## CHAPTER 157

[Engrossed Substitute House Bill No. 1125]
CHILDREN'S MENTAL HEALTH SERVICES—LEGISLATIVE STUDY

AN ACT Relating to community mental health services; creating new sections; and declaring an emergency.

Be it enacted by the Legislature of the State of Washington:

<u>NEW SECTION.</u> Sec. 1. (1) The house social and health services committee, senate social and health services committee, senate judiciary committee, and the legislative budget committee shall conduct a study of children's mental health services in a manner deemed efficient and appropriate.

- (2) The objectives of the study shall be as follows:
- (a) To perform a program, management, and fiscal review of existing publicly funded children's mental health and related services;
- (b) To determine the extent to which the following chapters of RCW have been implemented, with particular emphasis on: Continuum of care; prevention; early intervention; and diversion from involuntary commitment, protective services, institutions, out-of-home placements; and reduction of family break-ups Title 13 RCW, chapters 71.24, 74.13, 74.14A, 71.05, 74.15, and 26.44 RCW;
- (c) To determine the need for and type of children's mental health and related services focusing on categories enumerated in subsection (2)(b) of this section;
- (d) To analyze current methods of delivery of children's mental health and related services;
- (e) To submit to the legislature by December 15, 1984 a report including budgetary and statutory recommendations;
- (f) To assess the degree to which the proposed 1985-87 state biennial budget places a priority on the service categories listed in subsection (2)(b) of this section.

NEW SECTION. Sec. 2. To assist the legislature in this study, the department of social and health services shall submit to the study committees, no later than June 1, 1984, a summary of the most current needs assessment for children's mental health services performed by counties pursuant to RCW 71.24.045 and any additional data that supports the children's portion of the department's current or proposed mental health plans. The department shall also submit any additional information that it has compiled since January 1, 1979 on the needs for children's mental health and related service.

NEW SECTION. Sec. 3. In conducting the study, the committee shall seek the participation of children's mental health service providers; related

service providers; client advocates; local governments; the department of social and health services; the office of financial management; and the Washington state institute on public policy.

<u>NEW SECTION</u>. Sec. 4. This act is necessary for the immediate preservation of the public peace, health, and safety, the support of the state government and its existing public institutions, and shall take effect immediately.

Passed the House February 29, 1984. Passed the Senate February 26, 1984. Approved by the Governor March 8, 1984. Filed in Office of Secretary of State March 8, 1984.

## CHAPTER 158

[Engrossed Second Substitute House Bill No. 1137] RESPITE CARE SERVICES

AN ACT Relating to respite care services; creating new sections; making an appropriation; and declaring an emergency.

Be it enacted by the Legislature of the State of Washington:

NEW SECTION. Sec. 1. The legislature recognizes that:

- (1) Most care provided for functionally disabled adults is delivered by family members or friends who are not compensated for their services. Family involvement is a crucial element for avoiding or postponing institutionalization of the disabled adult.
- (2) Family or other caregivers who provide continuous care in the home are frequently under substantial stress, physical, psychological, and financial. The stress, if unrelieved by family or community support to the caregiver, may lead to premature or unnecessary nursing home placement.
- (3) Respite care and other community-based supportive services for the caregiver and for the disabled adult could relieve some of the stresses, maintain and strengthen the family structure, and postpone or prevent institutionalization.
- (4) With family and friends providing the primary care for the disabled adult, supplemented by community health and social services, long-term care may be less costly than if the individual were institutionalized.

<u>NEW SECTION.</u> Sec. 2. It is the intent of the legislature to provide for a demonstration of the possible cost-effectiveness of both in-home and out-of-home respite care services which are provided by a range of service providers. The respite care services shall:

- (1) Provide relief and support to family or other unpaid caregivers of disabled adults;
- (2) Encourage individuals to provide care for disabled adults at home, and thus offer a viable alternative to institutionalization;