

INVOLUNTARY COMMITMENT – CHEMICAL DEPENDENCY

Who may be involuntarily committed for chemical dependency?

Persons who are incapacitated¹ as a result of chemical dependency may be involuntarily committed.² A person is deemed incapacitated as a result of chemical dependency if, as a result of the use of alcohol or other psychoactive chemicals, the person is in danger of serious physical because of a failure to provide for his or her essential needs, health and safety, demonstrates severe deterioration in his or her routine functioning due to escalating loss of cognition or control over his or her actions and is not receiving treatment, or the person presents a likelihood of serious harm to self, others, or property.³

How is the involuntary commitment process initiated for persons who, as a result of chemical dependency, are incapacitated?

The involuntary commitment process for persons incapacitated by chemical dependency is usually initiated by the filing of a petition for commitment with the superior court by a county-designated chemical dependency specialist (CDS).⁴ When the CDS receives information that a person is incapacitated as a result of chemical dependency, the CDS investigates and evaluates the facts.⁵ If the CDS determines that a person is incapacitated as a result of chemical dependency, the CDS may file a petition for commitment.⁶

May a physician detain a person who is brought into an evaluation and treatment facility or hospital emergency room who appears to be incapacitated as a result of chemical dependency?

Unlike the statutes for involuntary commitment for mental disorders, the statutes governing involuntary commitment for chemical dependency do not specifically address whether a physician may detain a person to enable the county-designated CDS to evaluate the person. However, the petition alleging that chemical dependency treatment is appropriate must be accompanied by a certificate of a licensed physician who has examined the person within five days before submission of the petition.⁷ If the person whose commitment is sought has refused to submit to a medical examination the fact of refusal shall be alleged in the petition.⁸ The certificate is required to set forth the licensed physician's findings in support of the allegations of the petition.⁹ A physician employed by the petitioning program or the department is eligible to be

¹ RCW 70.96A.020(14).

² RCW 70.96A.140.

³ RCW 70.96A.020(12), (14).

⁴ RCW 70.96A.140(1).

⁵ RCW 70.96A.140(1); RCW 70.96A.037(2).

⁶ RCW 70.96A.140(1).

⁷ RCW 70.96A.140(2).

⁸ *Id.*

⁹ *Id.*

the certifying physician.¹⁰ The statutes governing involuntary commitment for chemical dependency do, however, permit a peace officer or staff designated by the county to detain and take into protective custody a person who appears to be incapacitated or gravely disabled by alcohol or other drugs and who is in a public place or who has threatened, attempted, or inflicted physical harm on himself, herself, or another.¹¹ Within eight hours, the individual must be taken to an approved treatment program for treatment or to an emergency medical service customarily used for incapacitated persons.¹²

May the parent of a minor initiate inpatient chemical dependency treatment of the minor without the minor's consent?

Yes. A parent may bring, or authorize the bringing of, his or her minor child, even one who is age 13 or older, to a certified chemical dependency treatment program and request that an assessment be conducted by a professional person to determine whether the minor is chemically dependent and in need of inpatient treatment.¹³ Consent of the minor is not required for admission, evaluation, and treatment if the parent brings the minor to the program¹⁴.

An appropriately trained professional person may evaluate whether the minor is chemically dependent.¹⁵ Such evaluation must be completed within 24 hours of the time the minor was brought to the program unless the professional person determines that the minor's condition necessitates additional time for evaluation.¹⁶ In no event may the minor be held longer than 72 hours for evaluation.¹⁷

If, in the judgment of the professional person, it is determined that it is a medical necessity for the minor to receive inpatient treatment, the minor may be held for treatment.¹⁸ Within 24 hours of completion of the evaluation, the professional person must notify DSHS if the child is held for treatment and of the date of admission.¹⁹

No provider is obligated to provide treatment to a minor brought to a chemical dependency treatment program by a parent. Nor may a provider admit a minor to treatment under such circumstances unless it is medically necessary.²⁰

¹⁰ RCW 70.96A.140(2).

¹¹ RCW 70.96A.120(2).

¹² *Id.*

¹³ RCW 70.96A.245(1)

¹⁴ RCW 70.96A.245(2).

¹⁵ RCW 70.96A.245(3).

¹⁶ *Id.*

¹⁷ *Id.*

¹⁸ *Id.*

¹⁹ *Id.*

²⁰ RCW 70.96A.245(4).

No minor receiving inpatient treatment under such circumstances may be discharged from the program based solely on his or her request,²¹ but must be discharged immediately upon written request of the parent.²²

Does the state provide chemical dependency screening services for children?

Yes. The Department of Social and Health Services contracts for chemical dependency specialist services at each office of children and family services.²³ The specialist conducts on-site chemical dependency screening and assessments, among other designated duties.²⁴

²¹ RCW 70.96A.245(5).

²² RCW 70.96A.250(4).

²³ RCW 70.96A.037(1).

²⁴ RCW 70.96A.037(2).