
HOUSE BILL 1602

State of Washington 62nd Legislature 2011 Regular Session

By Representatives McCune, Shea, Hinkle, Ahern, Angel, and Harris

Read first time 01/26/11. Referred to Committee on Judiciary.

1 AN ACT Relating to the restoration of parents' rights; amending RCW
2 70.96A.020, 70.96A.095, 71.34.530, 70.24.110, 13.32A.082, 28A.230.070,
3 and 46.20.292; reenacting and amending RCW 70.24.105; adding new
4 sections to chapter 26.28 RCW; adding a new section to chapter 28A.320
5 RCW; creating new sections; and prescribing penalties.

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

7 NEW SECTION. **Sec. 1.** The legislature finds there has been a
8 gradual encroachment by the state into the fundamental rights of
9 parents to exercise legitimate care, responsibility, and guidance over
10 the upbringing of their children. The legislature also finds
11 government's failure to adequately support reasonable attempts by
12 parents to guide, discipline, and prepare their children for a
13 productive, fulfilling life has contributed to the breakdown in the
14 family unit and is harmful to society.

15 The result is a breakdown in the traditional role of the family as
16 the primary provider, protector, and promoter of the health, safety,
17 and well-being of children and of the basic values and character traits
18 essential for attaining individual liberty, fulfillment, and happiness.

1 This act is intended to ensure parents can rightfully guide and
2 direct the affairs of their minor children. This act is also intended
3 to ensure government appropriately respects and reinforces those
4 rights, and to facilitate parents in meeting the responsibilities
5 inherent in bearing and raising young children. The legislature
6 recognizes upholding the rights of parents is in the best interest of
7 the families and minor children of Washington state.

8 This act is also intended to assist parents in furthering the
9 following important values: (1) Honesty, integrity, and trust; (2)
10 respect for self and others; (3) responsibility for personal actions
11 and commitments; (4) self-discipline and moderation; (5) diligence and
12 a positive work ethic; (6) respect for law and authority; (7) healthy
13 and constructive behavior; and (8) family as the basis of society.

14 Neither the state of Washington, nor its political subdivisions,
15 should by any means enact or enforce any policy that supersedes or
16 infringes upon the abilities and the rights of parents as recognized
17 and protected by this act.

18 NEW SECTION. **Sec. 2.** A new section is added to chapter 26.28 RCW
19 to read as follows:

20 (1) A parent or legal guardian of an unemancipated minor child has
21 the right to be notified and present whenever the minor child is
22 receiving health care, unless a court order has been issued prohibiting
23 the parent or legal guardian from contact with the minor child.
24 However, a physician may exclude the presence of a parent or legal
25 guardian when in the physician's good faith clinical judgment the
26 presence threatens the success of a medical procedure, treatment,
27 diagnosis, or examination that involves the physical touching of the
28 minor child.

29 (2) The prior notification requirement does not apply if, on the
30 basis of a physician's good faith clinical judgment, a medical
31 emergency exists that necessitates the immediate performance of medical
32 care in order to avert the death of the child or for which a delay will
33 create a serious risk of substantial and irreversible impairment of a
34 major bodily function.

35 (3) An unemancipated minor or dependent child may petition any
36 superior court for a waiver of the notification requirement and may
37 participate in proceedings on their own behalf. The petition shall

1 include a statement that the petitioner is an unemancipated minor or
2 dependent child. The court shall appoint a guardian ad litem for the
3 petitioner. Any guardian ad litem appointed under this section shall
4 act to maintain the confidentiality of the proceedings.

5 The court shall advise the petitioner that they have a right to
6 court-appointed counsel and shall provide such counsel upon request.

7 Court proceedings under this section shall be confidential and
8 shall ensure the anonymity of the petitioner. All court proceedings
9 under this section shall be sealed. The petitioner has the right to
10 file their petition in the court using a pseudonym or using solely
11 their initials. All documents related to this petition shall be
12 confidential and shall not be available to the public. These
13 proceedings shall be given precedence over other pending matters to the
14 extent necessary to ensure that the court reaches a decision promptly.
15 The court shall rule, and issue written findings of fact and
16 conclusions of law, within forty-eight hours of the time that the
17 petition was filed, except that the forty-eight hour limitation may be
18 extended at the request of the petitioner. If the court fails to rule
19 within the forty-eight hour period and an extension was not requested,
20 the petition shall be deemed to have been granted, and the notification
21 requirement shall be waived.

22 In the case of a petition by a petitioner, if the court finds, by
23 clear and convincing evidence, that the petitioner is sufficiently
24 mature or able to make health care decisions, the court shall issue an
25 order authorizing the receipt of health care without the notification
26 of a parent or guardian. If the court does not make the finding that
27 the petitioner is sufficiently mature or able to make health care
28 decisions, it shall dismiss the petition.

29 In the case of a petition by a petitioner, if the court finds, by
30 clear and convincing evidence, that there is evidence of a pattern of
31 physical or sexual abuse by a parent or guardian of the petitioner, or
32 that the notification of a parent or guardian is not in the best
33 interest of the petitioner, the court shall issue an order authorizing
34 the receipt of health care without notification of a parent or
35 guardian. If the court does not make the finding that there is
36 evidence of a pattern of physical or sexual abuse by a parent or
37 guardian of the petitioner, or that the consent of a parent or guardian

1 is not in the best interest of the petitioner, it shall dismiss the
2 petition.

3 A court that conducts proceedings under this section shall issue
4 written and specific factual findings and legal conclusions supporting
5 its decision and shall order that a confidential record of the evidence
6 and the judge's findings and conclusions be maintained.

7 An expedited confidential appeal shall be available, as the supreme
8 court provides by rule, to a petitioner to whom the court denies a
9 waiver of notice. An order authorizing health care without notice
10 shall not be subject to appeal.

11 Filing fees shall not be required of a petitioner who petitions a
12 court for a waiver of parental notification under this section at
13 either the trial or the appellate level.

14 The supreme court is respectfully requested to establish rules to
15 ensure that proceedings under this section are handled in an
16 expeditious and confidential manner and to satisfy any requirements of
17 federal courts binding on this jurisdiction.

18 (4) For the purposes of this section, "health care" means any
19 mental or physical health service, including medical care; "medical
20 care" means any medical procedure, treatment, diagnosis, or examination
21 that involves the physical touching of the minor child, or any
22 consultation, that is performed by a person licensed in this state to
23 provide health care; and "physician" means a person licensed to
24 practice medicine or osteopathy in this state.

25 NEW SECTION. **Sec. 3.** A new section is added to chapter 26.28 RCW
26 to read as follows:

27 An invasive medical procedure may not be performed upon an
28 unemancipated minor child unless the physician has first notified the
29 child's parent or legal guardian.

30 This prior written consent requirement does not apply if, on the
31 basis of a physician's good faith clinical judgment, a medical
32 emergency exists that necessitates the immediate performance of an
33 invasive medical procedure so as to avert the death of the child or for
34 which a delay will create a serious risk of substantial and
35 irreversible impairment of a major bodily function.

36 An unemancipated minor or dependent child may petition any superior
37 court for a waiver of the notification requirement and may participate

1 in proceedings on their own behalf. The petition shall include a
2 statement that the petitioner is an unemancipated minor or dependent
3 child. The court shall appoint a guardian ad litem for the petitioner.
4 Any guardian ad litem appointed under this section shall act to
5 maintain the confidentiality of the proceedings.

6 The court shall advise the petitioner that they have a right to
7 court-appointed counsel and shall provide such counsel upon request.

8 Court proceedings under this section shall be confidential and
9 shall ensure the anonymity of the petitioner. All court proceedings
10 under this section shall be sealed. The petitioner has the right to
11 file their petition in the court using a pseudonym or using solely
12 their initials. All documents related to this petition shall be
13 confidential and shall not be available to the public. These
14 proceedings shall be given precedence over other pending matters to the
15 extent necessary to ensure that the court reaches a decision promptly.
16 The court shall rule, and issue written findings of fact and
17 conclusions of law, within forty-eight hours of the time that the
18 petition was filed, except that the forty-eight hour limitation may be
19 extended at the request of the petitioner. If the court fails to rule
20 within the forty-eight hour period and an extension was not requested,
21 the petition shall be deemed to have been granted, and the notification
22 requirement shall be waived.

23 In the case of a petition by a petitioner, if the court finds, by
24 clear and convincing evidence, that the petitioner is sufficiently
25 mature or able to decide whether to have an invasive procedure, the
26 court shall issue an order authorizing the performance of the invasive
27 procedure without the notification of a parent or guardian. If the
28 court does not make the finding that the petitioner is sufficiently
29 mature or able to decide whether to have the invasive procedure, it
30 shall dismiss the petition.

31 In the case of a petition by a petitioner, if the court finds, by
32 clear and convincing evidence, that there is evidence of a pattern of
33 physical or sexual abuse by a parent or guardian of the petitioner, or
34 that the notification of a parent or guardian is not in the best
35 interest of the petitioner, the court shall issue an order authorizing
36 the performance of the invasive procedure without notification of a
37 parent or guardian. If the court does not make the finding that there
38 is evidence of a pattern of physical or sexual abuse by a parent or

1 guardian of the petitioner, or that the consent of a parent or guardian
2 is not in the best interest of the petitioner, it shall dismiss the
3 petition.

4 A court that conducts proceedings under this section shall issue
5 written and specific factual findings and legal conclusions supporting
6 its decision and shall order that a confidential record of the evidence
7 and the judge's findings and conclusions be maintained.

8 An expedited confidential appeal shall be available, as the supreme
9 court provides by rule, to a petitioner to whom the court denies a
10 waiver of notice. An order authorizing an invasive procedure without
11 notice shall not be subject to appeal.

12 Filing fees shall not be required of a petitioner who petitions a
13 court for a waiver of parental notification under this section at
14 either the trial or the appellate level.

15 The supreme court is respectfully requested to establish rules to
16 ensure that proceedings under this section are handled in an
17 expeditious and confidential manner and to satisfy any requirements of
18 federal courts binding on this jurisdiction.

19 For purposes of this section, "invasive procedure" means a medical
20 intervention that intrudes on an individual's body or breaks the skin
21 barrier.

22 **Sec. 4.** RCW 70.96A.020 and 2001 c 13 s 1 are each amended to read
23 as follows:

24 For the purposes of this chapter the following words and phrases
25 shall have the following meanings unless the context clearly requires
26 otherwise:

27 (1) "Alcoholic" means a person who suffers from the disease of
28 alcoholism.

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

34 (3) "Approved treatment program" means a discrete program of
35 chemical dependency treatment provided by a treatment program certified
36 by the department of social and health services as meeting standards
37 adopted under this chapter.

1 (4) "Chemical dependency" means:
2 (a) Alcoholism; (b) drug addiction; or (c) dependence on alcohol
3 and one or more other psychoactive chemicals, as the context requires.
4 (5) "Chemical dependency program" means expenditures and activities
5 of the department designed and conducted to prevent or treat alcoholism
6 and other drug addiction, including reasonable administration and
7 overhead.
8 (6) "Department" means the department of social and health
9 services.
10 (7) "Designated chemical dependency specialist" or "specialist"
11 means a person designated by the county alcoholism and other drug
12 addiction program coordinator designated under RCW 70.96A.310 to
13 perform the commitment duties described in RCW 70.96A.140 and qualified
14 to do so by meeting standards adopted by the department.
15 (8) "Director" means the person administering the chemical
16 dependency program within the department.
17 (9) "Drug addict" means a person who suffers from the disease of
18 drug addiction.
19 (10) "Drug addiction" means a disease characterized by a dependency
20 on psychoactive chemicals, loss of control over the amount and
21 circumstances of use, symptoms of tolerance, physiological or
22 psychological withdrawal, or both, if use is reduced or discontinued,
23 and impairment of health or disruption of social or economic
24 functioning.
25 (11) "Emergency service patrol" means a patrol established under
26 RCW 70.96A.170.
27 (12) "Gravely disabled by alcohol or other psychoactive chemicals"
28 or "gravely disabled" means that a person, as a result of the use of
29 alcohol or other psychoactive chemicals: (a) Is in danger of serious
30 physical harm resulting from a failure to provide for his or her
31 essential human needs of health or safety; or (b) manifests severe
32 deterioration in routine functioning evidenced by a repeated and
33 escalating loss of cognition or volitional control over his or her
34 actions and is not receiving care as essential for his or her health or
35 safety.
36 (13) "History of one or more violent acts" refers to the period of
37 time ten years prior to the filing of a petition under this chapter,

1 excluding any time spent, but not any violent acts committed, in a
2 mental health facility, or a long-term alcoholism or drug treatment
3 facility, or in confinement.

4 (14) "Incapacitated by alcohol or other psychoactive chemicals"
5 means that a person, as a result of the use of alcohol or other
6 psychoactive chemicals, is gravely disabled or presents a likelihood of
7 serious harm to himself or herself, to any other person, or to
8 property.

9 (15) "Incompetent person" means a person who has been adjudged
10 incompetent by the superior court.

11 (16) "Intoxicated person" means a person whose mental or physical
12 functioning is substantially impaired as a result of the use of alcohol
13 or other psychoactive chemicals.

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

17 (18) "Likelihood of serious harm" means:

18 (a) A substantial risk that: (i) Physical harm will be inflicted
19 by an individual upon his or her own person, as evidenced by threats or
20 attempts to commit suicide or inflict physical harm on one's self; (ii)
21 physical harm will be inflicted by an individual upon another, as
22 evidenced by behavior that has caused the harm or that places another
23 person or persons in reasonable fear of sustaining the harm; or (iii)
24 physical harm will be inflicted by an individual upon the property of
25 others, as evidenced by behavior that has caused substantial loss or
26 damage to the property of others; or

27 (b) The individual has threatened the physical safety of another
28 and has a history of one or more violent acts.

29 (19) "Medical necessity" for inpatient care of a minor means a
30 requested certified inpatient service that is reasonably calculated to:

31 (a) Diagnose, arrest, or alleviate a chemical dependency; or (b)
32 prevent the worsening of chemical dependency conditions that endanger
33 life or cause suffering and pain, or result in illness or infirmity or
34 threaten to cause or aggravate a handicap, or cause physical deformity
35 or malfunction, and there is no adequate less restrictive alternative
36 available.

37 (20) "Minor" means a person less than eighteen years of age.

1 (21) "Parent" means (~~the parent or parents who have the legal~~
2 ~~right to custody of the child. Parent includes custodian or guardian~~)
3 (a) a biological or adoptive parent who has legal custody of the child,
4 including either parent if custody is shared under a joint custody
5 agreement; or (b) a person or agency judicially appointed as legal
6 guardian or custodian of the child.

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

11 (23) "Person" means an individual, including a minor.

12 (24) "Professional person in charge" or "professional person" means
13 a physician or chemical dependency counselor as defined in rule by the
14 department, who is empowered by a certified treatment program with
15 authority to make assessment, admission, continuing care, and discharge
16 decisions on behalf of the certified program.

17 (25) "Secretary" means the secretary of the department of social
18 and health services.

19 (26) "Treatment" means the broad range of emergency,
20 detoxification, residential, and outpatient services and care,
21 including diagnostic evaluation, chemical dependency education and
22 counseling, medical, psychiatric, psychological, and social service
23 care, vocational rehabilitation and career counseling, which may be
24 extended to alcoholics and other drug addicts and their families,
25 persons incapacitated by alcohol or other psychoactive chemicals, and
26 intoxicated persons.

27 (27) "Treatment program" means an organization, institution, or
28 corporation, public or private, engaged in the care, treatment, or
29 rehabilitation of alcoholics or other drug addicts.

30 (28) "Violent act" means behavior that resulted in homicide,
31 attempted suicide, nonfatal injuries, or substantial damage to
32 property.

33 **Sec. 5.** RCW 70.96A.095 and 1998 c 296 s 23 are each amended to
34 read as follows:

35 (~~Any person thirteen years of age or older may give consent for~~
36 ~~himself or herself to the furnishing of outpatient treatment by a~~

1 ~~chemical dependency treatment program certified by the department.~~
2 ~~Parental authorization is required for any treatment of a minor under~~
3 ~~the age of thirteen.))~~

4 (1) An unemancipated minor child may not receive outpatient or
5 inpatient treatment without the consent of the minor child's parent or
6 legal guardian, except as authorized in this subsection. A minor child
7 thirteen years of age or older may request and receive outpatient or
8 inpatient treatment without the consent of the minor child's parent or
9 legal guardian only under the following circumstances:

10 (a)(i) If in the judgment of the professional person in charge of
11 an evaluation and treatment facility, there is reason to believe that
12 the minor child is in need of outpatient or inpatient treatment, and if
13 the minor child is in need of inpatient treatment, that the facility
14 provides the type of evaluation and treatment the minor child needs and
15 it is not feasible to treat the minor child in a less restrictive
16 setting.

17 (ii) The minor child signs a declaration stating that the minor
18 child is unable or unwilling to obtain the consent of the minor child's
19 parent or legal guardian to the treatment and the reason the minor
20 child is unable or unwilling to obtain the consent of a parent or legal
21 guardian.

22 (iii) The professional person in charge of the evaluation and
23 treatment facility provides notification of the treatment being
24 considered to either the minor child's parent or legal guardian or the
25 department of social and health services. The notification must be
26 provided after completion of the first visit for outpatient treatment
27 or within twenty-four hours after the minor child is admitted to the
28 treatment facility for inpatient treatment but in either case before
29 the minor child receives treatment. The notification must contain the
30 location and telephone number of the facility that would provide the
31 treatment and the name of the professional person on the staff of the
32 facility who is designated to discuss the minor child's need for
33 treatment with the parent.

34 (iv) If the department of social and health services receives
35 notification of treatment services to be provided to an unemancipated
36 minor child without the consent of the minor child's parent or legal
37 guardian under (a)(iii) of this subsection, the department shall notify
38 the minor's parent or legal guardian of the treatment services to be

1 provided to the minor child and the treatment facility's determination
2 that the minor child is in need of treatment, and shall provide
3 services designed to resolve the conflict existing between the minor
4 child and the minor child's parent or legal guardian that is resulting
5 in the minor child's inability to seek or obtain the consent of the
6 parent or legal guardian to the treatment.

7 (v)(A) If the parent or legal guardian refuses to give consent to
8 the treatment after notification from the treatment facility or the
9 department of social and health services, the facility may not provide
10 treatment to the minor child and must release the minor child from
11 inpatient treatment upon the request of the parent or legal guardian,
12 unless the facility files a petition with the superior court of the
13 county in which treatment is to be provided setting forth the basis for
14 the facility's belief that the minor child is in need of inpatient or
15 outpatient treatment and that release or failure to provide outpatient
16 treatment would constitute a threat to the minor child's health or
17 safety.

18 (B) The petition must be signed by the professional person in
19 charge of the facility or that person's designee.

20 (C) The parent or legal guardian may apply to the court for
21 separate counsel to represent the parent or legal guardian if the
22 parent or legal guardian cannot afford counsel.

23 (D) A hearing shall be held on the petition within three judicial
24 days from the filing of the petition.

25 (E) The hearing must be conducted by a judge, court commissioner,
26 or licensed attorney designated by the superior court as a hearing
27 officer for the hearing. The hearing may be held at the treatment
28 facility.

29 (F) The facility must demonstrate by a preponderance of the
30 evidence presented at the hearing that the minor child is in need of
31 inpatient or outpatient treatment and that release or failure to
32 provide outpatient treatment would constitute a threat to the minor
33 child's health or safety. The hearing shall not be conducted using the
34 rules of evidence, and the admission or exclusion of evidence sought to
35 be presented shall be within the exercise of sound discretion by the
36 judicial officer conducting the hearing.

37 (b)(i) If the minor child alleges that a parent or legal guardian
38 has committed abuse or neglect, as defined in RCW 26.44.020, against

1 the minor child or against another person residing in the home of the
2 minor child and expresses fear or distress at the prospect of the
3 parent or legal guardian being notified, the minor child shall include
4 the allegations in the minor child's signed declaration.

5 (ii) If the minor child alleges abuse or neglect has occurred and
6 expresses fear or distress at the prospect of notification of the minor
7 child's parent or legal guardian, the professional person in charge of
8 the evaluation and treatment facility shall notify local law
9 enforcement of the allegations. If the officer believes there is a
10 possibility that the minor child is experiencing child abuse or
11 neglect, as defined in RCW 26.44.020, the law enforcement officer shall
12 take the minor child to a designated crisis residential center's secure
13 facility or a semi-secure facility if a secure facility is full, not
14 available, or not located within a reasonable distance.

15 (iii) If a crisis residential center is full, not available, or not
16 located within a reasonable distance, the law enforcement officer may
17 request the department of social and health services to accept custody
18 of the minor child. If the department determines that an appropriate
19 placement is currently available, the department shall accept custody
20 and place the minor child in an out-of-home placement. If the
21 department declines to accept custody of the minor child, the officer
22 may release the minor child after attempting to take the minor child to
23 the following, in the order listed: The home of an adult extended
24 family member; a responsible adult; a licensed youth shelter and shall
25 immediately notify the department of social and health services if no
26 placement option is available and the minor child is released.

27 (iv) If it is determined under (b)(ii) of this subsection that
28 there is a possibility that the minor child is experiencing abuse or
29 neglect, the minor child may receive outpatient or inpatient treatment
30 without the consent of the parent or legal guardian if the professional
31 person in charge of the treatment facility determines that failure to
32 provide treatment would constitute a threat to the minor child's health
33 or safety.

34 (v) The law enforcement agency releasing the minor child shall
35 notify either the minor child's parent or legal guardian of the final
36 placement or disposition of the minor child.

37 (2) A parent or legal guardian is not liable for evaluation or

1 treatment costs provided to a minor child without the consent of the
2 parent or legal guardian.

3 **Sec. 6.** RCW 71.34.530 and 2006 c 93 s 4 are each amended to read
4 as follows:

5 ~~((Any minor thirteen years or older may request and receive~~
6 ~~outpatient treatment without the consent of the minor's parent.))~~
7 Written parental authorization, or authorization from a person who may
8 consent on behalf of the minor pursuant to RCW 7.70.065, is required
9 for outpatient or inpatient treatment of ((a minor under the age of
10 thirteen)) an unemancipated minor child except as provided in
11 subsection (3) of this section.

12 (1) When in the judgment of the professional person in charge of an
13 evaluation and treatment facility there is reason to believe that an
14 unemancipated minor child is in need of inpatient treatment because of
15 a mental disorder, and the facility provides the type of evaluation and
16 treatment needed by the minor child, and it is not feasible to treat
17 the minor child in any less restrictive setting or the minor child's
18 home, the minor child may be admitted to an evaluation and treatment
19 facility in accordance with the following requirements:

20 (a) An unemancipated minor child may be voluntarily admitted by
21 application of the parent. The consent of the minor child is not
22 required for the minor child to be evaluated and admitted as
23 appropriate.

24 (b) Written renewal of voluntary consent must be obtained from the
25 applicant no less than once every twelve months.

26 (c) The minor child's need for continued inpatient treatments shall
27 be reviewed and documented no less than every one hundred eighty days.

28 (2) An unemancipated minor child may not receive outpatient or
29 inpatient treatment without the consent of the minor's parent or legal
30 guardian, except as authorized in this subsection. An unemancipated
31 minor child thirteen years of age or older may request and receive
32 outpatient or inpatient mental health treatment without the consent of
33 the parent or legal guardian only under the following circumstances:

34 (a)(i) If in the judgment of the professional person in charge of
35 an evaluation and treatment facility, there is reason to believe that
36 the minor child is in need of outpatient or inpatient treatment, and if
37 the minor child is in need of inpatient treatment, that the facility

1 provides the type of evaluation and treatment the minor child needs and
2 it is not feasible to treat the minor child in a less restrictive
3 setting.

4 (ii) The minor child signs a declaration stating that the minor
5 child is unable or unwilling to obtain the consent of the minor's
6 parent or legal guardian to the treatment and the reason the minor
7 child is unable or unwilling to obtain the consent of a parent or legal
8 guardian.

9 (iii) The professional person in charge of the evaluation and
10 treatment facility provides notification of the treatment being
11 considered to either the minor's parent or legal guardian or the
12 department of social and health services. The notification must be
13 provided after completion of the first visit for outpatient treatment
14 or within twenty-four hours after the minor child is admitted to the
15 treatment facility for inpatient treatment but in either case before
16 the minor receives treatment. The notification must contain the
17 location and telephone number of the facility that would provide the
18 treatment and the name of the professional person on the staff of the
19 facility who is designated to discuss the minor child's need for
20 treatment with the parent or legal guardian.

21 (iv) If the department of social and health services receives
22 notification of treatment services to be provided to an unemancipated
23 minor child without the consent of the minor child's parent or legal
24 guardian under (a)(iii) of this subsection, the department shall notify
25 the minor's parent or legal guardian of the treatment services to be
26 provided to the minor child and the treatment facility's determination
27 that the minor is in need of treatment, and shall provide services
28 designed to resolve the conflict existing between the minor child and
29 the minor's parent or legal guardian that is resulting in the minor
30 child's inability to seek or obtain the consent of the parent or legal
31 guardian to the treatment.

32 (v)(A) If the parent or legal guardian refuses to give consent to
33 treatment after notification from the treatment facility or the
34 department, the facility may not provide treatment to the minor child
35 and must release the minor child from inpatient treatment upon the
36 request of the parent or legal guardian, unless the facility files a
37 petition with the superior court of the county in which treatment is to
38 be provided setting forth the basis for the facility's belief that the

1 minor child is in need of inpatient or outpatient treatment and that
2 release or failure to provide outpatient treatment would constitute a
3 threat to the minor child's health or safety.

4 (B) The petition must be signed by the professional person in
5 charge of the facility or that person's designee.

6 (C) The parent or legal guardian may apply to the court for
7 separate counsel to represent the parent or legal guardian if the
8 parent or legal guardian cannot afford counsel.

9 (D) A hearing on the petition must be held within three judicial
10 days from the filing of the petition.

11 (E) The hearing must be conducted by a judge, court commissioner,
12 or licensed attorney designated by the superior court as a hearing
13 officer for such hearing. The hearing may be held at the treatment
14 facility.

15 (F) The facility must demonstrate by a preponderance of the
16 evidence presented at the hearing that the minor child is in need of
17 inpatient or outpatient treatment and that release or failure to
18 provide outpatient treatment would constitute a threat to the minor
19 child's health or safety. The hearing shall not be conducted using the
20 rules of evidence, and the admission or exclusion of evidence sought to
21 be presented shall be within the exercise of sound discretion by the
22 judicial officer conducting the hearing.

23 (b)(i) If the minor child alleges that a parent or legal guardian
24 has committed abuse or neglect, as defined in RCW 26.44.020, against
25 the minor child or against another person residing in the home of the
26 minor child and expresses fear or distress at the prospect of the
27 parent or legal guardian being notified, the minor child shall include
28 the allegations in the minor child's signed declaration.

29 (ii) If the minor child alleges abuse or neglect has occurred and
30 expresses fear or distress at the prospect of notification of the minor
31 child's parent or legal guardian, the professional person in charge of
32 the evaluation and treatment facility shall notify local law
33 enforcement of the allegations. If the officer believes there is a
34 possibility that the minor child is experiencing child abuse or
35 neglect, as defined in RCW 26.44.020, the law enforcement officer shall
36 take the minor child to a designated crisis residential center's secure
37 facility or a semi-secure facility if a secure facility is full, not
38 available, or not located within a reasonable distance.

1 (iii) If a crisis residential center is full, not available, or not
2 located within a reasonable distance, the law enforcement officer may
3 request the department of social and health services to accept custody
4 of the minor child. If the department determines that an appropriate
5 placement is currently available, the department shall accept custody
6 and place the minor child in an out-of-home placement. If the
7 department declines to accept custody of the minor child, the officer
8 may release the minor child after attempting to take the minor child to
9 the following, in the order listed: The home of an adult extended
10 family member; a responsible adult; a licensed youth shelter; and shall
11 immediately notify the department of social and health services if no
12 placement option is available and the minor child is released.

13 (iv) If it is determined under (b)(ii) of this subsection that
14 there is a possibility that the minor child is experiencing abuse or
15 neglect, the minor child may receive outpatient or inpatient treatment
16 without the consent of the parent or legal guardian if the professional
17 person in charge of the treatment facility determines that failure to
18 provide treatment would constitute a threat to the minor child's health
19 or safety.

20 (v) The law enforcement agency releasing the minor child shall
21 notify either the minor child's parent or legal guardian of the final
22 placement or disposition of the minor child.

23 (3) A notice of intent to remove a minor child shall result in the
24 following:

25 (a) Any unemancipated minor child must be discharged immediately
26 upon request of the parent or legal guardian.

27 (b) The staff member receiving the notice shall date it
28 immediately, record its existence in the minor child's clinical record,
29 and send copies of it to the minor child's attorney, if any, the
30 designated mental health professional, and the parent or legal
31 guardian.

32 (4) The ability of a parent or legal guardian to apply to a
33 certified evaluation and treatment program for the involuntary
34 admission of his or her minor child does not create a right to obtain
35 or benefit from any funds or resources of the state. However, the
36 state may provide services for indigent minor children to the extent
37 that funds are available therefor.

1 (5) A parent or legal guardian is not liable for evaluation or
2 treatment costs provided to an unemancipated minor child without the
3 consent of the parent or legal guardian.

4 **Sec. 7.** RCW 70.24.105 and 1997 c 345 s 2 and 1997 c 196 s 6 are
5 each reenacted and amended to read as follows:

6 (1) No person may disclose or be compelled to disclose the identity
7 of any person who has investigated, considered, or requested a test or
8 treatment for a sexually transmitted disease, except as authorized by
9 this chapter.

10 (2) No person may disclose or be compelled to disclose the identity
11 of any person upon whom an HIV antibody test is performed, or the
12 results of such a test, nor may the result of a test for any other
13 sexually transmitted disease when it is positive be disclosed. This
14 protection against disclosure of test subject, diagnosis, or treatment
15 also applies to any information relating to diagnosis of or treatment
16 for HIV infection and for any other confirmed sexually transmitted
17 disease. The following persons, however, may receive such information:

18 (a) The subject of the test or the subject's legal representative
19 for health care decisions in accordance with RCW 7.70.065(~~(, with the~~
20 ~~exception of such a representative of a minor child over fourteen years~~
21 ~~of age and otherwise competent))~~);

22 (b) Any person who secures a specific release of test results or
23 information relating to HIV or confirmed diagnosis of or treatment for
24 any other sexually transmitted disease executed by the subject or the
25 subject's legal representative for health care decisions in accordance
26 with RCW 7.70.065(~~(, with the exception of such a representative of a~~
27 ~~minor child over fourteen years of age and otherwise competent))~~);

28 (c) The state public health officer, a local public health officer,
29 or the centers for disease control of the United States public health
30 service in accordance with reporting requirements for a diagnosed case
31 of a sexually transmitted disease;

32 (d) A health facility or health care provider that procures,
33 processes, distributes, or uses: (i) A human body part, tissue, or
34 blood from a deceased person with respect to medical information
35 regarding that person; (ii) semen, including that provided prior to
36 March 23, 1988, for the purpose of artificial insemination; or (iii)
37 blood specimens;

1 (e) Any state or local public health officer conducting an
2 investigation pursuant to RCW 70.24.024, provided that such record was
3 obtained by means of court ordered HIV testing pursuant to RCW
4 70.24.340 or 70.24.024;

5 (f) A person allowed access to the record by a court order granted
6 after application showing good cause therefor. In assessing good
7 cause, the court shall weigh the public interest and the need for
8 disclosure against the injury to the patient, to the physician-patient
9 relationship, and to the treatment services. Upon the granting of the
10 order, the court, in determining the extent to which any disclosure of
11 all or any part of the record of any such test is necessary, shall
12 impose appropriate safeguards against unauthorized disclosure. An
13 order authorizing disclosure shall: (i) Limit disclosure to those
14 parts of the patient's record deemed essential to fulfill the objective
15 for which the order was granted; (ii) limit disclosure to those persons
16 whose need for information is the basis for the order; and (iii)
17 include any other appropriate measures to keep disclosure to a minimum
18 for the protection of the patient, the physician-patient relationship,
19 and the treatment services, including but not limited to the written
20 statement set forth in subsection (5) of this section;

21 ~~((g)) ((Local law enforcement agencies to the extent provided in RCW
22 70.24.034;~~

23 ~~((h))~~) Persons who, because of their behavioral interaction with the
24 infected individual, have been placed at risk for acquisition of a
25 sexually transmitted disease, as provided in RCW 70.24.022, if the
26 health officer or authorized representative believes that the exposed
27 person was unaware that a risk of disease exposure existed and that the
28 disclosure of the identity of the infected person is necessary;

29 ~~((i))~~) (h) A law enforcement officer, fire fighter, health care
30 provider, health care facility staff person, department of correction's
31 staff person, jail staff person, or other persons as defined by the
32 board in rule pursuant to RCW 70.24.340(4), who has requested a test of
33 a person whose bodily fluids he or she has been substantially exposed
34 to, pursuant to RCW 70.24.340(4), if a state or local public health
35 officer performs the test;

36 ~~((j))~~) (i) Claims management personnel employed by or associated
37 with an insurer, health care service contractor, health maintenance
38 organization, self-funded health plan, state-administered health care

1 claims payer, or any other payer of health care claims where such
2 disclosure is to be used solely for the prompt and accurate evaluation
3 and payment of medical or related claims. Information released under
4 this subsection shall be confidential and shall not be released or
5 available to persons who are not involved in handling or determining
6 medical claims payment; and

7 ~~((k))~~ (j) A department of social and health services worker, a
8 child placing agency worker, or a guardian ad litem who is responsible
9 for making or reviewing placement or case-planning decisions or
10 recommendations to the court regarding a child, who is less than
11 fourteen years of age, has a sexually transmitted disease, and is in
12 the custody of the department of social and health services or a
13 licensed child placing agency; this information may also be received by
14 a person responsible for providing residential care for such a child
15 when the department of social and health services or a licensed child
16 placing agency determines that it is necessary for the provision of
17 child care services.

18 (3) No person to whom the results of a test for a sexually
19 transmitted disease have been disclosed pursuant to subsection (2) of
20 this section may disclose the test results to another person except as
21 authorized by that subsection.

22 (4) The release of sexually transmitted disease information
23 regarding an offender or detained person, except as provided in
24 subsection (2)(e) of this section, shall be governed as follows:

25 (a) The sexually transmitted disease status of a department of
26 corrections offender who has had a mandatory test conducted pursuant to
27 RCW 70.24.340(1), 70.24.360, or 70.24.370 shall be made available by
28 department of corrections health care providers and local public health
29 officers to the department of corrections health care administrator or
30 infection control coordinator of the facility in which the offender is
31 housed. The information made available to the health care
32 administrator or the infection control coordinator under this
33 subsection (4)(a) shall be used only for disease prevention or control
34 and for protection of the safety and security of the staff, offenders,
35 and the public. The information may be submitted to transporting
36 officers and receiving facilities, including facilities that are not
37 under the department of corrections' jurisdiction according to the
38 provisions of (d) and (e) of this subsection.

1 (b) The sexually transmitted disease status of a person detained in
2 a jail who has had a mandatory test conducted pursuant to RCW
3 70.24.340(1), 70.24.360, or 70.24.370 shall be made available by the
4 local public health officer to a jail health care administrator or
5 infection control coordinator. The information made available to a
6 health care administrator under this subsection (4)(b) shall be used
7 only for disease prevention or control and for protection of the safety
8 and security of the staff, offenders, detainees, and the public. The
9 information may be submitted to transporting officers and receiving
10 facilities according to the provisions of (d) and (e) of this
11 subsection.

12 (c) Information regarding the sexually transmitted disease status
13 of an offender or detained person is confidential and may be disclosed
14 by a correctional health care administrator or infection control
15 coordinator or local jail health care administrator or infection
16 control coordinator only as necessary for disease prevention or control
17 and for protection of the safety and security of the staff, offenders,
18 and the public. Unauthorized disclosure of this information to any
19 person may result in disciplinary action, in addition to the penalties
20 prescribed in RCW 70.24.080 or any other penalties as may be prescribed
21 by law.

22 (d) Notwithstanding the limitations on disclosure contained in (a),
23 (b), and (c) of this subsection, whenever any member of a jail staff or
24 department of corrections staff has been substantially exposed to the
25 bodily fluids of an offender or detained person, then the results of
26 any tests conducted pursuant to RCW 70.24.340(1), 70.24.360, or
27 70.24.370, shall be immediately disclosed to the staff person in
28 accordance with the Washington Administrative Code rules governing
29 employees' occupational exposure to bloodborne pathogens. Disclosure
30 must be accompanied by appropriate counseling for the staff member,
31 including information regarding follow-up testing and treatment.
32 Disclosure shall also include notice that subsequent disclosure of the
33 information in violation of this chapter or use of the information to
34 harass or discriminate against the offender or detainee may result in
35 disciplinary action, in addition to the penalties prescribed in RCW
36 70.24.080, and imposition of other penalties prescribed by law.

37 (e) The staff member shall also be informed whether the offender or

1 detained person had any other communicable disease, as defined in RCW
2 72.09.251(3), when the staff person was substantially exposed to the
3 offender's or detainee's bodily fluids.

4 (f) The test results of voluntary and anonymous HIV testing or HIV-
5 related condition may not be disclosed to a staff person except as
6 provided in subsection (2)((+i)) (h) of this section and RCW
7 70.24.340(4). A health care administrator or infection control
8 coordinator may provide the staff member with information about how to
9 obtain the offender's or detainee's test results under subsection
10 (2)((+i)) (h) of this section and RCW 70.24.340(4).

11 (5) Whenever disclosure is made pursuant to this section, except
12 for subsections (2)(a) and (6) of this section, it shall be accompanied
13 by a statement in writing which includes the following or substantially
14 similar language: "This information has been disclosed to you from
15 records whose confidentiality is protected by state law. State law
16 prohibits you from making any further disclosure of it without the
17 specific written consent of the person to whom it pertains, or as
18 otherwise permitted by state law. A general authorization for the
19 release of medical or other information is NOT sufficient for this
20 purpose." An oral disclosure shall be accompanied or followed by such
21 a notice within ten days.

22 (6) The requirements of this section shall not apply to the
23 customary methods utilized for the exchange of medical information
24 among health care providers in order to provide health care services to
25 the patient, nor shall they apply within health care facilities where
26 there is a need for access to confidential medical information to
27 fulfill professional duties.

28 (7) Upon request of the victim, disclosure of test results under
29 this section to victims of sexual offenses under chapter 9A.44 RCW
30 shall be made if the result is negative or positive. The county
31 prosecuting attorney shall notify the victim of the right to such
32 disclosure. Such disclosure shall be accompanied by appropriate
33 counseling, including information regarding follow-up testing.

34 **Sec. 8.** RCW 70.24.110 and 1988 c 206 s 912 are each amended to
35 read as follows:

36 (~~(A minor fourteen years of age or older)~~) (1) An unemancipated
37 minor who may have come in contact with any sexually transmitted

1 disease or suspected sexually transmitted disease may (~~give consent to~~
2 ~~the furnishing of~~) not receive hospital, medical (~~and~~), or surgical
3 care related to the diagnosis or treatment of such disease(~~.—Such~~
4 ~~consent shall not be subject to disaffirmance because of minority. The~~
5 ~~consent of the parent, parents, or legal guardian of such minor shall~~
6 ~~not be necessary to authorize hospital, medical and surgical care~~
7 ~~related to such disease and such~~) without the consent of the minor
8 child's parent, parents, or legal guardian (~~shall not be liable for~~
9 ~~payment for any care rendered pursuant to this section~~), except under
10 the following circumstances:

11 (a)(i) If in the judgment of the treatment provider, there is
12 reason to believe that the minor child is in need of treatment for a
13 sexually transmitted disease.

14 (ii) The minor child signs a declaration stating that the minor
15 child is unable or unwilling to obtain the consent of the minor child's
16 parent or legal guardian to the treatment and the reason the minor
17 child is unable or unwilling to obtain the consent of a parent or legal
18 guardian.

19 (iii) The treatment provider provides notification of the treatment
20 being considered to either the minor child's parent or legal guardian
21 or the department of social and health services. The notification must
22 be provided after completion of the first visit and before the minor
23 receives treatment. The notification must contain the location and
24 telephone number of the facility that would provide the treatment and
25 the name of the treatment provider who is designated to discuss the
26 minor child's need for treatment with the parent or legal guardian.

27 (iv) If the department of social and health services receives
28 notification of treatment services to be provided to an unemancipated
29 minor child without the consent of the minor child's parent or legal
30 guardian under (a)(iii) of this subsection, the department shall notify
31 the minor's parent or legal guardian of the treatment services to be
32 provided to the minor child and the treatment provider's determination
33 that the minor child is in need of treatment, and shall provide
34 services designed to resolve the conflict existing between the minor
35 child and the minor child's parent or legal guardian that is resulting
36 in the minor child's inability to seek or obtain the consent of the
37 parent or legal guardian to the treatment.

1 (v)(A) If the parent or legal guardian refuses to give consent to
2 the treatment after notification from the treatment provider or the
3 department of social and health services, the treatment provider may
4 not provide treatment to the minor child, unless the treatment provider
5 files a petition with the superior court of the county in which
6 treatment is to be provided setting forth the basis for the treatment
7 provider's belief that the minor child is in need of treatment and that
8 failure to provide treatment would constitute a threat to the minor
9 child's health or safety.

10 (B) The petition must be signed by the treatment provider or that
11 person's designee.

12 (C) The parent or legal guardian may apply to the court for
13 separate counsel to represent the parent or legal guardian if the
14 parent or legal guardian cannot afford counsel.

15 (D) A hearing must be held on the petition within three judicial
16 days from the filing of the petition.

17 (E) The hearing must be conducted by a judge, court commissioner,
18 or licensed attorney designated by the superior court as a hearing
19 officer for the hearing.

20 (F) The treatment provider must demonstrate by a preponderance of
21 the evidence presented at the hearing that the minor child is in need
22 of treatment and that failure to provide treatment would constitute a
23 threat to the minor child's health or safety. The hearing shall not be
24 conducted using the rules of evidence, and the admission or exclusion
25 of evidence sought to be presented shall be within the exercise of
26 sound discretion by the judicial officer conducting the hearing.

27 (b)(i) If the minor child alleges that a parent or legal guardian
28 has committed abuse or neglect, as defined in RCW 26.44.020, against
29 the minor child or against another person residing in the home of the
30 minor child and expresses fear or distress at the prospect of the
31 parent or legal guardian being notified, the minor child shall include
32 the allegations in the minor child's signed declaration.

33 (ii) If the minor child alleges abuse or neglect has occurred and
34 expresses fear or distress at the prospect of notification of the minor
35 child's parent or legal guardian, the treatment provider shall notify
36 local law enforcement of the allegations. If the officer believes
37 there is a possibility that the minor child is experiencing child abuse
38 or neglect, as defined in RCW 26.44.020, the law enforcement officer

1 shall take the minor child to a designated crisis residential center's
2 secure facility or a semi-secure facility if a secure facility is full,
3 not available, or not located within a reasonable distance.

4 (iii) If a crisis residential center is full, not available, or not
5 located within a reasonable distance, the law enforcement officer may
6 request the department of social and health services to accept custody
7 of the minor child. If the department determines that an appropriate
8 placement is currently available, the department shall accept custody
9 and place the minor child in an out-of-home placement. If the
10 department declines to accept custody of the minor child, the officer
11 may release the minor child after attempting to take the minor child to
12 the following, in the order listed: The home of an adult extended
13 family member; a responsible adult; a licensed youth shelter and shall
14 immediately notify the department of social and health services if no
15 placement option is available and the minor child is released.

16 (iv) If it is determined under (b)(ii) of this subsection that
17 there is a possibility that the minor child is experiencing abuse or
18 neglect, the minor child may receive treatment without the consent of
19 the parent or legal guardian if the treatment provider determines that
20 failure to provide treatment would constitute a threat to the minor
21 child's health or safety.

22 (v) The law enforcement agency releasing the minor child shall
23 notify either the minor child's parent or legal guardian of the final
24 placement or disposition of the minor child.

25 (2) A parent or legal guardian is not liable for payment for the
26 costs of evaluating and treating a minor child for a sexually
27 transmitted disease if the parent or legal guardian did not consent to
28 the treatment.

29 **Sec. 9.** RCW 13.32A.082 and 2010 c 229 s 2 are each amended to read
30 as follows:

31 (1)(a) Except as provided in (b) of this subsection, any person,
32 including unlicensed youth shelters or runaway and homeless youth
33 programs, who, without legal authorization, provides shelter to a minor
34 and who knows at the time of providing the shelter that the minor is
35 away from the parent's home without the permission of the parent, or
36 other lawfully prescribed residence, shall promptly report the location

1 of the child to the parent, the law enforcement agency of the
2 jurisdiction in which the person lives, or the department.

3 (b)(i) If a licensed overnight youth shelter, or another licensed
4 organization whose stated mission is to provide services to homeless or
5 runaway youth and their families, provides shelter to a minor and knows
6 at the time of providing the shelter that the minor is away from a
7 lawfully prescribed residence or home without parental permission, it
8 shall contact the youth's parent, preferably within twenty-four hours
9 but within no more than seventy-two hours following the time that the
10 youth is admitted to the shelter or other licensed organization's
11 program. The notification must include the whereabouts of the youth,
12 a description of the youth's physical and emotional condition, and the
13 circumstances surrounding the youth's contact with the shelter or
14 organization. If there are compelling reasons not to notify the
15 parent, the shelter or organization shall instead notify the
16 department.

17 (ii) At least once every eight hours after learning that a youth
18 receiving services or shelter under this section is away from home
19 without permission, the shelter or organization staff must consult the
20 information that the Washington state patrol makes publicly available
21 under RCW 43.43.510(2). If the youth is publicly listed as missing,
22 the shelter or organization shall immediately notify the department of
23 its contact with the youth listed as missing. The notification must
24 include a description of the youth's physical and emotional condition
25 and the circumstances surrounding the youth's contact with the shelter
26 or organization.

27 (c) Reports required under this section may be made by telephone or
28 any other reasonable means.

29 (2) Unless the context clearly requires otherwise, the definitions
30 in this subsection apply throughout this section.

31 (a) "Shelter" means the person's home or any structure over which
32 the person has any control.

33 (b) "Promptly report" means to report within eight hours after the
34 person has knowledge that the minor is away from a lawfully prescribed
35 residence or home without parental permission.

36 (c) "Compelling reasons" include, but are not limited to,
37 circumstances that indicate that notifying the parent or legal guardian

1 will subject the child to abuse or neglect as defined in chapter 26.44
2 RCW.

3 (3) When the department receives a report under subsection (1) of
4 this section, it shall make a good faith attempt to notify the parent
5 that a report has been received and offer services designed to resolve
6 the conflict and accomplish a reunification of the family.

7 (4) Nothing in this section prohibits any person from immediately
8 reporting the identity and location of any minor who is away from a
9 lawfully prescribed residence or home without parental permission more
10 promptly than required under this section.

11 (5) A violation of subsection (1) of this section is a misdemeanor.

12 (6) This section expires July 1, 2012.

13 NEW SECTION. **Sec. 10.** A new section is added to chapter 28A.320
14 RCW to read as follows:

15 A student may attend or participate in a public school-sponsored
16 class, program, or activity that concerns suicide or euthanasia, or
17 includes human sexuality issues dealing with sex education, sexually
18 transmitted diseases, contraception, or sexual orientation, only if the
19 school has on file a signed confirmation from the parent that the
20 parent has received notification that the class, program, or activity
21 concerns suicide or euthanasia, or includes human sexuality issues
22 dealing with sex education, sexually transmitted diseases,
23 contraception, or sexual orientation and the parent approves of his or
24 her child's participation in the specific class, program, or activity.
25 A school or school district may comply with the notification
26 requirement in this section by notifying the parent at least once per
27 school year of the planned classes, programs, or activities.

28 **Sec. 11.** RCW 28A.230.070 and 1994 c 245 s 7 are each amended to
29 read as follows:

30 (1) The life-threatening dangers of acquired immunodeficiency
31 syndrome (AIDS) and its prevention shall be taught in the public
32 schools of this state. AIDS prevention education shall be limited to
33 the discussion of the life-threatening dangers of the disease, its
34 spread, and prevention. Students shall receive such education at least
35 once each school year beginning no later than the fifth grade.

1 (2) Each district board of directors shall adopt an AIDS prevention
2 education program which is developed in consultation with teachers,
3 administrators, parents, and other community members including, but not
4 limited to, persons from medical, public health, and mental health
5 organizations and agencies so long as the curricula and materials
6 developed for use in the AIDS education program either (a) are the
7 model curricula and resources under subsection (3) of this section, or
8 (b) are developed by the school district and approved for medical
9 accuracy by the office on AIDS established in RCW 70.24.250. If a
10 district elects to use curricula developed by the school district, the
11 district shall submit to the office on AIDS a copy of its curricula and
12 an affidavit of medical accuracy stating that the material in the
13 district-developed curricula has been compared to the model curricula
14 for medical accuracy and that in the opinion of the district the
15 district-developed materials are medically accurate. Upon submission
16 of the affidavit and curricula, the district may use these materials
17 until the approval procedure to be conducted by the office of AIDS has
18 been completed.

19 (3) Model curricula and other resources available from the
20 superintendent of public instruction may be reviewed by the school
21 district board of directors, in addition to materials designed locally,
22 in developing the district's AIDS education program. The model
23 curricula shall be reviewed for medical accuracy by the office on AIDS
24 established in RCW 70.24.250 within the department of social and health
25 services.

26 (4) Each school district shall, at least one month before teaching
27 AIDS prevention education in any classroom, conduct at least one
28 presentation during weekend and evening hours for the parents and
29 guardians of students concerning the curricula and materials that will
30 be used for such education. The parents and guardians shall be
31 notified by the school district of the presentation and that the
32 curricula and materials are available for inspection. ~~((No))~~ A student
33 may ~~((be required to))~~ participate in AIDS prevention education only
34 if the ~~((student's))~~ school has on file a signed confirmation from the
35 parent or guardian ~~((, having attended one of the district~~
36 presentations, objects in writing to the participation), approving of
37 his or her child's participation in the AIDS prevention education.

1 (5) The office of the superintendent of public instruction with the
2 assistance of the office on AIDS shall update AIDS education curriculum
3 material as newly discovered medical facts make it necessary.

4 (6) The curriculum for AIDS prevention education shall be designed
5 to teach students which behaviors place a person dangerously at risk of
6 infection with the human immunodeficiency virus (HIV) and methods to
7 avoid such risk including, at least:

8 (a) The dangers of drug abuse, especially that involving the use of
9 hypodermic needles; and

10 (b) The dangers of sexual intercourse, with or without condoms.

11 (7) The program of AIDS prevention education shall stress the life-
12 threatening dangers of contracting AIDS and shall stress that
13 abstinence from sexual activity is the only certain means for the
14 prevention of the spread or contraction of the AIDS virus through
15 sexual contact. It shall also teach that condoms and other artificial
16 means of birth control are not a certain means of preventing the spread
17 of the AIDS virus and reliance on condoms puts a person at risk for
18 exposure to the disease.

19 **Sec. 12.** RCW 46.20.292 and 1979 c 61 s 8 are each amended to read
20 as follows:

21 The department may suspend, revoke, restrict, or condition any
22 driver's license upon a showing of its records that the licensee has
23 been found by a juvenile court, chief probation officer, or any other
24 duly authorized officer of a juvenile court to have committed any
25 offense or offenses which under Title 46 RCW constitutes grounds for
26 said action. If the department takes an action to suspend, revoke,
27 restrict, or condition the driver's license of a juvenile who is a
28 minor, the department shall give written notice of the action to a
29 parent or legal guardian of the juvenile.

30 NEW SECTION. **Sec. 13.** This act may be known and cited as the
31 restoration of parents' rights act.

32 NEW SECTION. **Sec. 14.** The provisions of this act must be
33 liberally construed to effectuate the policies and purposes of this
34 act. In the event of conflict between this act and any other provision
35 of law, the provisions of this act govern.

1 NEW SECTION. **Sec. 15.** If any provision of this act or its
2 application to any person or circumstance is held invalid, the
3 remainder of the act or the application of the provision to other
4 persons or circumstances is not affected.

--- END ---