

ADOPTED  
Thursday, May 25, 2017

**In Response to Second Substitute House Bill (2SHB) 1448**  
**Chapter 158, Laws of 2016**  
**64<sup>th</sup> Legislature**  
**2016 Regular Session**

**WASPC Model Policy – Referring a Person Who is the Subject of a Report of Threatened or Attempted Suicide to a Mental Health Agency**

**Criteria**

Referrals to a mental health agency pursuant to this model policy should be limited to instances where:

- A person is the subject of a report of threatened or attempted suicide; and
- The responding officer(s) believe, based on their training and experience, that the person could benefit from mental health services;
- The person does not consent to voluntary mental health services;
- The person is not involuntarily committed or involuntarily transported for a mental health evaluation under RCW 71.05; and
- The person is not being transported to a hospital or jail.

**Procedure**

Upon responding to a report of threatened or attempted suicide where all of the aforementioned criteria are met, the primary officer is encouraged to refer the person to [INSERT LOCAL MENTAL HEALTH AGENCY NAME AND CONTACT INFORMATION].

Referrals should be made via written documentation, and should be noted/coded in a way to allow the law enforcement agency to identify specific reports where a referral was made/is being made (similar to how DV-related incidents are noted/coded). Additionally, referrals should include sufficient narrative for the mental health agency to understand the nature of the call, the behavior of the individual, and prioritize their level of response.

Referrals by written documentation can be supplemented with a phone call or dispatch referral to [INSERT LOCAL MENTAL HEALTH AGENCY NAME AND CONTACT INFORMATION]. Phone calls or dispatch referrals should not be a substitute for written documentation referrals. Phone calls or dispatch referrals should be noted in the written documentation, including the date and time of the referral, and to whom the officer spoke.

Referrals made by written documentation only, without a phone call or dispatch referral to [INSERT LOCAL MENTAL HEALTH AGENCY NAME], should be processed in as expeditious a manner as practicable. *RCW 71.05.458 requires the mental health agency to attempt to contact the person as soon as possible, but not more than 24 hours (excluding holidays and weekends) after receiving the referral from law enforcement, to determine whether mental health intervention is necessary.*

**Best Practice Option:** *Where available, law enforcement agencies are encouraged to ask their local mental health agency to produce reasonably-sized paper handouts available to responding law enforcement officers to leave with a person in crisis that provides the person with information on mental health services available in the area.*

**Liability**

RCW 71.05.120(2): Peace officers and their employing agencies are not liable for the referral of a person, or the failure to refer a person, to a mental health agency pursuant to a policy adopted pursuant to section 3 of this act (HB 1448, Chapter 158, Laws of 2016) if such action or inaction is taken in good faith and without gross negligence.

**NOTE**

Law enforcement agencies are not required to adopt this model policy. However, by July 1, 2017, all general authority Washington law enforcement agencies must adopt a policy establishing criteria and procedures for a law enforcement officer to refer a person to a mental health agency after receiving a report of threatened or attempted suicide (RCW 71.05.457).

**71.05.455**

**Law enforcement referrals to mental health agencies—Reports of threatened or attempted suicide—Model policy.**

When funded, the Washington association of sheriffs and police chiefs, in consultation with the criminal justice training commission, must develop and adopt a model policy for use by law enforcement agencies relating to a law enforcement officer's referral of a person to a mental health agency after receiving a report of threatened or attempted suicide. The model policy must complement the criminal justice training commission's crisis intervention training curriculum.

[ [2016 c 158 § 2.](#)]

**NOTES:**

**Finding—Intent—2016 c 158:** "The legislature finds that law enforcement officers may respond to situations in which an individual has threatened harm to himself or herself, but that individual does not meet the criteria to be taken into custody for an evaluation under the involuntary treatment act. In these situations, officers are encouraged to facilitate contact between the individual and a mental health professional in order to protect the individual and the community. While the legislature acknowledges that some law enforcement officers receive mental health training, law enforcement officers are not mental health professionals. It is the intent of the legislature that mental health incidents are addressed by mental health professionals." [ [2016 c 158 § 1.](#)]

---

**71.05.457**

**Law enforcement referrals to mental health agencies—Reports of threatened or attempted suicide—General authority law enforcement policy.**

By July 1, 2017, all general authority Washington law enforcement agencies must adopt a policy establishing criteria and procedures for a law enforcement officer to refer a person to a mental health agency after receiving a report of threatened or attempted suicide.

[ [2016 c 158 § 3.](#)]

**NOTES:**

**Finding—Intent—2016 c 158:** See note following RCW [71.05.455](#).