

SHB 1811 - S COMM AMD

By Committee on Health & Long-Term Care

OUT OF ORDER 04/16/2025

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

3 "NEW SECTION. **Sec. 1.** The goals of co-response are to de-
4 escalate situations, divert people from criminal justice and
5 emergency medical systems, and bring medical and behavioral health
6 care into the field to serve vulnerable populations.

7 Co-responders play a critical role in Washington's emergency
8 response landscape, promoting a crisis care delivery system that
9 appropriately responds to behavioral health emergencies and adapts to
10 complex needs at the nexus of health and behavioral health. As
11 Washington's crisis care delivery system continues to evolve, co-
12 responders should be integrated into new and existing programs and
13 legal frameworks in a way that consistently reflects their
14 contributions to the health and well-being of the people of
15 Washington and provides the necessary support for them to continue
16 their critical work.

17 **Sec. 2.** RCW 71.24.025 and 2024 c 368 s 2, 2024 c 367 s 1, and
18 2024 c 121 s 25 are each reenacted and amended to read as follows:

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

21 (1) "23-hour crisis relief center" means a community-based
22 facility or portion of a facility which is licensed or certified by
23 the department of health and open 24 hours a day, seven days a week,
24 offering access to mental health and substance use care for no more
25 than 23 hours and 59 minutes at a time per patient, and which accepts
26 all behavioral health crisis walk-ins drop-offs from first
27 responders, and individuals referred through the 988 system
28 regardless of behavioral health acuity, and meets the requirements
29 under RCW 71.24.916.

30 (2) "988 crisis hotline" means the universal telephone number
31 within the United States designated for the purpose of the national

1 suicide prevention and mental health crisis hotline system operating
2 through the national suicide prevention lifeline.

3 (3) "Acutely mentally ill" means a condition which is limited to
4 a short-term severe crisis episode of:

5 (a) A mental disorder as defined in RCW 71.05.020 or, in the case
6 of a child, as defined in RCW 71.34.020;

7 (b) Being gravely disabled as defined in RCW 71.05.020 or, in the
8 case of a child, a gravely disabled minor as defined in RCW
9 71.34.020; or

10 (c) Presenting a likelihood of serious harm as defined in RCW
11 71.05.020 or, in the case of a child, as defined in RCW 71.34.020.

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

18 (5) "Approved substance use disorder treatment program" means a
19 program for persons with a substance use disorder provided by a
20 treatment program licensed or certified by the department as meeting
21 standards adopted under this chapter.

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

23 (7) "Available resources" means funds appropriated for the
24 purpose of providing community behavioral health programs, federal
25 funds, except those provided according to Title XIX of the Social
26 Security Act, and state funds appropriated under this chapter or
27 chapter 71.05 RCW by the legislature during any biennium for the
28 purpose of providing residential services, resource management
29 services, community support services, and other behavioral health
30 services. This does not include funds appropriated for the purpose of
31 operating and administering the state psychiatric hospitals.

32 (8) "Behavioral health administrative services organization"
33 means an entity contracted with the authority to administer
34 behavioral health services and programs under RCW 71.24.381,
35 including crisis services and administration of chapter 71.05 RCW,
36 the involuntary treatment act, for all individuals in a defined
37 regional service area.

38 (9) "Behavioral health aide" means a counselor, health educator,
39 and advocate who helps address individual and community-based
40 behavioral health needs, including those related to alcohol, drug,

1 and tobacco abuse as well as mental health problems such as grief,
2 depression, suicide, and related issues and is certified by a
3 community health aide program of the Indian health service or one or
4 more tribes or tribal organizations consistent with the provisions of
5 25 U.S.C. Sec. 16161 and RCW 43.71B.010 (7) and (8).

6 (10) "Behavioral health provider" means a person licensed under
7 chapter 18.57, 18.71, 18.71A, 18.83, 18.205, 18.225, or 18.79 RCW, as
8 it applies to registered nurses and advanced practice registered
9 (~~nurse practitioners~~) nurses.

10 (11) "Behavioral health services" means mental health services,
11 substance use disorder treatment services, and co-occurring disorder
12 treatment services as described in this chapter and chapter 71.36 RCW
13 that, depending on the type of service, are provided by licensed or
14 certified behavioral health agencies, behavioral health providers, or
15 integrated into other health care providers.

16 (12) "Child" means a person under the age of 18 years.

17 (13) "Chronically mentally ill adult" or "adult who is
18 chronically mentally ill" means an adult who has a mental disorder
19 and meets at least one of the following criteria:

20 (a) Has undergone two or more episodes of hospital care for a
21 mental disorder within the preceding two years; or

22 (b) Has experienced a continuous behavioral health
23 hospitalization or residential treatment exceeding six months'
24 duration within the preceding year; or

25 (c) Has been unable to engage in any substantial gainful activity
26 by reason of any mental disorder which has lasted for a continuous
27 period of not less than 12 months. "Substantial gainful activity"
28 shall be defined by the authority by rule consistent with Public Law
29 92-603, as amended.

30 (14) "Clubhouse" means a community-based program that provides
31 rehabilitation services and is licensed or certified by the
32 department.

33 (15) "Co-response" means a multidisciplinary partnership between
34 first responders and human services professionals that responds to
35 emergency situations involving behavioral health crises and people
36 experiencing complex medical needs. Participants in co-response
37 respond to in-progress 911 calls, 988 calls, and requests for service
38 from dispatch and other first responders and include first responders
39 such as public safety telecommunicators, law enforcement officers,
40 firefighters, emergency medical technicians, and paramedics, and

1 human services professionals such as social workers, behavioral
2 health clinicians, advanced practice registered nurses, registered
3 nurses, community health workers, and peer support specialists. A co-
4 response team dispatched by a designated 988 contact hub, which
5 includes a mobile rapid response crisis team or a community-based
6 crisis team, may not include law enforcement.

7 (16) "Community behavioral health program" means all
8 expenditures, services, activities, or programs, including reasonable
9 administration and overhead, designed and conducted to prevent or
10 treat substance use disorder, mental illness, or both in the
11 community behavioral health system.

12 ~~((16))~~ (17) "Community behavioral health service delivery
13 system" means public, private, or tribal agencies that provide
14 services specifically to persons with mental disorders, substance use
15 disorders, or both, as defined under RCW 71.05.020 and receive
16 funding from public sources.

17 ~~((17))~~ (18) "Community support services" means services
18 authorized, planned, and coordinated through resource management
19 services including, at a minimum, assessment, diagnosis, emergency
20 crisis intervention available 24 hours, seven days a week,
21 prescreening determinations for persons who are mentally ill being
22 considered for placement in nursing homes as required by federal law,
23 screening for patients being considered for admission to residential
24 services, diagnosis and treatment for children who are acutely
25 mentally ill or severely emotionally or behaviorally disturbed
26 discovered under screening through the federal Title XIX early and
27 periodic screening, diagnosis, and treatment program, investigation,
28 legal, and other nonresidential services under chapter 71.05 RCW,
29 case management services, psychiatric treatment including medication
30 supervision, counseling, psychotherapy, assuring transfer of relevant
31 patient information between service providers, recovery services, and
32 other services determined by behavioral health administrative
33 services organizations.

34 ~~((18))~~ (19) "Community-based crisis team" means a team that is
35 part of an emergency medical services agency, a fire service agency,
36 a public health agency, a medical facility, a nonprofit crisis
37 response provider, or a city or county government entity, other than
38 a law enforcement agency, that provides the on-site community-based
39 interventions of a mobile rapid response crisis team for individuals
40 who are experiencing a behavioral health crisis.

1 ~~((19))~~ (20) "Consensus-based" means a program or practice that
2 has general support among treatment providers and experts, based on
3 experience or professional literature, and may have anecdotal or case
4 study support, or that is agreed but not possible to perform studies
5 with random assignment and controlled groups.

6 ~~((20))~~ (21) "Coordinated regional behavioral health crisis
7 response system" means the coordinated operation of 988 call centers,
8 regional crisis lines, certified public safety telecommunicators, and
9 other behavioral health crisis system partners within each regional
10 service area.

11 ~~((21))~~ (22) "County authority" means the board of county
12 commissioners, county council, or county executive having authority
13 to establish a behavioral health administrative services
14 organization, or two or more of the county authorities specified in
15 this subsection which have entered into an agreement to establish a
16 behavioral health administrative services organization.

17 ~~((22))~~ (23) "Crisis stabilization services" means services such
18 as 23-hour crisis relief centers, crisis stabilization units, short-
19 term respite facilities, peer-run respite services, and same-day
20 walk-in behavioral health services, including within the overall
21 crisis system components that operate like hospital emergency
22 departments that accept all walk-ins, and ambulance, fire, and police
23 drop-offs, or determine the need for involuntary hospitalization of
24 an individual.

25 ~~((23))~~ (24) "Crisis stabilization unit" has the same meaning as
26 under RCW 71.05.020.

27 ~~((24))~~ (25) "Department" means the department of health.

28 ~~((25))~~ (26) "Designated 988 contact hub" or "988 contact hub"
29 means a state-designated contact center that streamlines clinical
30 interventions and access to resources for people experiencing a
31 behavioral health crisis and participates in the national suicide
32 prevention lifeline network to respond to statewide or regional 988
33 contacts that meets the requirements of RCW 71.24.890.

34 ~~((26))~~ (27) "Designated crisis responder" has the same meaning
35 as in RCW 71.05.020.

36 ~~((27))~~ (28) "Director" means the director of the authority.

37 ~~((28))~~ (29) "Drug addiction" means a disease characterized by a
38 dependency on psychoactive chemicals, loss of control over the amount
39 and circumstances of use, symptoms of tolerance, physiological or
40 psychological withdrawal, or both, if use is reduced or discontinued,

1 and impairment of health or disruption of social or economic
2 functioning.

3 ~~((29))~~ (30) "Early adopter" means a regional service area for
4 which all of the county authorities have requested that the authority
5 purchase medical and behavioral health services through a managed
6 care health system as defined under RCW 71.24.380(7).

7 ~~((30))~~ (31) "Emerging best practice" or "promising practice"
8 means a program or practice that, based on statistical analyses or a
9 well established theory of change, shows potential for meeting the
10 evidence-based or research-based criteria, which may include the use
11 of a program that is evidence-based for outcomes other than those
12 listed in subsection ~~((31))~~ (32) of this section.

13 ~~((31))~~ (32) "Evidence-based" means a program or practice that
14 has been tested in heterogeneous or intended populations with
15 multiple randomized, or statistically controlled evaluations, or
16 both; or one large multiple site randomized, or statistically
17 controlled evaluation, or both, where the weight of the evidence from
18 a systemic review demonstrates sustained improvements in at least one
19 outcome. "Evidence-based" also means a program or practice that can
20 be implemented with a set of procedures to allow successful
21 replication in Washington and, when possible, is determined to be
22 cost-beneficial.

23 ~~((32))~~ (33) "First responders" includes ambulance, fire, mobile
24 rapid response crisis team, co_responder team, designated crisis
25 responder, fire department mobile integrated health team, community
26 assistance referral and education services program under RCW
27 35.21.930, and law enforcement personnel.

28 ~~((33))~~ (34) "Immediate jeopardy" means a situation in which the
29 licensed or certified behavioral health agency's noncompliance with
30 one or more statutory or regulatory requirements has placed the
31 health and safety of patients in its care at risk for serious injury,
32 serious harm, serious impairment, or death.

33 ~~((34))~~ (35) "Indian health care provider" means a health care
34 program operated by the Indian health service or by a tribe, tribal
35 organization, or urban Indian organization as those terms are defined
36 in the Indian health care improvement act (25 U.S.C. Sec. 1603).

37 ~~((35))~~ (36) "Intensive behavioral health treatment facility"
38 means a community-based specialized residential treatment facility
39 for individuals with behavioral health conditions, including
40 individuals discharging from or being diverted from state and local

1 hospitals, whose impairment or behaviors do not meet, or no longer
2 meet, criteria for involuntary inpatient commitment under chapter
3 71.05 RCW, but whose care needs cannot be met in other community-
4 based placement settings.

5 ~~((36))~~ (37) "Licensed or certified behavioral health agency"
6 means:

7 (a) An entity licensed or certified according to this chapter or
8 chapter 71.05 RCW;

9 (b) An entity deemed to meet state minimum standards as a result
10 of accreditation by a recognized behavioral health accrediting body
11 recognized and having a current agreement with the department; or

12 (c) An entity with a tribal attestation that it meets state
13 minimum standards for a licensed or certified behavioral health
14 agency.

15 ~~((37))~~ (38) "Licensed physician" means a person licensed to
16 practice medicine or osteopathic medicine and surgery in the state of
17 Washington.

18 ~~((38))~~ (39) "Long-term inpatient care" means inpatient services
19 for persons committed for, or voluntarily receiving intensive
20 treatment for, periods of 90 days or greater under chapter 71.05 RCW.
21 "Long-term inpatient care" as used in this chapter does not include:

22 (a) Services for individuals committed under chapter 71.05 RCW who
23 are receiving services pursuant to a conditional release or a court-
24 ordered less restrictive alternative to detention; or (b) services
25 for individuals voluntarily receiving less restrictive alternative
26 treatment on the grounds of the state hospital.

27 ~~((39))~~ (40) "Managed care organization" means an organization,
28 having a certificate of authority or certificate of registration from
29 the office of the insurance commissioner, that contracts with the
30 authority under a comprehensive risk contract to provide prepaid
31 health care services to enrollees under the authority's managed care
32 programs under chapter 74.09 RCW.

33 ~~((40))~~ (41) "Mental health peer-run respite center" means a
34 peer-run program to serve individuals in need of voluntary, short-
35 term, noncrisis services that focus on recovery and wellness.

36 ~~((41))~~ (42) Mental health "treatment records" include
37 registration and all other records concerning persons who are
38 receiving or who at any time have received services for mental
39 illness, which are maintained by the department of social and health
40 services or the authority, by behavioral health administrative

1 services organizations and their staffs, by managed care
2 organizations and their staffs, or by treatment facilities.
3 "Treatment records" do not include notes or records maintained for
4 personal use by a person providing treatment services for the
5 entities listed in this subsection, or a treatment facility if the
6 notes or records are not available to others.

7 ~~((42))~~ (43) "Mentally ill persons," "persons who are mentally
8 ill," and "the mentally ill" mean persons and conditions defined in
9 subsections (3), (13), ~~((51))~~ (52), and ~~((52))~~ (53) of this
10 section.

11 ~~((43))~~ (44) "Mobile rapid response crisis team" means a team
12 that provides professional on-site community-based intervention such
13 as outreach, de-escalation, stabilization, resource connection, and
14 follow-up support for individuals who are experiencing a behavioral
15 health crisis, that shall include certified peer counselors as a best
16 practice to the extent practicable based on workforce availability,
17 and that meets standards for response times established by the
18 authority.

19 ~~((44))~~ (45) "Recovery" means a process of change through which
20 individuals improve their health and wellness, live a self-directed
21 life, and strive to reach their full potential.

22 ~~((45))~~ (46) "Regional crisis line" means the behavioral health
23 crisis hotline in each regional service area which provides crisis
24 response services 24 hours a day, seven days a week, 365 days a year
25 including but not limited to dispatch of mobile rapid response crisis
26 teams, community-based crisis teams, and designated crisis
27 responders.

28 ~~((46))~~ (47) "Research-based" means a program or practice that
29 has been tested with a single randomized, or statistically controlled
30 evaluation, or both, demonstrating sustained desirable outcomes; or
31 where the weight of the evidence from a systemic review supports
32 sustained outcomes as described in subsection ~~((31))~~ (32) of this
33 section but does not meet the full criteria for evidence-based.

34 ~~((47))~~ (48) "Residential services" means a complete range of
35 residences and supports authorized by resource management services
36 and which may involve a facility, a distinct part thereof, or
37 services which support community living, for persons who are acutely
38 mentally ill, adults who are chronically mentally ill, children who
39 are severely emotionally disturbed, or adults who are seriously
40 disturbed and determined by the behavioral health administrative

1 services organization or managed care organization to be at risk of
2 becoming acutely or chronically mentally ill. The services shall
3 include at least evaluation and treatment services as defined in
4 chapter 71.05 RCW, acute crisis respite care, long-term adaptive and
5 rehabilitative care, and supervised and supported living services,
6 and shall also include any residential services developed to service
7 persons who are mentally ill in nursing homes, residential treatment
8 facilities, assisted living facilities, and adult family homes, and
9 may include outpatient services provided as an element in a package
10 of services in a supported housing model. Residential services for
11 children in out-of-home placements related to their mental disorder
12 shall not include the costs of food and shelter, except for
13 children's long-term residential facilities existing prior to January
14 1, 1991.

15 ~~((48))~~ (49) "Resilience" means the personal and community
16 qualities that enable individuals to rebound from adversity, trauma,
17 tragedy, threats, or other stresses, and to live productive lives.

18 ~~((49))~~ (50) "Resource management services" mean the planning,
19 coordination, and authorization of residential services and community
20 support services administered pursuant to an individual service plan
21 for: (a) Adults and children who are acutely mentally ill; (b) adults
22 who are chronically mentally ill; (c) children who are severely
23 emotionally disturbed; or (d) adults who are seriously disturbed and
24 determined by a behavioral health administrative services
25 organization or managed care organization to be at risk of becoming
26 acutely or chronically mentally ill. Such planning, coordination, and
27 authorization shall include mental health screening for children
28 eligible under the federal Title XIX early and periodic screening,
29 diagnosis, and treatment program. Resource management services
30 include seven day a week, 24 hour a day availability of information
31 regarding enrollment of adults and children who are mentally ill in
32 services and their individual service plan to designated crisis
33 responders, evaluation and treatment facilities, and others as
34 determined by the behavioral health administrative services
35 organization or managed care organization, as applicable.

36 ~~((50))~~ (51) "Secretary" means the secretary of the department
37 of health.

38 ~~((51))~~ (52) "Seriously disturbed person" means a person who:

1 (a) Is gravely disabled or presents a likelihood of serious harm
2 to himself or herself or others, or to the property of others, as a
3 result of a mental disorder as defined in chapter 71.05 RCW;

4 (b) Has been on conditional release status, or under a less
5 restrictive alternative order, at some time during the preceding two
6 years from an evaluation and treatment facility or a state mental
7 health hospital;

8 (c) Has a mental disorder which causes major impairment in
9 several areas of daily living;

10 (d) Exhibits suicidal preoccupation or attempts; or

11 (e) Is a child diagnosed by a mental health professional, as
12 defined in chapter 71.34 RCW, as experiencing a mental disorder which
13 is clearly interfering with the child's functioning in family or
14 school or with peers or is clearly interfering with the child's
15 personality development and learning.

16 (~~(+52+)~~) (53) "Severely emotionally disturbed child" or "child
17 who is severely emotionally disturbed" means a child who has been
18 determined by the behavioral health administrative services
19 organization or managed care organization, if applicable, to be
20 experiencing a mental disorder as defined in chapter 71.34 RCW,
21 including those mental disorders that result in a behavioral or
22 conduct disorder, that is clearly interfering with the child's
23 functioning in family or school or with peers and who meets at least
24 one of the following criteria:

25 (a) Has undergone inpatient treatment or placement outside of the
26 home related to a mental disorder within the last two years;

27 (b) Has undergone involuntary treatment under chapter 71.34 RCW
28 within the last two years;

29 (c) Is currently served by at least one of the following child-
30 serving systems: Juvenile justice, child-protection/welfare, special
31 education, or developmental disabilities;

32 (d) Is at risk of escalating maladjustment due to:

33 (i) Chronic family dysfunction involving a caretaker who is
34 mentally ill or inadequate;

35 (ii) Changes in custodial adult;

36 (iii) Going to, residing in, or returning from any placement
37 outside of the home, for example, behavioral health hospital, short-
38 term inpatient, residential treatment, group or foster home, or a
39 correctional facility;

40 (iv) Subject to repeated physical abuse or neglect;

1 (v) Drug or alcohol abuse; or

2 (vi) Homelessness.

3 (~~(53)~~) (54) "State minimum standards" means minimum
4 requirements established by rules adopted and necessary to implement
5 this chapter by:

6 (a) The authority for:

7 (i) Delivery of mental health and substance use disorder
8 services; and

9 (ii) Community support services and resource management services;

10 (b) The department of health for:

11 (i) Licensed or certified behavioral health agencies for the
12 purpose of providing mental health or substance use disorder programs
13 and services, or both;

14 (ii) Licensed behavioral health providers for the provision of
15 mental health or substance use disorder services, or both; and

16 (iii) Residential services.

17 (~~(54)~~) (55) "Substance use disorder" means a cluster of
18 cognitive, behavioral, and physiological symptoms indicating that an
19 individual continues using the substance despite significant
20 substance-related problems. The diagnosis of a substance use disorder
21 is based on a pathological pattern of behaviors related to the use of
22 the substances.

23 (~~(55)~~) (56) "Tribe," for the purposes of this section, means a
24 federally recognized Indian tribe.

25 **Sec. 3.** RCW 5.60.060 and 2024 c 295 s 6 are each amended to read
26 as follows:

27 (1) A spouse or domestic partner shall not be examined for or
28 against his or her spouse or domestic partner, without the consent of
29 the spouse or domestic partner; nor can either during marriage or
30 during the domestic partnership or afterward, be without the consent
31 of the other, examined as to any communication made by one to the
32 other during the marriage or the domestic partnership. But this
33 exception shall not apply to a civil action or proceeding by one
34 against the other, nor to a criminal action or proceeding for a crime
35 committed by one against the other, nor to a criminal action or
36 proceeding against a spouse or domestic partner if the marriage or
37 the domestic partnership occurred subsequent to the filing of formal
38 charges against the defendant, nor to a criminal action or proceeding
39 for a crime committed by said spouse or domestic partner against any

1 child of whom said spouse or domestic partner is the parent or
2 guardian, nor to a proceeding under chapter 71.05 or 71.09 RCW:
3 PROVIDED, That the spouse or the domestic partner of a person sought
4 to be detained under chapter 71.05 or 71.09 RCW may not be compelled
5 to testify and shall be so informed by the court prior to being
6 called as a witness.

7 (2) (a) An attorney or counselor shall not, without the consent of
8 his or her client, be examined as to any communication made by the
9 client to him or her, or his or her advice given thereon in the
10 course of professional employment.

11 (b) A parent or guardian of a minor child arrested on a criminal
12 charge may not be examined as to a communication between the child
13 and his or her attorney if the communication was made in the presence
14 of the parent or guardian. This privilege does not extend to
15 communications made prior to the arrest.

16 (3) A member of the clergy, a Christian Science practitioner
17 listed in the Christian Science Journal, or a priest shall not,
18 without the consent of a person making the confession or sacred
19 confidence, be examined as to any confession or sacred confidence
20 made to him or her in his or her professional character, in the
21 course of discipline enjoined by the church to which he or she
22 belongs.

23 (4) Subject to the limitations under RCW 71.05.217 (6) and (7), a
24 physician or surgeon or osteopathic physician or surgeon or podiatric
25 physician or surgeon shall not, without the consent of his or her
26 patient, be examined in a civil action as to any information acquired
27 in attending such patient, which was necessary to enable him or her
28 to prescribe or act for the patient, except as follows:

29 (a) In any judicial proceedings regarding a child's injury,
30 neglect, or sexual abuse or the cause thereof; and

31 (b) Ninety days after filing an action for personal injuries or
32 wrongful death, the claimant shall be deemed to waive the physician-
33 patient privilege. Waiver of the physician-patient privilege for any
34 one physician or condition constitutes a waiver of the privilege as
35 to all physicians or conditions, subject to such limitations as a
36 court may impose pursuant to court rules.

37 (5) A public officer shall not be examined as a witness as to
38 communications made to him or her in official confidence, when the
39 public interest would suffer by the disclosure.

1 (6) (a) A peer supporter shall not, without consent of the peer
2 support services recipient making the communication, be compelled to
3 testify about any communication made to the peer supporter by the
4 peer support services recipient while receiving individual or group
5 services. The peer supporter must be designated as such by their
6 employing agency prior to providing peer support services. The
7 privilege only applies when the communication was made to the peer
8 supporter while acting in his or her capacity as a peer supporter.
9 The privilege applies regardless of whether the peer support services
10 recipient is an employee of the same agency as the peer supporter.
11 Peer support services may be coordinated or designated among first
12 responder agencies pursuant to chapter 10.93 RCW, interlocal
13 agreement, or other similar provision, provided however that a
14 written agreement is not required for the privilege to apply. The
15 privilege does not apply if the peer supporter was an initial
16 responding first responder, department of corrections staff person,
17 or jail staff person; a witness; or a party to the incident which
18 prompted the delivery of peer support services to the peer support
19 services recipient.

20 (b) For purposes of this section:

21 (i) "First responder" means:

22 (A) A law enforcement officer;

23 (B) A limited authority law enforcement officer;

24 (C) A firefighter;

25 (D) An emergency services dispatcher or recordkeeper;

26 (E) Emergency medical personnel, as licensed or certified by this
27 state;

28 (F) A member or former member of the Washington national guard
29 acting in an emergency response capacity pursuant to chapter 38.52
30 RCW; (~~or~~)

31 (G) A coroner or medical examiner, or a coroner's or medical
32 examiner's agent or employee; or

33 (H) An individual engaged in co-response services, as defined in
34 RCW 71.24.025.

35 (ii) "Law enforcement officer" means a general authority
36 Washington peace officer as defined in RCW 10.93.020.

37 (iii) "Limited authority law enforcement officer" means a limited
38 authority Washington peace officer as defined in RCW 10.93.020 who is
39 employed by the department of corrections, state parks and recreation

1 commission, department of natural resources, liquor and cannabis
2 board, or Washington state gambling commission.

3 (iv) "Peer support services recipient" means:

4 (A) A first responder;

5 (B) A department of corrections staff person; or

6 (C) A jail staff person.

7 (v) "Peer supporter" means:

8 (A) A first responder, retired first responder, department of
9 corrections staff person, or jail staff person or a civilian employee
10 of a first responder entity or agency, local jail, or state agency
11 who has received training to provide emotional and moral support and
12 services to a peer support services recipient who needs those
13 services as a result of an incident or incidents in which the peer
14 support services recipient was involved while acting in his or her
15 official capacity or to deal with other stress that is impacting the
16 peer support services recipient's performance of official duties; or

17 (B) A nonemployee who has been designated by the first responder
18 entity or agency, local jail, statewide organization focused on co-
19 response outreach, or state agency to provide emotional and moral
20 support and counseling to a peer support services recipient who needs
21 those services as a result of an incident or incidents in which the
22 peer support services recipient was involved while acting in his or
23 her official capacity.

24 (7) A sexual assault advocate may not, without the consent of the
25 victim, be examined as to any communication made between the victim
26 and the sexual assault advocate.

27 (a) For purposes of this section, "sexual assault advocate" means
28 the employee or volunteer from a community sexual assault program or
29 underserved populations provider, victim assistance unit, program, or
30 association, that provides information, medical or legal advocacy,
31 counseling, or support to victims of sexual assault, who is
32 designated by the victim to accompany the victim to the hospital or
33 other health care facility and to proceedings concerning the alleged
34 assault, including police and prosecution interviews and court
35 proceedings.

36 (b) A sexual assault advocate may disclose a confidential
37 communication without the consent of the victim if failure to
38 disclose is likely to result in a clear, imminent risk of serious
39 physical injury or death of the victim or another person. Any sexual
40 assault advocate participating in good faith in the disclosing of

1 records and communications under this section shall have immunity
2 from any liability, civil, criminal, or otherwise, that might result
3 from the action. In any proceeding, civil or criminal, arising out of
4 a disclosure under this section, the good faith of the sexual assault
5 advocate who disclosed the confidential communication shall be
6 presumed.

7 (8) A domestic violence advocate may not, without the consent of
8 the victim, be examined as to any communication between the victim
9 and the domestic violence advocate.

10 (a) For purposes of this section, "domestic violence advocate"
11 means an employee or supervised volunteer from a community-based
12 domestic violence program or human services program that provides
13 information, advocacy, counseling, crisis intervention, emergency
14 shelter, or support to victims of domestic violence and who is not
15 employed by, or under the direct supervision of, a law enforcement
16 agency, a prosecutor's office, or the child protective services
17 section of the department of children, youth, and families as defined
18 in RCW 26.44.020.

19 (b) A domestic violence advocate may disclose a confidential
20 communication without the consent of the victim if failure to
21 disclose is likely to result in a clear, imminent risk of serious
22 physical injury or death of the victim or another person. This
23 section does not relieve a domestic violence advocate from the
24 requirement to report or cause to be reported an incident under RCW
25 26.44.030(1) or to disclose relevant records relating to a child as
26 required by RCW 26.44.030(15). Any domestic violence advocate
27 participating in good faith in the disclosing of communications under
28 this subsection is immune from liability, civil, criminal, or
29 otherwise, that might result from the action. In any proceeding,
30 civil or criminal, arising out of a disclosure under this subsection,
31 the good faith of the domestic violence advocate who disclosed the
32 confidential communication shall be presumed.

33 (9) A mental health counselor, independent clinical social
34 worker, or marriage and family therapist licensed under chapter
35 18.225 RCW may not disclose, or be compelled to testify about, any
36 information acquired from persons consulting the individual in a
37 professional capacity when the information was necessary to enable
38 the individual to render professional services to those persons
39 except:

1 (a) With the written authorization of that person or, in the case
2 of death or disability, the person's personal representative;

3 (b) If the person waives the privilege by bringing charges
4 against the mental health counselor licensed under chapter 18.225
5 RCW;

6 (c) In response to a subpoena from the secretary of health. The
7 secretary may subpoena only records related to a complaint or report
8 under RCW 18.130.050;

9 (d) As required under chapter 26.44 or 74.34 RCW or RCW 71.05.217
10 (6) or (7); or

11 (e) To any individual if the mental health counselor, independent
12 clinical social worker, or marriage and family therapist licensed
13 under chapter 18.225 RCW reasonably believes that disclosure will
14 avoid or minimize an imminent danger to the health or safety of the
15 individual or any other individual; however, there is no obligation
16 on the part of the provider to so disclose.

17 (10) An individual who acts as a sponsor providing guidance,
18 emotional support, and counseling in an individualized manner to a
19 person participating in an alcohol or drug addiction recovery
20 fellowship may not testify in any civil action or proceeding about
21 any communication made by the person participating in the addiction
22 recovery fellowship to the individual who acts as a sponsor except
23 with the written authorization of that person or, in the case of
24 death or disability, the person's personal representative.

25 (11)(a) Neither a union representative nor an employee the union
26 represents or has represented shall be examined as to, or be required
27 to disclose, any communication between an employee and union
28 representative or between union representatives made in the course of
29 union representation except:

30 (i) To the extent such examination or disclosure appears
31 necessary to prevent the commission of a crime that is likely to
32 result in a clear, imminent risk of serious physical injury or death
33 of a person;

34 (ii) In actions, civil or criminal, in which the represented
35 employee is accused of a crime or assault or battery;

36 (iii) In actions, civil or criminal, where a union member is a
37 party to the action, the union member may obtain a copy of any
38 statement previously given by that union member concerning the
39 subject matter of the action and may elicit testimony concerning such
40 statements. The right of the union member to obtain such statements,

1 or the union member's possession of such statements, does not render
2 them discoverable over the objection of the union member;

3 (iv) In actions, regulatory, civil, or criminal, against the
4 union or its affiliated, subordinate, or parent bodies or their
5 agents; or

6 (v) When an admission of, or intent to engage in, criminal
7 conduct is revealed by the represented union member to the union
8 representative.

9 (b) The privilege created in this subsection (11) does not apply
10 to any record of communications that would otherwise be subject to
11 disclosure under chapter 42.56 RCW.

12 (c) The privilege created in this subsection (11) may not
13 interfere with an employee's or union representative's applicable
14 statutory mandatory reporting requirements, including but not limited
15 to duties to report in chapters 26.44, 43.101, and 74.34 RCW.

16 (d) For purposes of this subsection:

17 (i) "Employee" means a person represented by a certified or
18 recognized union regardless of whether the employee is a member of
19 the union.

20 (ii) "Union" means any lawful organization that has as one of its
21 primary purposes the representation of employees in their employment
22 relations with employers, including without limitation labor
23 organizations defined by 29 U.S.C. Sec. 152(5) and 5 U.S.C. Sec.
24 7103(a)(4), representatives defined by 45 U.S.C. Sec. 151, and
25 bargaining representatives defined in RCW 41.56.030, and employee
26 organizations as defined in RCW 28B.52.020, 41.59.020, 41.80.005,
27 41.76.005, 47.64.011, and 53.18.010.

28 (iii) "Union representation" means action by a union on behalf of
29 one or more employees it represents in regard to their employment
30 relations with employers, including personnel matters, grievances,
31 labor disputes, wages, rates of pay, hours of employment, conditions
32 of work, or collective bargaining.

33 (iv) "Union representative" means a person authorized by a union
34 to act for the union in regard to union representation.

35 (v) "Communication" includes any oral, written, or electronic
36 communication or document containing such communication.

37 **Sec. 4.** RCW 51.32.181 and 2022 c 290 s 1 are each amended to
38 read as follows:

1 (1) For frontline employees who are covered under this title,
2 there exists a prima facie presumption that any infectious or
3 contagious diseases that are transmitted through respiratory droplets
4 or aerosols, or through contact with contaminated surfaces and are
5 the subject of a public health emergency are occupational diseases
6 under RCW 51.08.140 during a public health emergency.

7 (2) The frontline employee must provide verification, as required
8 by the department by rule, to the department and the self-insured
9 employer that the employee has contracted the infectious or
10 contagious disease that is the subject of the public health
11 emergency.

12 (3) This presumption of occupational disease may be rebutted by a
13 preponderance of the evidence that:

14 (a) The exposure to the infectious or contagious disease which is
15 the subject of the public health emergency occurred from other
16 employment or nonemployment activities; or

17 (b) The employee was working from the employee's home, on leave
18 from the employee's employment, or some combination thereof, for the
19 period of quarantine consistent with recommended guidance from state
20 and federal health officials for the disease immediately prior to the
21 employee's injury, occupational disease, or period of incapacity that
22 resulted from exposure to the disease which is the subject of the
23 public health emergency.

24 (4) (a) RCW 51.32.090(7) does not apply to an occupational disease
25 under this section except that no worker shall receive compensation
26 for or during the day on which the occupational disease was
27 contracted. For the purposes of this subsection (4), the day on which
28 the occupational disease was contracted is whichever date occurs
29 first of the following:

30 (i) The date that the worker first missed work due to symptoms of
31 the infectious or contagious disease;

32 (ii) The date the worker was quarantined by a medical provider or
33 public health official; or

34 (iii) The date the worker received a positive test result
35 confirming contraction of the infectious or contagious disease.

36 (b) If leave or similar benefits are paid to the frontline
37 employee as part of a federal or state program for these employees
38 during the public health emergency, temporary total disability
39 benefits are not payable for the same period of time covered by the
40 federal or state program.

1 (5) When calculating assessments due to the department for which
2 total claim costs are the basis, self-insured employers and self-
3 insurance hospital groups formed under RCW 51.14.150 and 51.14.160
4 may deduct the cost of payments made under this section from the
5 total of all claim costs reported.

6 (6) Costs of the payments under this section shall not affect the
7 experience rating of employers insured by the state fund.

8 (7) As used in this section:

9 (a) "Assisted living facility" has the same meaning as in RCW
10 18.20.020.

11 (b) "Farm work" means work performed on a farm, in the employ of
12 any person, in connection with the cultivation of the soil, or in
13 connection with raising or harvesting any agricultural or
14 horticultural commodity, including raising, shearing, feeding, caring
15 for, training, and management of livestock, bees, poultry, and
16 furbearing animals and wildlife, or in the employ of the owner or
17 tenant or other operator of a farm in connection with the operation,
18 management, conservation, improvement, or maintenance of such farm
19 and its tools and equipment. For the purposes of this subsection,
20 "farm work" includes floriculture.

21 (c) "Food distribution work" means work where the primary duties
22 include transporting food from food producers or manufacturers to
23 food warehouses or food service operators and retailers.

24 (d) "Food manufacturing work" means work performed for an
25 employer whose North American industry classification code is within
26 "311."

27 (e) "Food processing work" means work handling or processing of
28 any food in any manner of preparation for sale for an employer
29 required to be licensed by the department of agriculture under
30 chapter 69.07 RCW.

31 (f) "Frontline employee" includes the following employees:

32 (i) First responders, including law enforcement officers,
33 firefighters, emergency medical service providers, paramedics,
34 ~~((and)) ambulance drivers, and other members of first response teams~~
35 engaged in co-response, as defined in RCW 71.24.025. "Firefighters"
36 includes wildland firefighters when performing wildfire suppression
37 or other emergency duties under the incident command system if the
38 firefighter has in-person interaction with the general public or
39 other firefighters as part of their job duties;

1 (ii) Employees performing food processing, food manufacturing,
2 food distribution, farm, and meat packing work;

3 (iii) Maintenance, janitorial, and food service workers at any
4 facility treating patients diagnosed with the infectious or
5 contagious disease that is the subject of the public health
6 emergency;

7 (iv) Drivers and operators employed by a transit agency or any
8 other public entity authorized under state law to provide mass
9 transportation services to the general public;

10 (v) Employees working at a child care facility licensed by the
11 department of children, youth, and families under chapter 43.216 RCW,
12 if the employee has in-person interaction with children or other
13 members of the general public as part of their job duties;

14 (vi) Employees employed by a retail store that remains open to
15 the general public during the public health emergency, if the
16 employee has in-person interaction with the general public as part of
17 their job duties or has in-person interaction with other employees.
18 For the purposes of this subsection, "retail store" means a business
19 whose North American industry classification code is within "44-45";

20 (vii) Employees employed by a hotel, motel, or other transient
21 accommodation licensed under chapter 70.62 RCW that remains open to
22 the general public during the public health emergency, if the
23 employee has in-person interaction with the general public as part of
24 their job duties or has in-person interaction with other employees;

25 (viii) Employees employed by a restaurant, if the employee has
26 in-person interaction with the general public as part of their job
27 duties or works in the kitchen of the restaurant and has in-person
28 interaction with other employees. For the purposes of this
29 subsection, "restaurant" has the same meaning as in RCW 66.04.010;

30 (ix) Home care aides certified under chapter 18.88B RCW and home
31 health aides that provide services under chapter 70.126 RCW that
32 primarily work in the home of the individual receiving care;

33 (x) (A) Corrections officers and correctional support employees
34 working at a correctional institution.

35 (B) For the purposes of this subsection (7) (f) (x):

36 (I) "Correctional institution" has the same meaning as in RCW
37 9.94.049.

38 (II) "Corrections officer" means any corrections agency employee
39 whose primary job function is to provide custody, safety, and
40 security of prisoners in jails and detention facilities.

1 (III) "Correctional support employee" means any employee who
2 provides food services or janitorial services in a correctional
3 institution;

4 (xi) Educational employees, including classroom teachers,
5 paraeducators, principals, librarians, school bus drivers, and other
6 educational support staff, of any school district, or a contractor of
7 a school district, that are required to be physically present at a
8 school or on the grounds of a school where classes are being taught
9 in person, in a transportation vehicle necessary for school
10 operations, or in the home of a student as part of their job duties,
11 if the employee has in-person interaction with students, a student's
12 family members, or other employees as part of their job duties;

13 (xii) Employees of institutions of higher education that are
14 required to be physically present on campus when classes are being
15 taught in person, if the employee has in-person interaction with
16 students or the general public as part of their job duties. For the
17 purposes of this subsection, "institution of higher education" has
18 the same meaning as in RCW 28B.10.016;

19 (xiii) Employees employed by a public library that remains open
20 to the general public during the public health emergency, if the
21 employee has in-person interaction with the general public as part of
22 their job duties or has in-person interaction with other employees.
23 For the purposes of this subsection, "public library" means a library
24 covered by chapter 27.12 RCW;

25 (xiv) Employees employed by the department of licensing who are
26 assigned to review, process, approve, and issue driver licenses to
27 the general public, if the employee has in-person interaction with
28 the general public as part of their job duties or has in-person
29 interaction with other employees.

30 (g) "Meat packing work" means work slaughtering animals and
31 processing and packaging meat products for sale and the rendering of
32 animal by-products.

33 (h) "Nursing home" means a nursing home licensed under chapter
34 18.51 RCW.

35 (i) "Public health emergency" means a declaration or order
36 concerning any infectious or contagious diseases, including a
37 pandemic and is issued as follows:

38 (i) The president of the United States has declared a national or
39 regional emergency that covers every county in the state of
40 Washington; or

1 (ii) The governor of Washington has declared a state of emergency
2 under RCW 43.06.010(12) in every county in the state.

3 (j) "School" has the same meaning as in RCW 28A.210.070.

4 **Sec. 5.** RCW 71.24.905 and 2022 c 232 s 2 are each amended to
5 read as follows:

6 (1) Subject to the availability of amounts appropriated for this
7 specific purpose, the University of Washington shall, in consultation
8 and collaboration with the co-responder outreach alliance and other
9 stakeholders as appropriate in the field of co-response:

10 (a) Establish regular opportunities for police, fire, emergency
11 medical services, peer counselors, and behavioral health personnel
12 working in co-response to convene for activities such as training,
13 exchanging information and best practices around the state and
14 nationally, and providing the University of Washington with
15 assistance with activities described in this section;

16 (b) Subject to the availability of amounts appropriated for this
17 specific purpose, administer a small budget to help defray costs for
18 training and professional development, which may include expenses
19 related to attending or hosting site visits with experienced co-
20 response teams;

21 (c) Develop an assessment to be provided to the governor and
22 legislature by June 30, 2023, describing and analyzing the following:

23 (i) Existing capacity and shortfalls across the state in co-
24 response teams and the co-response workforce;

25 (ii) Current alignment of co-response teams with cities,
26 counties, behavioral health administrative services organizations,
27 and call centers; distribution among police, fire, and EMS-based co-
28 response models; and desired alignment;

29 (iii) Current funding strategies for co-response teams and
30 identification of federal funding opportunities;

31 (iv) Current data systems utilized and an assessment of their
32 effectiveness for use by co-responders, program planners, and
33 policymakers;

34 (v) Current training practices and identification of future state
35 training practices;

36 (vi) Alignment with designated crisis responder activities;

37 (vii) Recommendations concerning best practices to prepare co-
38 responders to achieve objectives and meet future state crisis system
39 needs, including those of the 988 system;

1 (viii) Recommendations to align co-responder activities with
2 efforts to reform ways in which persons experiencing a behavioral
3 health crisis interact with the criminal justice system; and

4 (ix) Assessment of training and educational needs for current and
5 future co-responder workforce;

6 (d) Beginning in calendar year 2023, begin development of model
7 training curricula for individuals participating in co-response
8 teams; and

9 (e) Beginning in calendar year 2023, host an annual statewide
10 conference that draws state and national co-responders.

11 (2) Stakeholders in the field of co-response may include, but are
12 not limited to, the Washington association of designated crisis
13 responders; state associations representing police, fire, and
14 emergency medical services personnel; the Washington council on
15 behavioral health; the state ((enhanced)) 911 system; 988 crisis call
16 centers; and the peer workforce alliance.

17 (3) (a) By January 1, 2026, the University of Washington school of
18 social work, in consultation with the authority and the behavioral
19 health administrative services organizations, shall establish a
20 program to administer a crisis responder training academy resulting
21 in a certification in best practices in crisis response in three
22 behavioral health administrative services organizations with a
23 significant co-response footprint. The curriculum must include:
24 Safety and crisis de-escalation tactics, teamwork across the
25 disciplines including peer support workers, culturally responsive
26 crisis care, suicide intervention, substance use disorder engagement,
27 overdose response, and an eight-hour session with clinical staff of
28 designated 988 contact hubs, crisis relief centers, crisis call
29 centers, and employees of 911 public safety answering points,
30 explaining best coordination strategies. Best practices for regional
31 protocol development must be included.

32 (b) By January 1, 2027, the crisis responder training academy
33 shall be expanded to all behavioral health administrative services
34 organizations and provide openings for 988 rapid response teams, co-
35 response teams, mobile community response teams, and alternative
36 response teams. The behavioral health administrative services
37 organizations shall promote the training academy available to local
38 crisis responder and co-response teams in their regions. The
39 certification shall be optional and may not serve as an additional

1 requirement for licensure for crisis responders or licensed human
2 services professionals."

SHB 1811 - S COMM AMD

By Committee on Health & Long-Term Care

OUT OF ORDER 04/16/2025

3 On page 1, line 2 of the title, after "support;" strike the
4 remainder of the title and insert "amending RCW 5.60.060, 51.32.181,
5 and 71.24.905; reenacting and amending RCW 71.24.025; and creating a
6 new section."

EFFECT: • Clarifies that a co-response team dispatched by a designated 988 contact hub, which includes a mobile rapid response crisis team or a community-based crisis team, may not include law enforcement.

• Directs the University of Washington School of Social Work, by January 1, 2026, to establish a crisis responder training academy resulting in a certification in best practices in crisis response in three behavioral health administrative services organizations (BHASOs) with a significant co-response footprint. Specifies requirements for the curriculum.

• Directs that the crisis responder training academy be expanded to all BHASOs by January 1, 2027, and provide openings for 988 rapid response teams, co-response teams, mobile community response teams, and alternative response teams.

• Requires BHASOs to promote the training academy to local crisis responder and co-response teams in their regions.

• Clarifies that the certification is optional and is not an additional requirement for licensure for crisis responders or licensed human services professionals.

--- END ---