

A Guide to the Involuntary Treatment Act (ITA)

Information about how adolescents can be involuntarily committed to an inpatient mental health treatment in Washington State

What is the Involuntary Treatment Act (ITA)?

The Involuntary Treatment Act is a law in Washington State. It allows anyone age 13 and older who meets criteria to be in a psychiatric hospital and does not agree to mental health treatment to be evaluated for involuntary commitment to an inpatient mental health treatment center.

Seattle Children's Psychiatry and Behavioral Medicine Unit (PBMU) is one of several mental health treatment centers for adolescents who have been involuntarily committed. ITA is the most restrictive status for admission, and is only considered if a youth is not willing to voluntarily consent or a parent/guardian is not willing or able to authorize care via Family Initiated Treatment.

Why could my child be involuntarily committed?

Your child can be involuntarily committed if, due to a mental disorder, they are one of the following:

- A danger to themselves: They have talked about harming themselves or have actually hurt themselves (for example, suicide attempts).
- A danger to others: They have threatened to hurt another person and/or caused substantial damage to someone else's property.
- Gravely disabled: They cannot take care of basic needs such as eating, sleeping, clothing, shelter or making safe choices.

How can my child be committed under the ITA?

First, your child is evaluated by a designated crisis responder (DCR). Your child can be referred to a DCR by family members, emergency departments, and law enforcement or outpatient mental health providers. If your child is already in a psychiatric hospital voluntarily, they can be referred to a DCR if they no longer agree to treatment.

The DCR meets with your child and talks to you, other family members, and professionals involved in your child's care to decide if your child meets the criteria to be committed under the ITA.

What is a DCR evaluation?

A DCR can conduct an evaluation in an emergency department, in the community or in an inpatient mental health treatment center. If it appears that your child needs an involuntary commitment, the DCR will ask for written statements, called "declarations," from the people who have witnessed your child's unsafe behaviors.

Anyone who gives a declaration may be asked to come to King County Mental Illness Court to testify about this information.

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To Learn More

- Psychiatry and Behavioral Medicine Unit
206-987-2055
- Ask your child's healthcare provider
- seattlechildrens.org

Free Interpreter Services

- In the hospital, ask your nurse.
- From outside the hospital, call the toll-free Family Interpreting Line, 1-866-583-1527. Tell the interpreter the name or extension you need.



What happens during a 72-hour involuntary hold?

If the DCR agrees that your child meets the criteria for an involuntary commitment, then they will place your child on a 72-hour hold. During this time, your child will receive mental health treatment at Children's or another inpatient mental health treatment center. Your child's clinical team has 72 hours (3 business days) to decide if they need to continue inpatient treatment.

The team can decide at any point to release your child from involuntary treatment status if your child stabilizes or agrees to stay in the hospital voluntarily. The treatment team can also ask the court to keep your child in treatment for up to 14 more days if they are not stable and will not agree to voluntary treatment.

What happens at the 14-day commitment hearing?

At the end of the 72-hour hold, your child will be brought to court by ambulance to attend a 14-day commitment hearing. Your child can also choose not to attend the hearing.

A defense attorney will be assigned to represent your child in court. The county prosecuting attorney represents Children's.

The attorneys may choose to gather more information, or a judge or commissioner may listen to the evidence and make a decision. They may:

- Order your child to remain at Children's for up to 14 days.
- Release your child on a "less restrictive order."
- Dismiss the case and let your child go home.

What happens after 14 days of involuntary treatment?

If the treatment team feels that your child needs more inpatient treatment, your child will return to court. The team may ask the court for up to 180 more days of involuntary treatment. A court judge or commissioner will review the evidence and make a decision.

If the court agrees your child needs more treatment, they will come back to Children's until they are safe to go home. Or, they may go to a long-term mental health treatment center if that is the recommended treatment plan.

What role do I have in the ITA process?

You can be involved in the ITA court proceedings and come to each hearing. The attorneys may ask you questions about your child. You may be required to testify in court about your child's behavior and safety. The day before the court hearing is scheduled, please call the Prosecuting Attorney Paralegal office at 206-477-9487 to confirm if you will be needed to testify in court. Another resource for families to ask question is the ITA Family Advocate who can be reached at 206-477-8517.

What is a less restrictive order?

When your child becomes stable, Children’s may file a notice of release to end the involuntary treatment hold. If we feel your child can safely move to outpatient care but needs court supervision, we can ask for a “less restrictive order” (LRO) that lasts for 180 days. This can happen when a child is on a 14-day petition or a 180-day petition.

LRO means your child is discharged from inpatient care but has to follow a list of conditions that will be supervised by an outpatient mental health provider. The outpatient provider will contact the DCR if your child does not follow the conditions. You can also let the DCR know if your child is not following the LRO. The DCR may ask the court for a “revocation of the LRO” to return your child to inpatient care.

Are there other options besides involuntary treatment?

Yes. If your child is between ages 13 and 17, you also have the option to ask the hospital to admit them for inpatient psychiatry evaluation under a policy called family-initiated treatment. They would only be admitted if they meet medical necessity criteria.

Family-initiated treatment admissions are reviewed by an outside reviewer and can involve separate court review. Your child cannot be admitted under family-initiated treatment once they turn 18.
