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NEW SECTION. Sec. 2. Section 28B.20.380, chapter 223, Laws of 1969 ex. sess. and RCW 28B.20.380 are each repealed.

Passed the House April 15, 1974. Passed the Senate April 23, 1974. Approved by the Governor May 5, 1974. Filed in Office of Secretary of State May 5, 1974.

> CHAPTER 175 [Substitute House Bill No. 1504] UNIFORM ALCOHOLISM AND INTOXICATION TREATMENT ACT

AN ACT Relating to the uniform alcoholism and intoxication treatment act; amending section 12, chapter 122, Laws of 1972 ex. sess. and RCW 70.96A.120; amending section 14, chapter 122, Laws of 1972 ex. sess. and RCW 70.96A.140; and repealing section 13, chapter 122, Laws of 1972 ex. sess. and RCW 70.96A.130.

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

Section 1. Section 12, chapter 122, Laws of 1972 ex. sess. and RCW 70.96A.120 are each amended to read as follows:

(1) An intoxicated person may come voluntarily to an approved treatment facility for ((emergency)) treatment. A person who appears to be intoxicated in a public place and to be in need of help, if he consents to the proffered help, may be assisted to his home, an approved treatment facility or other health facility.

Except for a person who may be apprehended for possible (2) violation of laws <u>not relating to alcoholism or intoxication and</u> except for a person who may be apprehended for possible violation of <u>laws</u> relating to driving or being in physical control of a vehicle while intoxicated and except for a person who may wish to avail himself of the provisions of RCW 46.20.308, a person who appears to be incapacitated by alcohol and who is in a public place or who has threatened, attempted, or inflicted physical harm on another, shall be taken into protective custody by the police or the emergency service patrol and ((forthwith)) as soon as practicable, but in no event beyond eight hours brought to an approved treatment facility for ((emergency)) treatment. If no approved treatment facility is readily available he shall be taken to an emergency medical service customarily used for incapacitated persons. The police or the emergency service patrol, in detaining the person and in taking him to an approved treatment facility, is taking him into protective custody and shall make every reasonable effort to protect his health and safety. In taking the person into protective custody, the detaining officer or member of an emergency patrol may take

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reasonable steps including reasonable force if necessary to protect himself. A taking into protective custody under this section is not an arrest. No entry or other record shall be made to indicate that the person has been arrested or charged with a crime.

(3) A person who comes voluntarily or is brought to an approved treatment facility shall be examined by a qualified person ((under the supervision of a dicensed physician as soon as possible)). He may then be admitted as a patient or referred to another health facility, which provides emergency medical treatment, where it appears that such treatment may be necessary. The referring approved treatment facility shall arrange for his transportation.

(4) A person who ((by medical examination)) is found to be incapacitated by alcohol at the time of his admission or to have become incapacitated at any time after his admission, may not be detained at the facility (a) once he is no longer incapacitated by alcohol, and (b) if he remains incapacitated by alcohol for more than forty-eight hours after admission as a patient, unless ((he is committed under REW 70:96A:130)) a petition is filed under RCW 70:96A:140, as now or hereafter amended. A person may consent to remain in the facility as long as the physician in charge believes appropriate.

(5) A person who is not admitted to an approved treatment facility, is not referred to another health facility, and has no funds, may be taken to his home, if any. If he has no home, the approved treatment facility shall assist him in obtaining shelter.

(6) If a patient is admitted to an approved treatment facility, his family or next of kin shall be notified as promptly as possible. If an adult patient who is not incapacitated requests that there be no notification, his request shall be respected.

(7) The police or members of the emergency service, who in good faith act in compliance with this chapter are performing in the course of their official duty and are not criminally or civilly liable therefor.

(8) If the person in charge of the approved treatment facility determines it is for the patient's benefit, the patient shall be encouraged to agree to further diagnosis and appropriate voluntary treatment.

Sec. 2. Section 14, chapter 122, Laws of 1972 ex. sess. and RCW 70.96A.140 are each amended to read as follows:

(1) ((A person may be committed for treatment in an approved treatment facility by the superior court or district court upon the petition of his spouse or guardian; a relative; the certifying physician; or the administrator in charge of any approved treatment facility;)) When the person in charge of a treatment facility, or

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his designee, receives information alleging that a person is incapacitated as a result of alcoholism, the person in charge, or his designee, after investigation and evaluation of the specific facts alleged and of the reliability and credibility of the information. may file a petition for commitment of such person with the superior court or district court. The petition shall allege that the person is an alcoholic who ((habitually lacks self-control as to the use of alcoholic beverages and that he is incapacitated by alcohol)) is incapacitated by alcohol. or that the person is an alcoholic who has threatened, attempted, or inflicted physical harm on another and is likely to inflict physical harm on another unless committed. A refusal to undergo treatment does not constitute evidence of lack of judgment as to the need for treatment. The petition shall be accompanied by a certificate of a licensed physician who has examined the person within two days before submission of the petition, unless the person whose commitment is sought has refused to submit to a medical examination, in which case the fact of refusal shall be alleged in the petition. The certificate shall set forth the physician's findings in support of the allegations of the petition. A physician employed by the ((admitting)) petitioning facility or the department is not eligible to be the certifying physician.

(2) Upon filing the petition, the court shall fix a date for a hearing no less than five and no more than ten days after the date the petition was filed unless the person petitioned against is presently being detained by the facility, pursuant to RCW 70.96A.120, as now or hereafter amended, in which case the hearing shall be held within forty-eight hours of the filing of the petition: PROVIDED, HOWEVER, That the above specified forty-eight hours shall be computed by including Saturdays but excluding Sundays and holidays: PROVIDED FURTHER, That, the court may, upon motion of the person whose commitment is sought, or upon motion of petitioner with written permission of the person whose commitment is sought, or his counsel and, upon good cause shown, extend the date for the hearing. A copy of the petition and of the notice of the hearing, including the date fixed by the court, shall be served ((on the petitioner;)) by <u>the</u> treatment facility on the person whose commitment is sought, his next of kin ((other than the petitioner)), a parent or his legal guardian if he is a minor, ((the administrator in charge of the approved treatment facility to which he has been committed for emergency eare;)) and any other person the court believes advisable. A copy of the petition and certificate shall be delivered to each person notified.

(3) At the hearing the court shall hear all relevant testimony, including, if possible, the testimony of at least one

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licensed physician who has examined the person whose commitment is sought. The person shall be present unless the court believes that his presence is likely to be injurious to him; in this event the court may deem it appropriate to appoint a guardian ad litem to represent him throughout the proceeding. If deemed advisable, the court may examine the person out of courtroom. If the person has refused to be examined by a licensed physician, he shall be given an opportunity to be examined by a court appointed licensed physician. If he refuses and there is sufficient evidence to believe that the allegations of the petition are true, or if the court believes that more medical evidence is necessary, the court may make a temporary order committing him to the department for a period of not more than five days for purposes of a diagnostic examination.

(4) If after hearing all relevant evidence, including the results of any diagnostic examination, the court finds that grounds for involuntary commitment have been established by clear, coqent, and convincing proof, it shall make an order of commitment to an approved treatment facility. It shall not order commitment of a person unless it determines that an approved treatment facility is able to provide adequate and appropriate treatment for him and the treatment is likely to be beneficial.

(5) A person committed under this section shall remain in the facility for treatment for a period of thirty days unless sooner discharged. At the end of the thirty day period, he shall be discharged automatically unless the facility, before expiration of the period, ((obtains a court order)) <u>files a petition</u> for his recommitment upon the grounds set forth in subsection (1) of this section for a further period of ninety days unless sooner discharged. If a person has been committed because he is an alcoholic likely to inflict physical harm on another, the facility shall apply for recommitment if after examination it is determined that the likelihood still exists.

(6) A person recommitted under subsection (5) of this section who has not been discharged by the facility before the end of the ninety day period shall be discharged at the expiration of that period unless the facility, before expiration of the period, obtains a court order on the grounds set forth in subsection (1) of this section for recommitment for a further period not to exceed ninety days. If a person has been committed because he is an alcoholic likely to inflict physical harm on another, the facility shall apply for recommitment if after examination it is determined that the likelihood still exists. Only two recommitment orders under subsections (5) and (6) of this section are permitted.

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(7) Upon the filing of a petition for recommitment under subsections .(5) or (6) of this section, the court shall fix a date for hearing no less than five and no more than ten days after the date the petition was filed: PROVIDED, That, the court may, upon motion of the person whose commitment is sought and upon good cause shown, extend the date for the hearing. A copy of the petition and of the notice of hearing, including the date fixed by the court, shall be served ((on the petitioner;)) by the treatment facility on the person whose commitment is sought, his next of kin ((other than the petitioner)), the original petitioner under subsection (1) of this section if different from the petitioner for recommitment, one of his parents or his legal guardian if he is a minor, and his attorney and any other person the court believes advisable. At the hearing the court shall proceed as provided in subsection (3) of this section.

(8) The facility shall provide for adequate and appropriate treatment of a person committed to its custody. A person committed under this section may be transferred from one approved public treatment facility to another if transfer is medically advisable.

(9) A person committed to the custody of a facility for treatment shall be discharged at any time before the end of the period for which he has been committed and he shall be discharged by order of the court if either of the following conditions are met:

(a) In case of an alcoholic committed on the grounds of likelihood of infliction of physical harm upon another, that he is no longer an alcoholic or the likelihood no longer exists; or further treatment will not be likely to bring about significant improvement in the person's condition, or treatment is no longer adequate or appropriate.

(b) In case of an alcoholic committed on the grounds of the need of treatment and incapacity, that the incapacity no longer exists.

(10) The court shall inform the person whose commitment or recommitment is sought of his right to contest the application, be represented by counsel at every stage of any proceedings relating to his commitment and recommitment, and have counsel appointed by the court or provided by the court, if he wants the assistance of counsel and is unable to obtain counsel. If the court believes that the person needs the assistance of counsel, the court shall require, by appointment if necessary, counsel for him regardless of his wishes. The person shall, if he is financially able, bear the costs of such legal service; otherwise such legal service shall be at public expense. The person whose commitment or recommitment is sought shall be informed of his right to be examined by a licensed physician of WASHINGTON LAWS, 1974 1st Ex.Sess. (43rd Legis.3rd Ex.S.) \_\_\_\_Ch. 176

his choice. If the person is unable to obtain a licensed physician and requests examination by a physician, the court shall employ a licensed physician.

(11) A person committed under this chapter may at any time seek to be discharged from commitment by writ of habeas corpus in a court of competent jurisdiction.

(12) The venue for proceedings under this section is the place in which person to be committed resides or is present.

NEW SECTION. Sec. 3. Section 13, chapter 122, Laws of 1972 ex. sess. and RCW 70.96A.130 are each hereby repealed.

> Passed the House April 18, 1974. Passed the Senate April 23, 1974. Approved by the Governor May 5, 1974. Filed in Office of Secretary of State May 5, 1974.

# CHAPTER 176 [Engrossed Substitute Senate Bill No. 3146] WORKS OF ART FOR PUBLIC BUILDINGS

AN ACT Relating to public buildings; adding a new section to chapter 43.17 RCW; adding a new section to chapter 43.19 RCW; adding a new section to chapter 28B.10 RCW; adding a new section to chapter 28A.58 RCW; and creating a new section.

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

NEW SECTION. Section 1. The legislature recognizes this state's responsibility to foster culture and the arts and its interest in the viable development of her artists and craftsmen by the establishment of the Washington state arts commission. The legislature declares it to be a policy of this state that a portion of appropriations for capital expenditures be set aside for the acquisition of works of art to be used for public buildings.

<u>NEW SECTION.</u> Sec. 2. There is added to chapter 43.17 RCW a new section to read as follows:

All state agencies or departments shall expend, as a nondeductible item, out of any moneys appropriated for the original construction of any state building, an amount of one-half of one percent of the appropriation for the acquisition of works of art which may be an integral part of the structure, attached to the structure, detached within or outside of the structure, or can be exhibited by the agency in other public facilities: PROVIDED, That V if the accepted construction bid is under ninety percent of the appropriation, the expenditure for the works of art as provided herein shall be reduced pro tanto. In case the amount shall not be