
SENATE BILL 5771

State of Washington

63rd Legislature

2013 Regular Session

By Senators Darneille and Pearson

Read first time 02/14/13. Referred to Committee on Human Services & Corrections.

1 AN ACT Relating to development of an evidence-based risk assessment
2 for patients committed for involuntary treatment in Washington state;
3 and creating new sections.

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

5 NEW SECTION. **Sec. 1.** Persons with mental illness and the public
6 are both protected when resources for supportive treatment, custody,
7 and supervision can be deployed where they are most needed to promote
8 recovery and prevent harm. Development of a static risk tool for
9 prediction of the risk of rehospitalization and criminal recidivism,
10 validated for use among Washington state civil and forensic involuntary
11 mental health detainees, later to be supplemented and improved by
12 clinical data as it becomes available, will allow the state to optimize
13 commitment decisions and target community services for the most
14 vulnerable in a fashion that will promote recovery, protect persons
15 with mental illness and the public, avoid unnecessary admissions to
16 jails and emergency rooms, avoid the creation of new crime victims, and
17 be cost-effective for Washington taxpayers.

1 NEW SECTION. **Sec. 2.** The Washington state institute for public
2 policy shall develop a standardized static risk assessment instrument
3 that assesses risk to the community and, if feasible, risk of
4 rehospitalization for adults involuntarily committed for civil
5 treatment and forensic mental health evaluations. In developing the
6 instrument, the institute shall work with psychologists employed by the
7 department of social and health services and other experts in the
8 field. The instrument should be cross-validated for relevant
9 populations within Washington state: Criminal defendants with mental
10 illness referred for chapter 10.77 RCW evaluations, civilly committed
11 respondents under chapter 71.05 RCW, and persons acquitted by reason of
12 insanity. In addition, the instrument should be designed to be used in
13 conjunction with clinical evaluations that include information
14 regarding psychosocial history, mental health status, and other dynamic
15 clinical variables that may add to predictive validity. The Washington
16 state institute for public policy shall prepare an initial report on
17 the static instrument by December 2013, with a final report to be
18 completed by December 2015 which includes a prospective study of the
19 potential to improve the static instrument by supplementing it with
20 dynamic clinical variables by 2017.

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