



Designated Crisis Responders can be reached at 1-800-576-7764 on a 24-hour, 7-day a week basis.

If a family member has been involuntarily detained, you may have some questions about Washington State's Involuntary Treatment Act (ITA). This is a simplified guide through the involuntary commitment process to help you understand the system, the patient's rights, and your involvement.

Initial Evaluation: Designated Crisis Responder (DCRs) are called upon to evaluate individuals who are exhibiting signs of an acute mental disorder and allegedly pose as an imminent danger to self, others or property or are gravely disabled (unable to care for their basic needs). The referral can be initiated by anyone who has first-hand knowledge of the person and the presenting problem. The DCR will evaluate an individual to determine if legal criteria for commitment as a result of a mental disorder are met. The DCR will arrange for or refer to voluntary treatment if it seems more appropriate.

Designated Crisis Responder: In Pierce County, a Designated Crisis Responder is a person who has an advanced degree in a mental health related field, experience working in the field, and who has been designated by Pierce County Behavioral Health Organization as having the authority to authorize 120-hour detentions.

Legal Definition of "Mental Disorder": Any organic, mental, or emotional impairment that has substantial adverse effects upon an individual's cognitive (thought) or volitional (action) behavior.

Criteria for Commitment: The person must have a mental disorder as defined above and, as a result of the mental disorder...

... presents a danger to self, others, or property

and/or is unable to provide for basic needs of safety or health (gravely disabled).

Initial Detention: Individuals assessed as meeting the criteria for commitment can be detained at a psychiatric evaluation and treatment facility, up to 120 hours (excluding weekends and holidays). In Pierce County, we have five Evaluation and Treatment Facilities (E&Ts) where detained individuals are referred for treatment. Those facilities are: Telecare, Greater Lakes Recovery Center, Recovery Innovations, Metropolitan Development Council (MDC), and Wellfound. At times, when the evaluation and treatment facilities are full, individuals are placed on a 120-hour hold in acute hospitals throughout Pierce County. In the case of detention of a minor (under 18 years of age), the DCR is to notify parents as soon as possible.

Individual Rights: The ITA provides strong guarantees of individual rights. A person is not presumed incompetent as a result of being involuntarily hospitalized. Strict confidentiality is maintained in all proceedings.

Evaluation: A psychiatrist or advanced registered nurse practitioner (ARNP) will evaluate the patient within 24 hours of the detention. They will also determine if the individual requires further involuntary treatment. Within 120 hours it will be determined whether a probable cause hearing for up to 14 days of involuntary treatment will be held. Per direction of the psychiatrist or ARNP, a mental health professional will complete an additional evaluation. A mental health professional, usually a psychologist, social worker and/or a Designated Crisis Responder will make independent assessments to determine if the patient meets the criteria for commitment as the result of a mental disorder.

Legal Counsel: Each patient has the right to legal counsel and is assigned a public defender who will meet with him/her prior to court and represent his/her wishes at the hearing. The public defender has the right to cross-examine all witnesses.

Court Appearance: If it is felt that involuntary criteria are met and the patient needs further inpatient care, beyond the 120-hour period, and she/he is still unwilling to accept treatment voluntarily, the DCR will file another petition and a Probable Cause Hearing will be scheduled. The purpose of the Probable Cause Hearing is to allow the Judge to determine whether there is adequate information of both a mental disorder and of dangerousness to self or others or property and/or grave disability to allow for an order for up to 14 days of additional involuntary commitment. Family members may be contacted to provide testimony at the Probable Cause Hearing. Probable Cause Hearings occur at Western State Hospital court (9601 Steilacoom Blvd, Lakewood, WA)

Five Possible Outcomes of a Probable Cause Hearing:

- The judge can dismiss the case and release the patient.
- The patient is judged committable and can be held for short-term commitment (14 days) at a psychiatric treatment facility.
- The judge can accept the patient's agreement to enter treatment voluntarily.
- The person can be placed on a court ordered release to the community.
- Occasionally the case may be "continued" as requested by the Department of Assigned Counsel.

Additional Commitment: If it is determined the patient is in need of further treatment beyond the 14-day period, a 90-day petition will be filed with the court. The patient will receive a copy of a 90-day petition filed and the scheduled hearing date. At this hearing, the patient can be ordered by the court for further inpatient (restrictive) or outpatient (less-restrictive) treatment.

Less Restrictive Treatment: Less restrictive measures mean that the person must enter outpatient treatment as the court order dictates. Most often the order will specify that the person must participate in recommended treatment and take prescribed medication. The court may also state where she/he has to live – for instance, at home or in a residential facility. If the person on a less restrictive court order does not follow through, a DCR may file a petition for revocation which returns the individual to the hospital for up to five days pending a revocation hearing.

Long-Term Commitment: If the patient is committed to 90 days of inpatient treatment, she/he is put on a wait list to move to Western State Hospital, or if the individual is a juvenile, to Fairfax Hospital.

Elopement: Involuntary patients do not have the right to leave the facility unless they are discharged by the physician or ARNP. Each facility has a protocol on how to handle elopements.

Confidentiality Issues: The law allows for release of information concerning involuntary patients between qualified professionals.

Financial Responsibility: The patient and her/his parent/legal guardian are responsible for the cost of hospitalization. Individuals will be billed for involuntary treatment and ambulance transportation.

Additional Questions: Additional questions can be directed to the Social Worker at the facility where the patient is being held, or to the DCR office at 1-800-576-7764.