246-341-0110

Behavioral health—Available certifications.

(1) A behavioral health agency licensed by the department must hold one or more of the following certifications:

(a) Behavioral health information and assistance;

(b) Behavioral health support;

(c) Mental health peer respite;

(d) Clubhouse;

(e) Behavioral health outpatient intervention, assessment and treatment;

(f) Behavioral health outpatient crisis<u>services</u>, observation, and intervention; (g) 23-hour crisis relief center services;

(hg) Designated crisis responder services;

(ih) Opioid treatment program;

(ji) Withdrawal management;

(<u>kj</u>) Behavioral health residential or inpatient intervention, assessment and

treatment;

([k) Involuntary behavioral health residential or inpatient;

(ml) Intensive behavioral health treatment;

(<u>n</u>m) Crisis stabilization unit and triage;

(<u>o</u>n) Competency restoration;

(po) Problem gambling and gambling disorder; or

(<u>q</u>p) Applied behavior analysis.

(2) The type of certification(s) held by the agency determines which behavioral health services the agency is approved to provide.

246-341-0200

Behavioral health—Definitions.

"23-hour crisis relief center" means the same as defined in RCW 71.24.025.

Behavioral health outpatient crisis outreach, observation and intervention services—Certification standards.

(1) Agencies certified for outpatient behavioral health crisis outreach, observation and intervention services provide face-to-face and other means of services to stabilize an individual in crisis to prevent further deterioration, and provide immediate treatment or intervention in the least restrictive environment at a location best suited to meet the needs of the individual which may be in the community, a behavioral health agency, or other setting.

(2) An agency certified for outpatient behavioral health crisis outreach, observation and intervention services does not need to meet the requirements in WAC **<u>246-341-0640</u>**.

(3) An agency providing outpatient behavioral health crisis outreach, observation and intervention services for substance use disorder must ensure a professional appropriately credentialed to provide substance use disorder treatment is available or on staff 24 hours a day, seven days a week.

(4) An agency providing any outpatient behavioral health crisis outreach, observation and intervention services must:

(a) Provide crisis telephone support in accordance with WAC 246-341-0670;

(b) For mental health crisis, ensure face-to-face outreach services are provided by a mental health professional or department-credentialed staff person with documented training in crisis response;

(c) For a substance use disorder crisis, ensure face-to-face outreach services are provided by a professional appropriately credentialed to provide substance use disorder treatment, or individual who has completed training that covers substance use disorders;

(d) Develop and implement policies and procedures for training staff to identify and assist individuals in crisis before assigning the staff member unsupervised duties;

(e) Resolve the crisis in the least restrictive manner possible;

(f) Require that trained staff remain with the individual in crisis in order to provide stabilization and support until the crisis is resolved or referral to another service is accomplished;

(g) Determine if an individual has a crisis plan and request a copy if available;

(h) Assure communication and coordination with the individual's mental health or substance use treatment provider, if indicated and appropriate;

(i) As appropriate, refer individuals to voluntary or involuntary treatment facilities for admission on a seven day a week, 24 hour a day basis, including arrangements for contacting the designated crisis responder;

(j) Maintain a current list of local resources for referrals, legal, employment, education, interpreter and social and health services;

(k) Transport or arrange for transport of an individual in a safe and timely manner, when necessary;

(l) Be available 24 hours a day, seven days a week; and

(m) Include family members, significant others, and other relevant treatment providers, as necessary, to provide support to the individual in crisis.

(5) Documentation of a crisis service must include the following:

(a) A brief summary of each crisis service encounter, including the:

(i) Date;

(ii) Time, including time elapsed from initial contact to face-to-face contact, if applicable; and

(iii) Nature and duration of the encounter.

(b) The names of the participants;

(c) A disposition including any referrals for services and individualized followup plan;

(d) Whether the individual has a crisis plan and any request to obtain the crisis plan; and

(e) The name and credential, if applicable, of the staff person providing the service.

(6) An agency utilizing certified peer counselors to provide crisis outreach services must:

(a) Ensure services are provided by a person recognized by the health care authority as a peer counselor, as defined in WAC <u>246-341-0200</u>;

(b) Ensure services provided by a peer counselor are within the scope of the peer counselor's training and credential;

(c) Ensure peer counselors receive annual training that is relevant to their unique working environment.

(7) When services are provided in a private home or nonpublic setting, the agency must:

(a) Have a written plan for training, staff back-up, information sharing, and communication for staff members who respond to a crisis in an individual's personal residence or in a nonpublic location;

(b) Ensure that a staff member responding to a crisis is able to be accompanied by a second trained individual when services are provided in the individual's personal residence or other nonpublic location; (c) Ensure that any staff member who engages in home visits is provided access, by their employer, to a wireless telephone or comparable device, for the purpose of emergency communication;

(d) Provide staff members who are sent to a personal residence or other nonpublic location to evaluate an individual in crisis prompt access to information about any history of dangerousness or potential dangerousness on the individual they are being sent to evaluate, that is documented in a crisis plan(s) or commitment record(s). This information must be made available without unduly delaying the crisis response.

<u>NEW SECTION WAC 246-341-XXXX</u> 23-hour Crisis relief center services - Certification standards

(1) An agency certified for 23-hour crisis relief center services must:

(a) Follow requirements for outpatient crisis services in WAC 246-341-0901;

(b) Provide services to address mental health and substance use crisis issues;

(c) Limit patient stays to a maximum of 23 hours and 59 minutes except for patients waiting on a designated crisis responder evaluation or making an imminent transition to another setting as part of an established aftercare plan;

(d) Offer walk-in options and drop-off options for first responders and persons referred through the 988 system, without a requirement for medical clearance for these individuals;

(e) Require documentation of a determination of medical stability before emergency medical services drop-off. May only accept emergency medical services drop-offs of individuals determined to be medically stable by emergency medical services in accordance with department guidelines developed per RCW 70.168.170;

(f) Have a no-refusal policy for law enforcement;

(g) Accept admissions 90 percent of the time when the facility is not at its full capacity with instances of declined admission and the reasons for the declines tracked and made available to the department;

(h) Be staffed 24 hours a day, seven days a week, with a multidisciplinary team capable of meeting the needs of individuals experiencing all levels of crisis in the community, which includes access to a prescriber, the ability to dispense medications appropriate for 23-hour crisis relief center clients;

(i) Maintain capacity to deliver minor wound care for nonlife-threatening wounds, and provide care for most minor physical or basic health needs that can be addressed without need for medical diagnosis or health care prescriber orders, with an identified pathway to transfer the person to more medically appropriate services if needed;

(j) Screen all individuals for:

(i) Suicide risk and engage in comprehensive suicide risk assessment and planning when clinically indicated;

(ii) Violence risk and engage in comprehensive violence risk assessment and planning when clinically indicated; and

(iii) Physical health needs.

(k) Document and maintain relationships with entities capable of providing for reasonably anticipated ongoing service needs of clients, unless the licensee itself provides sufficient services; and

(I) When appropriate, coordinate connection to ongoing care.

246-341-1140

Crisis stabilization unit-and triage—Certification standards.

An agency certified to provide crisis stabilization unit or triage services must meet all of the following criteria:

(1) A triage facility must be licensed as a residential treatment facility under chapter <u>71.12</u> RCW.

(2) If a crisis stabilization unit or triage facility is part of a jail, the unit must be located in an area of the building that is physically separate from the general population. "Physically separate" means:

(a) Out of sight and sound of the general population at all times;

(b) Located in an area with no foot traffic between other areas of the building, except in the case of emergency evacuation; and

(c) Has a secured entrance and exit between the unit and the rest of the facility.

(3) Ensure that a mental health professional is on-site at least eight hours per day, seven days a week, and accessible 24 hours per day, seven days per week.

(4) Ensure a mental health professional assesses an individual within three hours of the individual's arrival at the facility.

(5) For persons admitted to the crisis stabilization unit or triage facility on a voluntary basis, the individual service record must meet the individual service record requirements in WAC <u>246-341-0640</u>.

(6) An agency certified to provide crisis stabilization unit or triage services must meet the service standards for residential and inpatient behavioral health services in WAC <u>246-341-1105</u> and the applicable standards in WAC <u>246-341-1131</u> if providing involuntary crisis stabilization unit or triage services.