

WAC 388-865-0800**Triage facility—Definitions.**

The following definitions apply to this chapter:

"Designated mental health professional (DMHP)" See WAC 388-865-0150.

"Mental health professional (MHP)" See WAC 388-865-0150.

"Peace officer" means a law enforcement official of a public agency or governmental unit, and includes persons specifically given peace officer powers by any state law, local ordinance, or judicial order of appointment.

"Triage facility" is a short-term facility or a portion of a facility licensed by the department of health and certified by the department of social and health services under RCW 71.24.035, which is designed as a facility to assess and stabilize an individual or determine the need for involuntary commitment of an individual. A triage facility must meet department of health residential treatment facility standards and may be structured as a voluntary and/or involuntary placement facility.

"Triage involuntary placement facility" is a triage facility that has elected to operate as an involuntary facility and may, at the direction of a peace officer, hold an individual for up to twelve hours. A peace officer or designated mental health professional may take or cause the person to be taken into custody and immediately delivered to the triage facility. The facility may ask for an involuntarily admitted individual to be assessed by a mental health professional for potential for voluntary admission. The individual has to agree in writing to the conditions of the voluntary admission.

"Triage voluntary placement facility" is a triage facility wherein the individual may elect to leave the facility of their own accord, at anytime. A triage voluntary placement facility may only accept voluntary admissions.

"Short-term facility" is a facility licensed by the department of health and certified by the department of social and health services under RCW 71.24.035 which has been designed to assess, diagnose, and treat individuals experiencing an acute crisis without the use of long-term hospitalization. Length of stay in a short-term facility is less than fourteen days from the day of admission.

[Statutory Authority: RCW 71.05.020, 71.05.150, 71.05.153, 71.24.035, and 2011 c 148. WSR 12-19-039, § 388-865-0800, filed 9/12/12, effective 10/13/12.]

WAC 388-865-0820**Triage facility—Memo of understanding and other requirements.**

This section applies to a facility that elects to operate as a triage involuntary placement facility.

(1) Memo of understanding requirements. The facility must have a memo of understanding developed in consultation with local law enforcement agencies, which details the population that the facility has capacity to serve. The memo of understanding must include, at a minimum, a description of the facility's:

- (a) Capacity to serve individuals with medication, medical and/or accommodation needs;
- (b) Capacity to serve individuals with behavioral management needs;
- (c) Ability to provide seclusion and/or restraint to individuals (see WAC 388-865-0830);
- (d) Notification procedures for discharge of individuals (see WAC 388-865-0850); and
- (e) Procedures for notifying the appropriate law enforcement agency of an individual's release, transfer, or hold for up to twelve hours to allow the peace officer to reclaim the individual.

(2) Individuals brought to a triage involuntary placement facility by a peace officer. The facility must have written procedures to assure the following:

(a) An individual detained by the designated mental health professional (DMHP) under chapter 71.05 RCW with a confirmed admission date to an evaluation and treatment facility, may remain at the triage facility until admitted to the evaluation and treatment facility.

(i) The individual may not be detained to the triage facility; and

(ii) An individual who agrees to a voluntary stay must provide a signature that documents the agreement.

(b) The individual is examined by a mental health professional (MHP) within three hours of the individual's arrival at the facility, and the examination includes an assessment to determine if a designated mental health professional (DMHP) evaluation is also required.

(c) If it is determined a DMHP evaluation is required, the DMHP must evaluate the individual within twelve hours of arrival. The DMHP determines whether the individual:

(i) Meets detention criteria under chapter 71.05 RCW; or

(ii) Agrees to accept voluntary admission. The individual must provide a signature agreeing to voluntary treatment.

(3) Individuals involuntarily admitted to a triage involuntary placement facility based on a peace officer-initiated twelve-hour hold. The facility must ensure each involuntarily admitted individual's clinical record:

(a) Documents the date and time the individual arrived at the facility and the date and time the examination by the mental health professional (MHP) occurred. The examination must occur within three hours of the individual's arrival to the facility (see WAC 388-865-0840(2)).

(b) Documents the peace officer's:

(i) Determination for cause to have the individual transported to the facility;

(ii) Request to be notified if the individual leaves the facility and how the peace officer is to be contacted, or documentation of other person(s) permitted to be contacted, such as the shift supervisor of the law enforcement agency or dispatcher; and

(iii) Request that the individual be held for the duration of the twelve hours to allow the peace officer sufficient time to return and make a determination as to whether or not to take the individual into custody.

(c) Contains a copy of the evaluation if the individual is determined by a designated mental health professional (DMHP) to meet detention criteria under chapter 71.05 RCW.

[Statutory Authority: RCW 71.05.020, 71.05.150, 71.05.153, 71.24.035, and 2011 c 148. WSR 12-19-039, § 388-865-0820, filed 9/12/12, effective 10/13/12.]

WAC 388-865-0830

Triage facility—Seclusion and restraint.

A triage facility must declare to the department any intention to provide seclusion and/or restraint (see WAC 388-865-0810 (3)(i)).

(1) The seclusion and/or restraint may only be used:

(a) To the extent necessary for the safety of the individual or others and in accordance with WAC 246-322-180 and 246-337-110, 246-320-271, and 388-865-0545; and

(b) When all less restrictive measures have failed.

(2) The facility must clearly document in the clinical record:

(a) The threat of imminent danger;

(b) All less restrictive measures that were tried and found to be ineffective; and

(c) A summary of each seclusion and/or restraint event, including a debriefing with staff members and the individual regarding how to prevent the occurrence of similar incidents in the future.

[Statutory Authority: RCW 71.05.020, 71.05.150, 71.05.153, 71.24.035, and 2011 c 148. WSR 12-19-039, § 388-865-0830, filed 9/12/12, effective 10/13/12.]

WAC 388-865-0850**Triage facility—Triage stabilization plan.**

A triage stabilization plan must be developed for each individual voluntarily or involuntarily admitted to a triage facility for longer than twenty-four hours. For an individual admitted twenty-four hours or less, the facility must document the results of the assessment performed by a mental health professional (MHP) required under WAC 388-865-0840.

(1) The triage stabilization plan must:

(a) Be developed collaboratively with the individual within twenty-four hours of admission.

(b) Improve and/or resolve the individual's crisis in the least restrictive manner possible.

(c) Be written in a language that is understandable to the individual and/or the individual's support system if applicable.

(d) Be mindful of the individual's culture, life style, economic situation, and current mental and physical limitation.

(e) Have goals that are relevant to the presenting crisis and demonstrate how they impact the crisis by improving the individual's ability to function.

(f) Include any recommendation for treatment from the mental health professional (MHP) assessment provided with three hours of the individual's arrival at the facility.

(g) Include:

(i) The date and time the designated mental health professional (DMHP) evaluated the individual in accordance with the detention criteria under chapter 71.05 RCW; and

(ii) The DMHP's determination of whether the individual should be detained.

(2) The individual's clinical record must:

(a) Contain a copy of the triage stabilization plan;

(b) Contain charting that demonstrates how requirements of the individual's triage stabilization were met; and

(c) Document the services provided to the individual.

[Statutory Authority: RCW 71.05.020, 71.05.150, 71.05.153, 71.24.035, and 2011 c 148. WSR 12-19-039, § 388-865-0850, filed 9/12/12, effective 10/13/12.]

WAC 388-877-1144**Mental health inpatient services—Triage—Agency facility and administrative requirements.**

Under chapter 71.05 RCW, the department certifies facilities to provide triage services that assess and stabilize an individual, or determine the need for involuntary commitment. The department does not require a facility licensed by the department of health (DOH) that was providing assessment and stabilization services under chapter 71.05 RCW as of April, 22, 2011, to relicense or recertify under these rules. A request for an exemption must be made to DOH and the department.

(1) In addition to meeting the agency licensure, certification, administration, personnel, and clinical requirements in WAC 388-877-0100 through 388-877-0680 and the applicable inpatient services requirements in WAC 388-877-1118 through 388-877-1132, an agency certified to provide triage services must:

- (a) Be licensed by the department of health (DOH) as a residential treatment facility;
- (b) Meet the requirements for voluntary admissions under this chapter;
- (c) Meet the requirements for involuntary admissions under this chapter if it elects to operate and be certified as a triage involuntary placement facility;
- (d) Ensure that the facility and its services are accessible to individuals with disabilities, as required by applicable federal, state, and local laws; and
- (e) Admit only individuals who are eighteen years of age and older.

(2) If a triage facility is collocated in another facility, there must be a physical separation. Physically separate means the triage facility is located in an area with no resident foot traffic between the triage facility and other areas of the building, except in case of emergencies.

(3) A triage facility must have, at a minimum, all of the following:

- (a) A designated person in charge of administration of the triage unit.
- (b) A mental health professional (MHP) on-site twenty-four hours a day, seven days a week.
- (c) A written program description that includes:
 - (i) Program goals;
 - (ii) Identification of service categories to be provided;
 - (iii) Length of stay criteria;
 - (iv) Identification of the ages or range of ages of individual populations to be served;
 - (v) A statement that only an individual eighteen years of age or older may be admitted to the triage facility; and
 - (vi) Any limitation or inability to serve or provide program services to an individual who:
 - (A) Requires acute medical services;
 - (B) Has limited mobility;
 - (C) Has limited physical capacity for self-care; or
 - (D) Exhibits physical violence.
- (d) Written procedures to ensure a secure and safe environment. Examples of these procedures are:
 - (i) Visual monitoring of the population environment by line of sight, mirrors or electronic means;
 - (ii) Having sufficient staff available twenty-four hours a day, seven days a week to meet the behavioral management needs of the current facility population; and

- (iii) Having staff trained in facility security and behavioral management techniques.
- (e) Written procedures to ensure that an individual is examined by an MHP within three hours of the individual's arrival at the facility.
- (f) Written procedures to ensure that a designated crisis responder (DCR) evaluates a voluntarily admitted individual for involuntary commitment when the individual's behavior warrants an evaluation.
- (g) A written declaration of intent and written procedures that are in accordance with WAC **246-337-110** if the triage facility declares intent to provide either seclusion or restraint or both.
- (i) The seclusion or restraint may only be used to the extent necessary for the safety of the individual or others and only used when all less restrictive measures have failed; and
- (ii) The facility must clearly document in the clinical record:
 - (A) The threat of imminent danger;
 - (B) All less restrictive measures that were tried and found to be ineffective; and
 - (C) A summary of each seclusion and restraint event, including a debriefing with staff members and the individual regarding how to prevent the occurrence of similar incidents in the future.
- (h) Written procedures to facilitate appropriate and safe transportation, if necessary, for an individual who is:
 - (i) Not being held for either police custody, or police pick up, or both;
 - (ii) Denied admission to the triage facility; or
 - (iii) Detained for transfer to a certified evaluation and treatment facility.
- (4) The triage facility must document that each staff member has the following:
 - (a) Adequate training regarding the least restrictive alternative options available in the community and how to access them;
 - (b) Training that meets the requirements of RCW **71.05.720** on safety and violence;
 - (c) Training that meets the requirements of RCW **71.05.705** if the triage facility is performing outreach services;
 - (d) Adequate training regarding methods of health care as defined in WAC **246-337-005** (19); and
 - (e) Adequate training regarding the proper and safe use of seclusion and restraint procedures if the triage facility employs these techniques.
- (5) The triage facility must ensure:
 - (a) Each clinical supervisor and each clinical staff member meets the qualifications of a mental health professional;
 - (b) A clinical staff member who does not meet the qualifications for an MHP is supervised by an MHP if the staff member provides direct services to individuals; and
 - (c) A contracted staff member who provides direct services to individuals meets the requirements of this section.

[Statutory Authority: RCW **71.24.870**, **70.02.290**, **70.02.340**, **71.05.560**, **71.24.035**, and **71.34.380**. WSR 18-06-043, § 388-877-1144, filed 3/1/18, effective 4/1/18.]

WAC 388-877-1148**Mental health inpatient services—Triage—Stabilization plan.**

A triage stabilization plan must be developed for each individual voluntarily or involuntarily admitted to a triage facility for longer than twenty-four hours. For an individual admitted twenty-four hours or less, the facility must document the results of the assessment performed by a mental health professional (MHP) required under WAC **388-877-1146**.

- (1) The triage stabilization plan must:
 - (a) Be developed collaboratively with the individual within twenty-four hours of admission;
 - (b) Either improve or resolve the individual's crisis, or both in the least restrictive manner possible;
 - (c) Be written in a language that is understandable to the individual or the individual's support system, or both, if applicable;
 - (d) Be mindful of the individual's culture, life style, economic situation, and current mental and physical limitation;
 - (e) Have goals that are relevant to the presenting crisis and demonstrate how they impact the crisis by improving the individual's ability to function;
 - (f) Include any recommendation for treatment from the mental health professional (MHP) assessment provided with three hours of the individual's arrival at the facility; and
 - (g) Include:
 - (i) The date and time the designated crisis responder (DCR) evaluated the individual in accordance with the detention criteria under chapter **71.05** RCW; and
 - (ii) The DCR's determination of whether the individual should be detained.
- (2) The individual's clinical record must:
 - (a) Contain a copy of the triage stabilization plan;
 - (b) Contain charting that demonstrates how requirements of the individual's triage stabilization were met; and
 - (c) Document the services provided to the individual.

[Statutory Authority: RCW **71.24.870**, **70.02.290**, **70.02.340**, **71.05.560**, **71.24.035**, and **71.34.380**. WSR 18-06-043, § 388-877-1148, filed 3/1/18, effective 4/1/18.]

WAC 388-877-1152**Mental health inpatient services—Triage—Involuntary.**

An agency that elects to provide triage involuntary services must meet all of the following requirements:

(1) The agency must have a memo of understanding developed in consultation with local law enforcement agencies, which details the population that the facility has capacity to serve. The memo of understanding must include, at a minimum, a description of the facility's:

- (a) Capacity to serve individuals with any medication, medical, or accommodation needs;
- (b) Capacity to serve individuals with behavioral management needs;
- (c) Ability to provide either seclusion, or restraint, or both, to individuals;
- (d) Notification procedures for discharge of individuals; and
- (e) Procedures for notifying the appropriate law enforcement agency of an individual's release, transfer, or hold for up to twelve hours to allow the peace officer to reclaim the individual.

(2) Agencies must have written procedures to ensure all of the following for individuals brought to a triage involuntary placement facility by a peace officer:

(a) An individual detained by the designated crisis responder (DCR) under chapter 71.05 RCW with a confirmed admission date to an evaluation and treatment facility, may remain at the triage facility until admitted to the evaluation and treatment facility.

- (i) The individual may not be detained to the triage facility; and
- (ii) An individual who agrees to a voluntary stay must provide a signature that documents the agreement.

(b) The individual is examined by a mental health professional (MHP) within three hours of the individual's arrival at the facility, and the examination includes an assessment to determine if a DCR evaluation is also required.

(c) If it is determined a DCR evaluation is required, the DCR must evaluate the individual within twelve hours of arrival. The DCR determines whether the individual:

- (i) Meets detention criteria under chapter 71.05 RCW; or
- (ii) Agrees to accept voluntary admission by providing their signature agreeing to voluntary treatment.

(3) Agencies must ensure the clinical record includes all of the following for individuals involuntarily admitted to a triage involuntary placement facility based on a peace officer-initiated twelve-hour hold:

(a) The date and time the individual arrived at the facility and the date and time the examination by the mental health professional (MHP) occurred. The examination must occur within three hours of the individual's arrival to the facility.

- (b) The peace officer's:
 - (i) Determination for cause to have the individual transported to the facility;
 - (ii) Request to be notified if the individual leaves the facility and how the peace officer is to be contacted, or documentation of other person(s) permitted to be contacted, such as the shift supervisor of the law enforcement agency or dispatcher; and

(iii) Request that the individual be held for the duration of the twelve hours to allow the peace officer sufficient time to return and make a determination as to whether or not to take the individual into custody.

(c) A copy of the evaluation if the individual is determined by a DCR to meet detention criteria under chapter **71.05** RCW.

[Statutory Authority: RCW **71.24.870**, **70.02.290**, **70.02.340**, **71.05.560**, **71.24.035**, and **71.34.380**. WSR 18-06-043, § 388-877-1152, filed 3/1/18, effective 4/1/18.]