at any time
6 have received services for mental illness, which are maintained by
7 the department, the department of health, the authority, behavioral
8 health organizations and their staffs, and by treatment facilities.
9 Treatment records include mental health information contained in a
10 medical bill including but not limited to mental health drugs, a
11 mental health diagnosis, provider name, and dates of service stemming
12 from a medical service. Treatment records do not include notes or
13 records maintained for personal use by a person providing treatment
14 services for the department, the department of health, the authority,
15 behavioral health organizations, or a treatment facility if the notes
16 or records are not available to others.

17 ~~((67))~~ (68) "Triage facility" means a short-term facility or a
18 portion of a facility licensed or certified by the department of
19 health under RCW 71.24.035, which is designed as a facility to assess
20 and stabilize an individual or determine the need for involuntary
21 commitment of an individual, and must meet department of health
22 residential treatment facility standards. A triage facility may be
23 structured as a voluntary or involuntary placement facility.

24 ~~((68))~~ (69) "Video" means the delivery of behavioral health
25 services through the use of interactive audio and video technology,
26 permitting real-time communication between a person and a designated
27 crisis responder, for the purpose of evaluation. "Video" does not
28 include the use of audio-only telephone, facsimile, email, or store
29 and forward technology.

30 (70) "Violent act" means behavior that resulted in homicide,
31 attempted suicide, injury, or substantial loss or damage to property.

32 ~~((69) "Written order of apprehension" means an order of the~~
33 ~~court for a peace officer to deliver the named minor in the order to~~
34 ~~a facility or emergency room as determined by the designated crisis~~
35 ~~responder. Such orders must be entered into the Washington crime~~
36 ~~information center database.))~~

37 **Sec. 28.** RCW 71.34.020 and 2020 c 302 s 64, 2020 c 302 s 63,
38 2020 c 274 s 50, 2020 c 185 s 2, and 2020 c 80 s 54 are each
39 reenacted and amended to read as follows:

1 Unless the context clearly requires otherwise, the definitions in
2 this section apply throughout this chapter.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

27 (17) "Department" means the department of social and health
28 services.

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

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

33 (20) "Developmental disabilities professional" means a person who
34 has specialized training and three years of experience in directly
35 treating or working with persons with developmental disabilities and
36 is a psychiatrist, physician assistant working with a supervising
37 psychiatrist, psychologist, psychiatric advanced registered nurse
38 practitioner, or social worker, and such other developmental
39 disabilities professionals as may be defined by rules adopted by the
40 secretary of the department.

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

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

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

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

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

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

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

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

36 (29) "History of one or more violent acts" refers to the period
37 of time five years prior to the filing of a petition under this
38 chapter, excluding any time spent, but not any violent acts
39 committed, in a mental health facility, a long-term (~~alcoholism or~~

1 ~~drug~~) substance use disorder treatment facility, or in confinement
2 as a result of a criminal conviction.

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

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

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

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

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

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

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

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

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

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

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

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

38 (34) "Kinship caregiver" has the same meaning as in RCW
39 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 harm, substantial pain, or
20 which places another person or persons in reasonable fear of harm to
21 themselves or others; or (iii) physical harm will be inflicted by a
22 minor upon the property of others, as evidenced by behavior which has
23 caused substantial loss 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 18.71A 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) "Severe deterioration from safe behavior" means that a
23 person will, if not treated, suffer or continue to suffer severe and
24 abnormal mental, emotional, or physical distress, and this distress
25 is associated with significant impairment of judgment, reason, or
26 behavior.

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

30 ~~((+61+))~~ (62) "Start of initial detention" means the time of
31 arrival of the minor at the first evaluation and treatment facility,
32 secure withdrawal management and stabilization facility, or approved
33 substance use disorder treatment program offering inpatient treatment
34 if the minor is being involuntarily detained at the time. With regard
35 to voluntary patients, "start of initial detention" means the time at
36 which the minor gives notice of intent to leave under the provisions
37 of this chapter.

38 ~~((+62+))~~ (63) "Store and forward technology" means use of an
39 asynchronous transmission of a person's medical information from a

1 mental health service provider to the designated crisis responder
2 which results in medical diagnosis, consultation, or treatment.

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

9 ~~((63))~~ (65) "Substance use disorder professional" means a
10 person certified as a substance use disorder professional by the
11 department of health under chapter 18.205 RCW.

12 ~~((64) "Severe deterioration from safe behavior" means that a~~
13 ~~person will, if not treated, suffer or continue to suffer severe and~~
14 ~~abnormal mental, emotional, or physical distress, and this distress~~
15 ~~is associated with significant impairment of judgment, reason, or~~
16 ~~behavior.~~

17 ~~(65))~~ (66) "Therapeutic court personnel" means the staff of a
18 mental health court or other therapeutic court which has jurisdiction
19 over defendants who are dually diagnosed with mental disorders,
20 including court personnel, probation officers, a court monitor,
21 prosecuting attorney, or defense counsel acting within the scope of
22 therapeutic court duties.

23 ~~((66))~~ (67) "Treatment records" include registration and all
24 other records concerning persons who are receiving or who at any time
25 have received services for mental illness, which are maintained by
26 the department, the department of health, the authority, behavioral
27 health organizations and their staffs, and by treatment facilities.
28 Treatment records include mental health information contained in a
29 medical bill including but not limited to mental health drugs, a
30 mental health diagnosis, provider name, and dates of service stemming
31 from a medical service. Treatment records do not include notes or
32 records maintained for personal use by a person providing treatment
33 services for the department, the department of health, the authority,
34 behavioral health organizations, or a treatment facility if the notes
35 or records are not available to others.

36 ~~((67))~~ (68) "Triage facility" means a short-term facility or a
37 portion of a facility licensed or certified by the department of
38 health under RCW 71.24.035, which is designed as a facility to assess
39 and stabilize an individual or determine the need for involuntary
40 commitment of an individual, and must meet department of health

1 residential treatment facility standards. A triage facility may be
2 structured as a voluntary or involuntary placement facility.

3 ~~((68))~~ (69) "Video" means the delivery of behavioral health
4 services through the use of interactive audio and video technology,
5 permitting real-time communication between a person and a designated
6 crisis responder, for the purpose of evaluation. "Video" does not
7 include the use of audio-only telephone, facsimile, email, or store
8 and forward technology.

9 (70) "Violent act" means behavior that resulted in homicide,
10 attempted suicide, injury, or substantial loss or damage to property.

11 ~~((69) "Written order of apprehension" means an order of the~~
12 ~~court for a peace officer to deliver the named minor in the order to~~
13 ~~a facility or emergency room as determined by the designated crisis~~
14 ~~responder. Such orders must be entered into the Washington crime~~
15 ~~information center database.))~~

16 **Sec. 29.** 2020 c 302 s 111 (uncodified) is amended to read as
17 follows:

18 (1) Sections 64 and 81 ~~((of this act))~~, chapter 302, Laws of 2020
19 and, until July 1, 2022, section 27 of this act and, beginning July
20 1, 2022, section 28 of this act take effect when the average wait
21 time for children's long-term inpatient placement admission is 30
22 days or less for two consecutive quarters.

23 (2) The health care authority must provide written notice of the
24 effective date of sections 64 and 81 ~~((of this act))~~, chapter 302,
25 Laws of 2020 and sections 27 and 28 of this act to affected parties,
26 the chief clerk of the house of representatives, the secretary of the
27 senate, the office of the code reviser, and others as deemed
28 appropriate by the authority.

29 **Sec. 30.** RCW 71.34.705 and 2020 c 302 s 80 are each amended to
30 read as follows:

31 (1) Whenever a designated crisis responder or professional person
32 is conducting an evaluation under this chapter, the designated crisis
33 responder or professional person must consider all reasonably
34 available information from credible witnesses and records regarding:

35 (a) Historical behavior, including history of one or more violent
36 acts; and

37 (b) Prior commitments under this chapter.

1 (2) Credible witnesses may include family members, landlords,
2 neighbors, teachers, school personnel, or others with significant
3 contact and history of involvement with the minor. If the designated
4 crisis responder relies upon information from a credible witness in
5 reaching his or her decision to detain the minor, then he or she must
6 provide contact information for any such witness to the prosecutor.
7 The designated crisis responder or prosecutor shall provide notice of
8 the date, time, and location of the probable cause hearing to such a
9 witness.

10 (3) Symptoms and behavior of the minor which standing alone would
11 not justify civil commitment may support a finding of grave
12 disability or likelihood of serious harm, when:

13 (a) Such symptoms or behavior are closely associated with
14 symptoms or behavior which preceded and led to a past incident of
15 involuntary hospitalization, severe deterioration, or one or more
16 violent acts;

17 (b) These symptoms or behavior represent a marked and concerning
18 change in the baseline behavior of the minor; and

19 (c) Without treatment, the continued deterioration of the minor
20 is probable.

21 (4) The authority, in consultation with tribes and in
22 coordination with Indian health care providers and the American
23 Indian health commission of Washington state, shall establish written
24 guidelines by June 30, 2022, for conducting culturally appropriate
25 evaluations of American Indians or Alaska Natives.

26 **Sec. 31.** RCW 71.34.710 and 2020 c 302 s 83 are each amended to
27 read as follows:

28 (1)(a) When a designated crisis responder receives information
29 that an adolescent as a result of a behavioral health disorder
30 presents a likelihood of serious harm or is gravely disabled, has
31 investigated the specific facts alleged and of the credibility of the
32 person or persons providing the information, and has determined that
33 voluntary admission for inpatient treatment is not possible, the
34 designated crisis responder may take the adolescent, or cause the
35 adolescent to be taken, into custody and transported to an evaluation
36 and treatment facility, secure withdrawal management and
37 stabilization facility, or approved substance use disorder treatment
38 program providing inpatient treatment.

1 A secure withdrawal management and stabilization facility or
2 approved substance use disorder treatment program must be available
3 and have adequate space for the adolescent.

4 (b) If a designated crisis responder decides not to detain an
5 adolescent for evaluation and treatment under RCW 71.34.700(2), or
6 forty-eight hours have elapsed since a designated crisis responder
7 received a request for investigation and the designated crisis
8 responder has not taken action to have the adolescent detained, an
9 immediate family member or guardian or conservator of the adolescent,
10 or a federally recognized Indian tribe if the person is a member of
11 such tribe, may petition the superior court for the adolescent's
12 detention using the procedures under RCW 71.05.201 and 71.05.203;
13 however, when the court enters an order of initial detention, except
14 as otherwise expressly stated in this chapter, all procedures must be
15 followed as if the order has been entered under (a) of this
16 subsection.

17 (c) The interview performed by the designated crisis responder
18 may be conducted by video provided that a licensed health care
19 professional or professional person who can adequately and accurately
20 assist with obtaining any necessary information is present with the
21 person at the time of the interview.

22 (2)(a) Within twelve hours of the adolescent's arrival at the
23 evaluation and treatment facility, secure withdrawal management and
24 stabilization facility, or approved substance use disorder treatment
25 program, the designated crisis responder shall serve or cause to be
26 served on the adolescent a copy of the petition for initial
27 detention, notice of initial detention, and statement of rights. The
28 designated crisis responder shall file with the court on the next
29 judicial day following the initial detention the original petition
30 for initial detention, notice of initial detention, and statement of
31 rights along with an affidavit of service. The designated crisis
32 responder shall commence service of the petition for initial
33 detention and notice of the initial detention on the adolescent's
34 parent and the adolescent's attorney as soon as possible following
35 the initial detention.

36 ~~((If the adolescent is involuntarily detained at an~~
37 ~~evaluation and treatment facility, secure withdrawal management and~~
38 ~~stabilization facility, or approved substance use disorder treatment~~
39 ~~program in a different county from where the adolescent was initially~~
40 ~~detained, the)) The facility or program may serve the adolescent,~~

1 notify the adolescent's parents and the adolescent's attorney, and
2 file with the court on the next judicial day following the initial
3 detention the original petition for initial detention, notice of
4 initial detention, and statement of rights along with an affidavit of
5 service when filing with the court at the request of the designated
6 crisis responder.

7 (3) (a) At the time of initial detention, the designated crisis
8 responder shall advise the adolescent both orally and in writing that
9 if admitted to the evaluation and treatment facility, secure
10 withdrawal management and stabilization facility, or approved
11 substance use disorder treatment program for inpatient treatment, a
12 commitment hearing shall be held within one hundred twenty hours of
13 the adolescent's provisional acceptance to determine whether probable
14 cause exists to commit the adolescent for further treatment.

15 (b) The adolescent shall be advised that he or she has a right to
16 communicate immediately with an attorney and that he or she has a
17 right to have an attorney appointed to represent him or her before
18 and at the hearing if the adolescent is indigent.

19 (4) Subject to subsection (5) of this section, whenever the
20 designated crisis responder petitions for detention of an adolescent
21 under this chapter, an evaluation and treatment facility, secure
22 withdrawal management and stabilization facility, or approved
23 substance use disorder treatment program providing one hundred twenty
24 hour evaluation and treatment must immediately accept on a
25 provisional basis the petition and the person. Within twenty-four
26 hours of the adolescent's arrival, the facility must evaluate the
27 adolescent's condition and either admit or release the adolescent in
28 accordance with this chapter.

29 (5) A designated crisis responder may not petition for detention
30 of an adolescent to a secure withdrawal management and stabilization
31 facility or approved substance use disorder treatment program unless
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 adolescent.

35 (6) If an adolescent is not approved for admission by the
36 inpatient evaluation and treatment facility, secure withdrawal
37 management and stabilization facility, or approved substance use
38 disorder treatment program, the facility shall make such
39 recommendations and referrals for further care and treatment of the
40 adolescent as necessary.

1 (7) Dismissal of a commitment petition is not the appropriate
2 remedy for a violation of the timeliness requirements of this
3 section, based on the purpose of this chapter under RCW 71.34.010,
4 except in the few cases where the facility staff or the designated
5 crisis responder have totally disregarded the requirements of this
6 section.

7 (8) Tribal court orders for involuntary commitment shall be
8 recognized and enforced in accordance with superior court civil rule
9 82.5.

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

24 **Sec. 32.** RCW 71.34.710 and 2020 c 302 s 84 are each amended to
25 read as follows:

26 (1)(a) When a designated crisis responder receives information
27 that an adolescent as a result of a behavioral health disorder
28 presents a likelihood of serious harm or is gravely disabled, has
29 investigated the specific facts alleged and of the credibility of the
30 person or persons providing the information, and has determined that
31 voluntary admission for inpatient treatment is not possible, the
32 designated crisis responder may take the adolescent, or cause the
33 adolescent to be taken, into custody and transported to an evaluation
34 and treatment facility, secure withdrawal management and
35 stabilization facility, or approved substance use disorder treatment
36 program providing inpatient treatment.

37 (b) If a designated crisis responder decides not to detain an
38 adolescent for evaluation and treatment under RCW 71.34.700(2), or
39 forty-eight hours have elapsed since a designated crisis responder

1 received a request for investigation and the designated crisis
2 responder has not taken action to have the adolescent detained, an
3 immediate family member or guardian or conservator of the adolescent,
4 or a federally recognized Indian tribe if the person is a member of
5 such tribe, may petition the superior court for the adolescent's
6 detention using the procedures under RCW 71.05.201 and 71.05.203;
7 however, when the court enters an order of initial detention, except
8 as otherwise expressly stated in this chapter, all procedures must be
9 followed as if the order has been entered under (a) of this
10 subsection.

11 (c) The interview performed by the designated crisis responder
12 may be conducted by video provided that a licensed health care
13 professional or professional person who can adequately and accurately
14 assist with obtaining any necessary information is present with the
15 person at the time of the interview.

16 (2) (a) Within twelve hours of the adolescent's arrival at the
17 evaluation and treatment facility, secure withdrawal management and
18 stabilization facility, or approved substance use disorder treatment
19 program, the designated crisis responder shall serve or cause to be
20 served on the adolescent a copy of the petition for initial
21 detention, notice of initial detention, and statement of rights. The
22 designated crisis responder shall file with the court on the next
23 judicial day following the initial detention the original petition
24 for initial detention, notice of initial detention, and statement of
25 rights along with an affidavit of service. The designated crisis
26 responder shall commence service of the petition for initial
27 detention and notice of the initial detention on the adolescent's
28 parent and the adolescent's attorney as soon as possible following
29 the initial detention.

30 ~~(b) ((If the adolescent is involuntarily detained at an~~
31 ~~evaluation and treatment facility, secure withdrawal management and~~
32 ~~stabilization facility, or approved substance use disorder treatment~~
33 ~~program in a different county from where the adolescent was initially~~
34 ~~detained, the))~~ The facility or program may serve the adolescent,
35 notify the adolescent's parents and the adolescent's attorney, and
36 file with the court on the next judicial day following the initial
37 detention the original petition for initial detention, notice of
38 initial detention, and statement of rights along with an affidavit of
39 service when filing with the court at the request of the designated
40 crisis responder.

1 (3) (a) At the time of initial detention, the designated crisis
2 responder shall advise the adolescent both orally and in writing that
3 if admitted to the evaluation and treatment facility, secure
4 withdrawal management and stabilization facility, or approved
5 substance use disorder treatment program for inpatient treatment, a
6 commitment hearing shall be held within one hundred twenty hours of
7 the adolescent's provisional acceptance to determine whether probable
8 cause exists to commit the adolescent for further treatment.

9 (b) The adolescent shall be advised that he or she has a right to
10 communicate immediately with an attorney and that he or she has a
11 right to have an attorney appointed to represent him or her before
12 and at the hearing if the adolescent is indigent.

13 (4) Whenever the designated crisis responder petitions for
14 detention of an adolescent under this chapter, an evaluation and
15 treatment facility, secure withdrawal management and stabilization
16 facility, or approved substance use disorder treatment program
17 providing one hundred twenty hour evaluation and treatment must
18 immediately accept on a provisional basis the petition and the
19 person. Within twenty-four hours of the adolescent's arrival, the
20 facility must evaluate the adolescent's condition and either admit or
21 release the adolescent in accordance with this chapter.

22 (5) If an adolescent is not approved for admission by the
23 inpatient evaluation and treatment facility, secure withdrawal
24 management and stabilization facility, or approved substance use
25 disorder treatment program, the facility shall make such
26 recommendations and referrals for further care and treatment of the
27 adolescent as necessary.

28 (6) Dismissal of a commitment petition is not the appropriate
29 remedy for a violation of the timeliness requirements of this
30 section, based on the purpose of this chapter under RCW 71.34.010,
31 except in the few cases where the facility staff or the designated
32 crisis responder have totally disregarded the requirements of this
33 section.

34 (7) Tribal court orders for involuntary commitment shall be
35 recognized and enforced in accordance with superior court civil rule
36 82.5.

37 (8) In any investigation and evaluation of a juvenile under this
38 section in which the designated crisis responder knows, or has reason
39 to know, that the juvenile is an American Indian or Alaska Native who
40 receives medical or behavioral health services from a tribe within

1 this state, the designated crisis responder shall notify the tribe
2 and the Indian health care provider regarding whether or not a
3 petition for initial detention or involuntary outpatient treatment
4 will be filed. Notification shall be made in person or by telephonic
5 or electronic communication to the tribal contact listed in the
6 authority's tribal crisis coordination plan as soon as possible but
7 no later than three hours subject to the requirements in RCW
8 70.02.230 (2) (ee) and (3). A designated crisis responder may restrict
9 the release of information as necessary to comply with 42 C.F.R. Part
10 2.

11 **Sec. 33.** RCW 71.34.720 and 2020 c 302 s 86 are each amended to
12 read as follows:

13 (1) Each minor approved by the facility for inpatient admission
14 shall be examined and evaluated by a children's mental health
15 specialist, for minors admitted as a result of a mental disorder, or
16 by a substance use disorder professional or co-occurring disorder
17 specialist, for minors admitted as a result of a substance use
18 disorder, as to the child's mental condition and by a physician,
19 physician assistant, or psychiatric advanced registered nurse
20 practitioner as to the child's physical condition within twenty-four
21 hours of admission. Reasonable measures shall be taken to ensure
22 medical treatment is provided for any condition requiring immediate
23 medical attention.

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

1 there is a secure withdrawal management and stabilization facility or
2 approved substance use disorder treatment program available and that
3 has adequate space for the minor.

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

6 (4) During the initial one hundred twenty hour treatment period,
7 the minor has a right to associate or receive communications from
8 parents or others unless the professional person in charge determines
9 that such communication would be seriously detrimental to the minor's
10 condition or treatment and so indicates in the minor's clinical
11 record, and notifies the minor's parents of this determination. A
12 minor must not be denied the opportunity to consult an attorney
13 unless there is an immediate risk of harm to the minor or others.

14 (5) If the evaluation and treatment facility, secure withdrawal
15 management and stabilization facility, or approved substance use
16 disorder treatment program admits the minor, it may detain the minor
17 for evaluation and treatment for a period not to exceed one hundred
18 twenty hours from the time of provisional acceptance. The computation
19 of such one hundred twenty hour period shall exclude Saturdays,
20 Sundays, and holidays. This initial treatment period shall not exceed
21 one hundred twenty hours except when an application for voluntary
22 inpatient treatment is received or a petition for fourteen-day
23 commitment is filed.

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

26 **Sec. 34.** RCW 71.34.720 and 2020 c 302 s 87 are each amended to
27 read as follows:

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

1 (2) If, (~~after~~) at any time during the involuntary treatment
2 hold and following the initial examination and evaluation, the
3 children's mental health specialist or substance use disorder
4 specialist and the physician, physician assistant, or psychiatric
5 advanced registered nurse practitioner determine that the initial
6 needs of the minor, if detained to an evaluation and treatment
7 facility, would be better served by placement in a secure withdrawal
8 management and stabilization facility or approved substance use
9 disorder treatment program or, if detained to a secure withdrawal
10 management and stabilization facility or approved substance use
11 disorder treatment program, would be better served in an evaluation
12 and treatment facility, then the minor shall be referred to the more
13 appropriate placement for the remainder of the current commitment
14 period without any need for further court review.

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

17 (4) During the initial one hundred twenty hour treatment period,
18 the minor has a right to associate or receive communications from
19 parents or others unless the professional person in charge determines
20 that such communication would be seriously detrimental to the minor's
21 condition or treatment and so indicates in the minor's clinical
22 record, and notifies the minor's parents of this determination. A
23 minor must not be denied the opportunity to consult an attorney
24 unless there is an immediate risk of harm to the minor or others.

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

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

37 NEW SECTION. **Sec. 35.** Sections 1, 3, 6, 8, 10, 14, 31, and 33
38 of this act expire July 1, 2026.

1 NEW SECTION. **Sec. 36.** Sections 2, 4, 7, 9, 11, 15, 32, and 34
2 of this act take effect July 1, 2026.

3 NEW SECTION. **Sec. 37.** Sections 20 and 25 of this act expire
4 July 1, 2022.

5 NEW SECTION. **Sec. 38.** Sections 21 and 26 of this act take
6 effect July 1, 2022.

7 NEW SECTION. **Sec. 39.** Sections 25, 27, and 31 of this act are
8 necessary for the immediate preservation of the public peace, health,
9 or safety, or support of the state government and its existing public
10 institutions, and take effect immediately.

11 NEW SECTION. **Sec. 40.** If specific funding for the purposes of
12 this act, referencing this act by bill or chapter number, is not
13 provided by June 30, 2021, in the omnibus appropriations act, this
14 act is null and void.

Passed by the Senate April 14, 2021.
Passed by the House April 7, 2021.
Approved by the Governor May 12, 2021.
Filed in Office of Secretary of State May 12, 2021.

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