



## Involuntary Treatment Act: Ensure Patients' Access to Care (SB 5720)

### Background

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The Involuntary Treatment Act (ITA) ensures people receive the treatment they need if they are “gravely disabled” or a danger to themselves or others as a result of a mental illness or substance use disorder. The ITA establishes the legal requirements and processes for holding these patients for an initial 72-hour detention and subsequent involuntary commitments of 14, 90 or 180 days. It also authorizes Single Bed Certifications (SBC) as a stopgap tool for holding a person in one setting because there is no space available in the most appropriate setting (meaning all inpatient psychiatric beds or state hospital civil beds are in use). SBCs are most common in emergency departments (EDs) in acute care hospitals.

SB 5720 would make significant changes to the ITA and 71.34 RCW (which applies to the involuntary treatment of minors), most notably by extending the initial 72-hour detention period to 5 days and lowering the bar for involuntary detentions and commitments by expanding the definition of “gravely disabled.”

### WSHA Position

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WSHA has concerns with SB 5720, as it would strain an already fragile ITA system. Any changes to the ITA that increase bed demand must ensure patients have access to timely and appropriate care in the proper settings, and that hospitals have the necessary resources to care for these vulnerable and complex patients.

### Key Messages

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- Although hospitals have added beds to the system, there are simply not enough ITA beds for everyone who needs them, and SBC demand continues to rise.
- Expanding initial detention from three to five days and lowering the legal criteria for ITA holds means more patients will be detained — triggering more SBC demand and more pressure on an already fragile system.
- Washington needs policy and fiscal solutions to lower SBCs, not increase them. EDs are not a therapeutic environment for ITA patients. These patients require treatment in specialized settings.
- WSHA supports getting people the right treatment at the right time. The ITA system is already overburdened and underfunded. Changes this big require equal investment.

### Contact Information

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