

Children's Mental Health

A Statutory Perspective

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[Children's Mental Health]

- Policy identified in the Statutes addressing Children's Mental Health.
- Publicly funded treatment resources.
- Access to those services.

Policy Statement (RCW 71.34.010)

- Assure appropriate treatment.
 - Prevention, Early Intervention, Self-Directed Care, Parent-Directed Care and Involuntary Treatment.
- Encourage voluntary treatment whenever clinically appropriate.
- Assure ability of parents to exercise reasonable, compassionate care and control of their minor children.

[Services Required (74.14A RCW)]

- High priority to serve and avoid out-of-home placement for the following children:
 - Emotionally disturbed and mentally ill children, potentially dependent children and families in conflict.
 - Juvenile offenders.
 - Children in need of long-term care and assistance.
- Establish blended funding projects.

Priority Populations Identified

(RCW 71.24.035)

- The state has established priorities for treatment of the individuals with mental disorders.
 - The acutely mentally ill;
 - Chronically mentally ill adults and severely emotionally disturbed children;
 - The seriously disturbed.

[Coordination Required (71.36 RCW)]

- Plan for early periodic screening, diagnosis and treatment services.
- Local planning efforts to include DSHS.
 - Juvenile courts
 - Public Health Department
 - School Districts
 - Educational Service Districts
 - Head Start or Early Education and Assistance Programs
 - Community Action Agencies
 - Children's Service Providers
 - Parents of children in need of mental health services
- DSHS to work with OSPI.

Publicly Funded Treatment Resources

- **DSHS Divisions providing MH treatment to children.**
 - Children's Administration (CA).
 - Juvenile Rehabilitation Administration (JRA).
 - Health and Recovery Services Administration (HRSA).
 - Division of Alcohol and Substance Abuse (DASA).
 - Medical Assistance Administration (MAA).
 - Mental Health Division (MHD).

Programs Operated or Funded by DSHS

Provider	Statutory Authority	Treatment
CA	Chapter 74.13 RCW	Residential for Foster Children
JRA	Chapter 13.40 RCW	Residential for Adjudicated Offenders
HRSA – DASA	Chapter 70.96A RCW	Limited mental health services for adolescents in residential treatment
HRSA - MAA	Chapter 74.09A RCW	Medical and pharmacy services for all Medicaid enrollees for priority populations
HRSA - MHD	Chapters 71.24 & 71.34 RCW	Outpatient, Short-Term and Long Term Inpatient

Children's Administration

Children's Residential Placements

- Foster Family Homes provide 24-hour care to children who need temporary out-of home placement due to child abuse, neglect, or family conflict.
- Behavioral Rehabilitation Services are intended for children with emotional and/or behavioral needs that exceed the service or supervision capacity of regular foster care.

Children's Administration

Children's Residential Placements

Type	Scale
Behavioral Rehabilitative Services (BRS)	~1016 Children (Sept 2006)
Children's Hospital Alternative Program (CHAP)	~60 Children served during Sept. 2006 (not bed days)
Totals	~1016 Children (Sept. 2006) 40% in group care or staffed residential care 50% in therapeutic foster care 10% in home (own or relative placement)

Services for children in out-of-home placements or dependencies

Juvenile Rehabilitation Administration (JRA) Mental Health Services

- JRA serves juvenile offenders who have been adjudicated as committing an offense and have received a lengthy sentence of incarceration.
- Youth committed to JRA are usually deep-end youth that have committed a serious offense or have extensive criminal history.

Juvenile Rehabilitation Administration (JRA) Mental Health Services

- Two JRA institutions, Maple Lane and Echo Glen, specialize in treating the JRA mental health target population and offer enhanced staffing for youth with acute and serious mental health needs.
- JRA is recognized as a leader in its use of EBP treatment models.

Juvenile Rehabilitation Administration (JRA) Mental Health Services

- JRA provides mental health coordinators in each institution and DSHS region.
 - The coordinators assist juveniles in transitioning into the community and connecting the juveniles with mental health treatment through the local RSN network.

Division of Alcohol and Substance Abuse (DASA) Mental Health Services

- DASA provides residential treatment services to:
 - Adolescents,
 - Pregnant & parenting girls,
 - Young children of women in perinatal programs,
- DASA provides limited onsite mental health treatment for children and adolescents with co-occurring disorders.

Mental Health Division (MHD)

Short-Term Inpatient Treatment

- Short-Term Treatment is up to 14 days. (RCW 71.34.730).
- Inpatient Treatment refers to twenty-four hour a day mental health care provided at a hospital or a residential treatment facility certified by the Department as an evaluation and treatment facility for minors. (RCW 71.34.020).

Short-Term Inpatient Bed Availability for Publicly Funded Minors

Provider	Location	Number of beds
Children's Hospital	Seattle	20
<i>Fairfax Hospital*</i>	<i>Kirkland</i>	45
Kitsap Youth Inpatient Unit	Bremerton	2
Lourdes Counseling	Tri-Cities	10
Sacred Heart	Spokane	24
West Seattle Psychiatric Hospital	Seattle	2
	STATEWIDE TOTAL	103 Beds

**Fairfax Hospital has been negotiating with DSHS to determine whether they can continue providing services based on the criteria set by their Board.*

Mental Health Division (MHD) **Children's Long-Term Inpatient Care (CLIP)**

- Long-Term Treatment is up to 180 days. (RCW 71.34.750).
- Inpatient Treatment refers to twenty-four hour a day mental health care provided at a psychiatric hospital or a residential treatment facility (RCW 71.34.020).

Mental Health Division (MHD) Washington CLIP Beds

Provider	Location	Beds
(CSTC) Child Study & Treatment Center	Steilacoom (WSH)	47
McGraw	Seattle	19
Tamarack*	Spokane	13
Pearl Street	Tacoma	12
	STATEWIDE TOTAL	91

Tamarack also has three private pay beds.

Mental Health Division (MHD)

Access to MH Treatment

- Three statutory options to access treatment:
 - Minor-Initiated
 - RCW 71.34.500-.530,
 - Parent-Initiated
 - RCW 71.34.600-.660,
 - Involuntary Treatment (State-Initiated)
 - RCW 71.34.700-.795.

Mental Health Division (MHD)

Minor-initiated Treatment

- A minor 13 years or older may consent to outpatient or inpatient treatment. Parental consent is not required.
 - RCW 71.34.500 & RCW 71.34.530
- Parents must be given notice when a minor child is admitted to an inpatient facility.
 - RCW 71.34.520
- A minor admitted voluntarily may give notice to leave at any time and will be discharged.
 - RCW 71.34.520

Mental Health Division (MHD) Parent-Initiated Treatment

- A parent may have his or her minor child evaluated and treated for a mental disorder if it is determined to be medically necessary. The consent of the minor is not required.
 - RCW 71.34.600 & RCW 71.34.650
- The Department of Social and Health Services will conduct an independent review of the decision to hold a minor for inpatient treatment.
 - RCW 71.34.610

Mental Health Division (MHD) Parent-Initiated Treatment (cont.)

- The minor may seek court review of the decision to hold the child for inpatient treatment.
 - RCW 71.34.620
- The minor may be held for up to 30 days. If a longer period of inpatient treatment is needed, the minor can only be held through an involuntary commitment proceeding brought by the state.
 - RCW 71.34.630

Mental Health Division (MHD) Involuntary Treatment (State-Initiated)

- A minor **over the age of 13** may be evaluated at an Evaluation & Treatment Facility or Emergency room and held for up to 12 hours if it is determined that the minor suffers from a mental disorder and is in need of inpatient treatment. Consent of the minor is not required.
 - RCW 71.34.700

[Mental Health Division (MHD) Involuntary Treatment (State-Initiated)]

- If a designated mental health professional (DMHP) determines that the minor is gravely disabled or presents a likelihood of serious harm as a result of a mental disorder the minor may be held for up to 72 hours.
 - RCW 71.34.710

[Mental Health Division (MHD) Involuntary Treatment (State-Initiated)]

- If further treatment is needed a court hearing must be held. The minor must be advised of his or her rights and an attorney is provided.
 - RCW 71.34.710
- The minor may be committed by the court for 14 days if the court finds sufficient evidence to warrant the commitment.
 - RCW 71.34.730 & 17.34.740

Mental Health Division (MHD) Involuntary Treatment (State-Initiated)

- If further treatment is needed, the minor may be committed by the court for an additional 180 days if the court finds the criteria for commitment have been met.
 - RCW 71.34.750
- Successive commitments of 180 days may be ordered by the court under the same procedure as the original 180 day commitment.
 - RCW 71.34.750

[Questions?]

Thank you for your time and attention.

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