
ENGROSSED SUBSTITUTE HOUSE BILL 2099

AS AMENDED BY THE SENATE

Passed Legislature - 2019 Regular Session

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

By House Civil Rights & Judiciary (originally sponsored by
Representatives Irwin and Jinkins)

READ FIRST TIME 02/22/19.

1 AN ACT Relating to the use of video technology under the
2 involuntary treatment act; amending RCW 71.05.150, 71.05.150,
3 71.05.153, and 71.05.153; reenacting and amending RCW 71.05.020;
4 providing an effective date; and providing an expiration date.

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

6 **Sec. 1.** RCW 71.05.020 and 2019 c 446 s 2, 2019 c 444 s 16, and
7 2019 c 325 s 3001 are each reenacted and amended to read as follows:

8 The definitions in this section apply throughout this chapter
9 unless the context clearly requires otherwise.

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

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

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

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

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

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

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

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

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

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

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

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

30 (12) "Department" means the department of health;

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

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

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

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

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

6 (17) "Director" means the director of the authority;

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

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

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

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

38 (22) "Habilitative services" means those services provided by
39 program personnel to assist persons in acquiring and maintaining life
40 skills and in raising their levels of physical, mental, social, and

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

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

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

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

36 (26) "In need of assisted outpatient behavioral health treatment"
37 means that a person, as a result of a mental disorder or substance
38 use disorder: (a) Has been committed by a court to detention for
39 involuntary behavioral health treatment during the preceding thirty-
40 six months; (b) is unlikely to voluntarily participate in outpatient

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

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

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

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

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

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

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

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

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

29 (28) "Information related to mental health services" means all
30 information and records compiled, obtained, or maintained in the
31 course of providing services to either voluntary or involuntary
32 recipients of services by a mental health service provider. This may
33 include documents of legal proceedings under this chapter or chapter
34 71.34 or 10.77 RCW, or somatic health care information;

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

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

1 (31) "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 mental health and
4 substance use disorder service providers under RCW 71.05.130;

5 (32) "Less restrictive alternative treatment" means a program of
6 individualized treatment in a less restrictive setting than inpatient
7 treatment that includes the services described in RCW 71.05.585;

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

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

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

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

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

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

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

35 (38) "Mental health service provider" means a public or private
36 agency that provides mental health services to persons with mental
37 disorders or substance use disorders as defined under this section
38 and receives funding from public sources. This includes, but is not
39 limited to, hospitals licensed under chapter 70.41 RCW, evaluation
40 and treatment facilities as defined in this section, community mental

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

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

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

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

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

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

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

38 (45) "Psychologist" means a person who has been licensed as a
39 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 mental illness,
6 substance use disorders, or both mental illness and substance use
7 disorders, if the agency is operated directly by federal, state,
8 county, or municipal government, or a combination of such
9 governments;

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

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

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

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

23 (a) Provide the following services:

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

26 (ii) Clinical stabilization services;

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

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

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

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

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

1 (52) "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 (53) "Substance use disorder" means a cluster of cognitive,
5 behavioral, and physiological symptoms indicating that an individual
6 continues using the substance despite significant substance-related
7 problems. The diagnosis of a substance use disorder is based on a
8 pathological pattern of behaviors related to the use of the
9 substances;

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

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

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

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

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

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

13 (59) "Violent act" means behavior that resulted in homicide,
14 attempted suicide, nonfatal injuries, or substantial damage to
15 property.

16 **Sec. 2.** RCW 71.05.150 and 2019 c 446 s 4 are each amended to
17 read as follows:

18 (1) When a designated crisis responder receives information
19 alleging that a person, as a result of a mental disorder, substance
20 use disorder, or both presents a likelihood of serious harm or is
21 gravely disabled, or that a person is in need of assisted outpatient
22 behavioral health treatment; the designated crisis responder may,
23 after investigation and evaluation of the specific facts alleged and
24 of the reliability and credibility of any person providing
25 information to initiate detention or involuntary outpatient
26 treatment, if satisfied that the allegations are true and that the
27 person will not voluntarily seek appropriate treatment, file a
28 petition for initial detention under this section or a petition for
29 involuntary outpatient behavioral health treatment under RCW
30 71.05.148. Before filing the petition, the designated crisis
31 responder must personally interview the person, unless the person
32 refuses an interview, and determine whether the person will
33 voluntarily receive appropriate evaluation and treatment at an
34 evaluation and treatment facility, crisis stabilization unit, triage
35 facility, or approved substance use disorder treatment program. The
36 interview performed by the designated crisis responder may be
37 conducted by video provided that a licensed health care professional
38 or professional person who can adequately and accurately assist with

1 obtaining any necessary information is present with the person at the
2 time of the interview.

3 (2) (a) An order to detain a person with a mental disorder to a
4 designated evaluation and treatment facility, or to detain a person
5 with a substance use disorder to a secure withdrawal management and
6 stabilization facility or approved substance use disorder treatment
7 program, for not more than a seventy-two-hour evaluation and
8 treatment period may be issued by a judge of the superior court upon
9 request of a designated crisis responder, subject to (d) of this
10 subsection, whenever it appears to the satisfaction of a judge of the
11 superior court:

12 (i) That there is probable cause to support the petition; and

13 (ii) That the person has refused or failed to accept appropriate
14 evaluation and treatment voluntarily.

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

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

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

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

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

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

21 **Sec. 3.** RCW 71.05.150 and 2019 c 446 s 5 are each amended to
22 read as follows:

23 (1) When a designated crisis responder receives information
24 alleging that a person, as a result of a mental disorder, substance
25 use disorder, or both presents a likelihood of serious harm or is
26 gravely disabled, or that a person is in need of assisted outpatient
27 behavioral health treatment; the designated crisis responder may,
28 after investigation and evaluation of the specific facts alleged and
29 of the reliability and credibility of any person providing
30 information to initiate detention or involuntary outpatient
31 treatment, if satisfied that the allegations are true and that the
32 person will not voluntarily seek appropriate treatment, file a
33 petition for initial detention under this section or a petition for
34 involuntary outpatient behavioral health treatment under RCW
35 71.05.148. Before filing the petition, the designated crisis
36 responder must personally interview the person, unless the person
37 refuses an interview, and determine whether the person will
38 voluntarily receive appropriate evaluation and treatment at an
39 evaluation and treatment facility, crisis stabilization unit, triage

1 facility, or approved substance use disorder treatment program. The
2 interview performed by the designated crisis responder may be
3 conducted by video provided that a licensed health care professional
4 or professional person who can adequately and accurately assist with
5 obtaining any necessary information is present with the person at the
6 time of the interview.

7 (2) (a) An order to detain a person with a mental disorder to a
8 designated evaluation and treatment facility, or to detain a person
9 with a substance use disorder to a secure withdrawal management and
10 stabilization facility or approved substance use disorder treatment
11 program, for not more than a seventy-two-hour evaluation and
12 treatment period may be issued by a judge of the superior court upon
13 request of a designated crisis responder whenever it appears to the
14 satisfaction of a judge of the superior court:

15 (i) That there is probable cause to support the petition; and

16 (ii) That the person has refused or failed to accept appropriate
17 evaluation and treatment voluntarily.

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

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

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

1 her relatives, friends, an attorney, a personal physician, or other
2 professional or religious advisor to the place of evaluation. An
3 attorney accompanying the person to the place of evaluation shall be
4 permitted to be present during the admission evaluation. Any other
5 individual accompanying the person may be present during the
6 admission evaluation. The facility may exclude the individual if his
7 or her presence would present a safety risk, delay the proceedings,
8 or otherwise interfere with the evaluation.

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

18 **Sec. 4.** RCW 71.05.153 and 2019 c 446 s 6 are each amended to
19 read as follows:

20 (1) When a designated crisis responder receives information
21 alleging that a person, as the result of a mental disorder, presents
22 an imminent likelihood of serious harm, or is in imminent danger
23 because of being gravely disabled, after investigation and evaluation
24 of the specific facts alleged and of the reliability and credibility
25 of the person or persons providing the information if any, the
26 designated crisis responder may take such person, or cause by oral or
27 written order such person to be taken into emergency custody in an
28 evaluation and treatment facility for not more than seventy-two hours
29 as described in RCW 71.05.180.

30 (2) When a designated crisis responder receives information
31 alleging that a person, as the result of substance use disorder,
32 presents an imminent likelihood of serious harm, or is in imminent
33 danger because of being gravely disabled, after investigation and
34 evaluation of the specific facts alleged and of the reliability and
35 credibility of the person or persons providing the information if
36 any, the designated crisis responder may take the person, or cause by
37 oral or written order the person to be taken, into emergency custody
38 in a secure withdrawal management and stabilization facility or
39 approved substance use disorder treatment program for not more than

1 seventy-two hours as described in RCW 71.05.180, if a secure
2 withdrawal management and stabilization facility or approved
3 substance use disorder treatment program is available and has
4 adequate space for the person.

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

12 (i) Pursuant to subsection (1) or (2) of this section; or

13 (ii) When he or she has reasonable cause to believe that such
14 person is suffering from a mental disorder or substance use disorder
15 and presents an imminent likelihood of serious harm or is in imminent
16 danger because of being gravely disabled.

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

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

31 (5) Within three hours after arrival, not counting time periods
32 prior to medical clearance, the person must be examined by a mental
33 health professional. Within twelve hours of notice of the need for
34 evaluation, not counting time periods prior to medical clearance, the
35 designated crisis responder must determine whether the individual
36 meets detention criteria. The interview performed by the designated
37 crisis responder may be conducted by video provided that a licensed
38 health care professional or professional person who can adequately
39 and accurately assist with obtaining any necessary information is
40 present with the person at the time of the interview. If the

1 individual is detained, the designated crisis responder shall file a
2 petition for detention or a supplemental petition as appropriate and
3 commence service on the designated attorney for the detained person.
4 If the individual is released to the community, the mental health
5 service provider shall inform the peace officer of the release within
6 a reasonable period of time after the release if the peace officer
7 has specifically requested notification and provided contact
8 information to the provider.

9 (6) Dismissal of a commitment petition is not the appropriate
10 remedy for a violation of the timeliness requirements of this section
11 based on the intent of this chapter under RCW 71.05.010 except in the
12 few cases where the facility staff or designated mental health
13 professional has totally disregarded the requirements of this
14 section.

15 **Sec. 5.** RCW 71.05.153 and 2019 c 446 s 7 are each amended to
16 read as follows:

17 (1) When a designated crisis responder receives information
18 alleging that a person, as the result of a mental disorder, presents
19 an imminent likelihood of serious harm, or is in imminent danger
20 because of being gravely disabled, after investigation and evaluation
21 of the specific facts alleged and of the reliability and credibility
22 of the person or persons providing the information if any, the
23 designated crisis responder may take such person, or cause by oral or
24 written order such person to be taken into emergency custody in an
25 evaluation and treatment facility for not more than seventy-two hours
26 as described in RCW 71.05.180.

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

38 (3) A peace officer may take or cause such person to be taken
39 into custody and immediately delivered to a triage facility, crisis

1 stabilization unit, evaluation and treatment facility, secure
2 withdrawal management and stabilization facility, approved substance
3 use disorder treatment program, or the emergency department of a
4 local hospital under the following circumstances:

5 (a) Pursuant to subsection (1) or (2) of this section; or

6 (b) When he or she has reasonable cause to believe that such
7 person is suffering from a mental disorder or substance use disorder
8 and presents an imminent likelihood of serious harm or is in imminent
9 danger because of being gravely disabled.

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

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

36 (6) Dismissal of a commitment petition is not the appropriate
37 remedy for a violation of the timeliness requirements of this section
38 based on the intent of this chapter under RCW 71.05.010 except in the
39 few cases where the facility staff or designated mental health

1 professional has totally disregarded the requirements of this
2 section.

3 NEW SECTION. **Sec. 6.** Sections 2 and 4 of this act expire July
4 1, 2026.

5 NEW SECTION. **Sec. 7.** Sections 3 and 5 of this act take effect
6 July 1, 2026.

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