
SECOND SUBSTITUTE SENATE BILL 5807

State of Washington

67th Legislature

2022 Regular Session

By Senate Ways & Means (originally sponsored by Senators Warnick and Dhingra)

READ FIRST TIME 02/07/22.

1 AN ACT Relating to improving behavioral health outcomes for
2 adults and children by enhancing engagement of state hospitals with
3 the patients, their family members, and natural supports; amending
4 RCW 72.23.010, 72.23.020, 72.23.025, 72.23.170, and 72.23.200; and
5 adding new sections to chapter 72.23 RCW.

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

7 NEW SECTION. **Sec. 1.** A new section is added to chapter 72.23
8 RCW to read as follows:

9 (1) There is established within each state hospital by January 1,
10 2024, a bureau of family experience devoted to enhancing engagement
11 between state hospitals and a patient's family or natural supports.
12 The mission of the bureau is to provide information, guidance, and
13 support to family and caregivers to help them be effective in
14 supporting the patient's recovery, and to provide a source of
15 training for state hospital staff using cognitive behavioral therapy
16 principles and the psychosis REACH model.

17 (2) The bureau shall establish contact with at least one family
18 member or natural support and provide them with systems navigation
19 information, education, and training, to include the following:

20 (a) A checklist of what their loved one can expect in the
21 hospital, starting at admission;

1 (b) An overview of hospital systems including unit structure,
2 treatment team composition, and approach to working with patients;
3 (c) Discharge process information, including who determines
4 discharge criteria and how discharge readiness is determined;
5 (d) An overview of the role of the hospital in relation to
6 relevant external systems such as corrections systems and social
7 support systems;
8 (e) Access to the psychosis REACH training program;
9 (f) Access to family-to-family peer support from a family
10 bridger;
11 (g) Information about patient privacy;
12 (h) Information about legal processes related to the patient's
13 commitment status and criminal offense if applicable; and
14 (i) Preparation to support the patient in the community.
15 (3) The bureau shall comply with state and federal privacy laws
16 when contacting a patient's family or natural supports to offer the
17 services described in subsection (2) of this section. The legislature
18 finds that disclosure of the following does not violate privacy laws:
19 (a) The fact that the person contacted has been identified as a
20 person who may benefit from the information, education, or training
21 provided under subsection (2) of this section;
22 (b) Relevant patient health information under circumstances
23 authorized under RCW 70.02.205;
24 (c) Relevant patient health information to persons the patient
25 has involved in their health care with the patient's verbal
26 agreement, written consent, or lack of objection which can be
27 reasonably inferred from the circumstances;
28 (d) Relevant health information if the patient does not have
29 capacity and based on professional judgment that disclosure to the
30 patient's family or natural supports is in the best interest of the
31 patient; or
32 (e) Matters contained in the public record.
33 (4) If the patient consents to involvement of family members or
34 natural supports in the patient's care, services offered by the
35 bureau under subsection (2) of this section shall additionally
36 include:
37 (a) Orientation to visitation policies and procedures and
38 assistance with navigation, including any needed paperwork;

1 (b) Guidance for communicating with the treatment team, including
2 what to expect, best practices, dos and don'ts, and orientation to
3 treatment planning meetings;

4 (c) Guidance for communication with loved one during treatment;

5 (d) Development of a family crisis support plan; and

6 (e) Guidance for working effectively with the social work team on
7 discharge planning.

8 (5) The bureau shall conduct a needs assessment to determine the
9 kinds of parent and caregiver training under subsection (2) of this
10 section which will be most appropriate and determine how to source
11 this training from relevant experts.

12 (6) The bureau shall provide or source initial training and
13 annual competency renewal for state hospital staff which incorporates
14 the following topics:

15 (a) Best practices for engaging families and natural supports in
16 mental health services;

17 (b) The evidence base and rationale for family interventions for
18 psychosis;

19 (c) Mental health stigma;

20 (d) Psychosis REACH training principles; and

21 (e) Effective coordination with family or natural supports for
22 care and discharge planning.

23 (7) Subject to the amounts appropriated for this specific
24 purpose, the staffing of each bureau of family experience shall
25 include a director, one or more individuals licensed to provide
26 social work or counseling services, and one or more individuals
27 qualified to provide family peer specialist services. The department
28 shall develop a staffing ratio reflecting an appropriate level of
29 staffing per state hospital patient in consultation with the
30 University of Washington.

31 (8) Each state hospital shall include in its admission process
32 identification of family and natural supports for the patient, an
33 explanation to each patient of the role of the bureau, and
34 determination of whether informed consent exists for involvement of
35 family or natural supports in the patient's care. If the patient does
36 not have the capacity to provide informed consent for this purpose,
37 the involvement of family or natural supports shall be determined by
38 consulting the patient's guardian or in a manner consistent with RCW
39 70.02.205.

1 (9) The bureau shall coordinate with the office of behavioral
2 health consumer advocacy under chapter 71.40 RCW as appropriate and
3 may make appropriate referrals. A state hospital may expand the scope
4 of the bureau to integrate with the activities of any internal
5 consumer advocacy office.

6 (10) For purposes of this section:

7 (a) "Bureau" means the bureau of family experience.

8 (b) "Family bridger" means a family peer specialist who is not a
9 member of the patient's treatment team who works directly with the
10 patient's family members or natural supports, in a manner consistent
11 with the family bridger program developed at the University of
12 Washington.

13 (c) "Family peer specialist" means a person who self-identifies
14 as a family member of a person with serious mental illness and who
15 receives training specific to this role based on a curriculum
16 developed by the University of Washington.

17 (d) "Natural support" means an individual who provides support
18 and assistance that naturally flows from the associations and
19 relationships typically developed in natural settings such as the
20 family, school, work, and community.

21 (e) "Psychosis REACH" means an evidence-based training for family
22 and friends caring for a loved one with psychosis promoted by the
23 University of Washington department of psychiatry and behavioral
24 sciences that incorporates teaching of cognitive behavioral therapy
25 principles and skills for the purpose of enabling caregivers to
26 better communicate with and support their loved ones and to connect
27 them with others who have similar experiences, and which by December
28 31, 2022, shall be adapted to address the needs of caregivers of
29 individuals who are either minors or adults.

30 NEW SECTION. **Sec. 2.** A new section is added to chapter 72.23
31 RCW to read as follows:

32 (1) The department shall contract with the University of
33 Washington department of psychiatry and behavioral sciences to assist
34 with the development and implementation of a bureau of family
35 experience at each state hospital and other activities under section
36 1 of this act. The department and each state hospital shall cooperate
37 with any efforts to monitor fidelity and provide research into
38 effectiveness.

1 (2) The University of Washington shall develop a training
2 curriculum for family peer specialists by December 31, 2022.

3 **Sec. 3.** RCW 72.23.010 and 2000 c 22 s 2 are each amended to read
4 as follows:

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

7 (1) "Court" means the superior court of the state of Washington.

8 (2) "Department" means the department of social and health
9 services.

10 (3) "Employee" means an employee as defined in RCW 49.17.020.

11 (4) "Licensed physician" means an individual permitted to
12 practice as a physician under the laws of the state, or a medical
13 officer, similarly qualified, of the government of the United States
14 while in this state in performance of his or her official duties.

15 (5) (~~"Mentally ill person" means any person who, pursuant to the~~
16 ~~definitions contained in RCW 71.05.020, as a result of a mental~~
17 ~~disorder presents a likelihood of serious harm to others or himself~~
18 ~~or herself or is gravely disabled.~~

19 ~~(6))~~ "Patient" means a person under observation, care, or
20 treatment in a state hospital, or a person found (~~(mentally ill)~~) to
21 have a mental illness by the court, and not discharged from a state
22 hospital, or other facility, to which such person had been ordered
23 hospitalized.

24 (6) "Person with mental illness" means any person who, pursuant
25 to the definitions contained in RCW 71.05.020 and 71.34.020, as a
26 result of a mental disorder presents a likelihood of serious harm to
27 others or himself or herself or is gravely disabled, or who is
28 committed to a state hospital under chapter 10.77 RCW.

29 (7) "Resident" means a resident of the state of Washington.

30 (8) "Secretary" means the secretary of the department of social
31 and health services.

32 (9) "State hospital" means any hospital, including a child study
33 and treatment center, operated and maintained by the state of
34 Washington for the care of (~~(the mentally ill)~~) persons with mental
35 illness.

36 (10) "Superintendent" means the superintendent of a state
37 hospital.

1 (11) "Violence" or "violent act" means any physical assault or
2 attempted physical assault against an employee or patient of a state
3 hospital.

4 Wherever used in this chapter, the masculine shall include the
5 feminine and the singular shall include the plural.

6 **Sec. 4.** RCW 72.23.020 and 1959 c 28 s 72.23.020 are each amended
7 to read as follows:

8 There are hereby permanently located and established the
9 following state hospitals: Western state hospital at Fort Steilacoom,
10 Pierce county; eastern state hospital at Medical Lake, Spokane
11 county; and ~~((northern state hospital near Sedro Woolley, Skagit
12 county))~~ the child study and treatment center in Lakewood, Pierce
13 county.

14 **Sec. 5.** RCW 72.23.025 and 2019 c 325 s 5028 are each amended to
15 read as follows:

16 (1) It is the intent of the legislature to improve the quality of
17 service at state hospitals, eliminate overcrowding, and more
18 specifically define the role of the state hospitals. The legislature
19 intends that eastern and western state hospitals and the child study
20 and treatment center shall become clinical centers for handling the
21 most complicated long-term care needs of patients with a primary
22 diagnosis of mental disorder. To this end, the legislature intends
23 that funds appropriated for mental health programs, including funds
24 for behavioral health administrative services organizations, managed
25 care organizations contracted with the health care authority, and the
26 state hospitals, be used for persons with primary diagnosis of mental
27 disorder. The legislature finds that establishment of institutes for
28 the study and treatment of mental disorders at ~~((both))~~ eastern state
29 hospital ~~((and))~~, western state hospital, and the child study and
30 treatment center will be instrumental in implementing the legislative
31 intent.

32 (2)(a) There is established at eastern state hospital ~~((and))~~,
33 western state hospital, and the child study and treatment center
34 institutes for the study and treatment of mental disorders. The
35 institutes shall be operated by joint operating agreements between
36 state colleges and universities and the department of social and
37 health services. The institutes are intended to conduct training,
38 research, and clinical program development activities that will

1 directly benefit persons with mental illness who are receiving
2 treatment in Washington state by performing the following activities:

3 (i) Promote recruitment and retention of highly qualified
4 professionals at the state hospitals and community mental health
5 programs;

6 (ii) Improve clinical care by exploring new, innovative, and
7 scientifically based treatment models for persons presenting
8 particularly difficult and complicated clinical syndromes;

9 (iii) Provide expanded training opportunities for existing staff
10 at the state hospitals and community mental health programs;

11 (iv) Promote bilateral understanding of treatment orientation,
12 possibilities, and challenges between state hospital professionals
13 and community mental health professionals.

14 (b) To accomplish these purposes the institutes may, within funds
15 appropriated for this purpose:

16 (i) Enter joint operating agreements with state universities or
17 other institutions of higher education to accomplish the placement
18 and training of students and faculty in psychiatry, psychology,
19 social work, occupational therapy, nursing, and other relevant
20 professions at the state hospitals and community mental health
21 programs;

22 (ii) Design and implement clinical research projects to improve
23 the quality and effectiveness of state hospital services and
24 operations;

25 (iii) Enter into agreements with community mental health service
26 providers to accomplish the exchange of professional staff between
27 the state hospitals and community mental health service providers;

28 (iv) Establish a student loan forgiveness and conditional
29 scholarship program to retain qualified professionals at the state
30 hospitals and community mental health providers when the secretary
31 has determined a shortage of such professionals exists.

32 (c) Notwithstanding any other provisions of law to the contrary,
33 the institutes may enter into agreements with the department or the
34 state hospitals which may involve changes in staffing necessary to
35 implement improved patient care programs contemplated by this
36 section.

37 (d) The institutes are authorized to seek and accept public or
38 private gifts, grants, contracts, or donations to accomplish their
39 purposes under this section.

1 **Sec. 6.** RCW 72.23.170 and 2003 c 53 s 364 are each amended to
2 read as follows:

3 Any person who procures the escape of any patient of any state
4 hospital (~~for the mentally ill, or institutions for psychopaths to~~
5 ~~which such patient has been lawfully committed~~), or who advises,
6 connives at, aids, or assists in such escape or conceals any such
7 escape, is guilty of a class C felony and shall be punished by
8 imprisonment in a state correctional institution for a term of not
9 more than five years or by a fine of not more than (~~five hundred~~
10 ~~dollars~~) \$500 or by both imprisonment and fine.

11 **Sec. 7.** RCW 72.23.200 and 2012 c 117 s 468 are each amended to
12 read as follows:

13 No (~~mentally ill~~) person under the age of (~~sixteen~~) 16 years
14 shall be regularly confined in any ward in any state hospital which
15 ward is designed and operated for the care of (~~the mentally ill~~
16 ~~eighteen~~) persons 18 years of age or over. No person of the ages of
17 (~~sixteen~~) 16 and (~~seventeen~~) 17 shall be placed in any such ward,
18 when in the opinion of the superintendent such placement would be
19 detrimental to the mental condition of such a person or would impede
20 his or her recovery or treatment.

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