

Parent's guide to Family Initiated Treatment

Adolescents ages 13-17 are eligible for services through Family Initiated Treatment (FIT).

Parents may consent on behalf of adolescents who meet medical necessity. Consent of the adolescent is not required. The FIT process creates an additional access point but does not guarantee care on demand for adolescents admitted through FIT. Providers will have individual processes and requirements for evaluation and admission to services.

Outpatient Family Initiated Treatment Process

FIT outpatient services can last up to 3 months and include up to 12 visits with that provider, after which services may only be continued with the adolescent's consent.

Inpatient Family Initiated Treatment Process

FIT inpatient treatment may last up to 30 days from HCA's contracted review of medical necessity or 30 days from a youth's filing of a petition for release, unless a professional person or the designated crisis responder initiates proceedings under this chapter. At 30 days the adolescent must be discharged, unless the adolescent voluntarily agrees to further treatment or a designated crisis responder (DCR) initiates involuntary commitment proceedings.

For adolescents receiving treatment within a residential treatment facility and not released by a court, they may remain in a residential treatment facility so long as it continues to be a medical necessity for the adolescent to receive such treatment (RCW 71.34.630(2)).

Adolescents admitted to inpatient facilities under FIT must be released immediately upon the written request of the parent.

Please note: No provider is obligated to provide treatment to an adolescent under the provisions of Family Initiated Treatment. However, an adolescents' refusal to consent to treatment shall not be the sole basis for a facility's decision to decline services.

RCW 71.34.020(46)

(b) For purposes of family-initiated treatment under RCW 71.34.600 through 71.34.670, "parent" also includes a person to whom a parent defined in (a) of this subsection has given a signed authorization to make health care decisions for the adolescent, a stepparent who is involved in caring for the adolescent, a kinship caregiver who is involved in caring for the adolescent, or another relative who is responsible for the health care of the adolescent, who may be required to provide a declaration under penalty of perjury stating that he or she is a relative responsible for the health care of the adolescent pursuant to chapter 5.50 RCW.



Parent requests evaluation

Adolescent's consent is not required. Evaluation may occur at an evaluation and treatment facility (E&T), inpatient facility, or approved substance use disorder treatment program.

Provider determines whether inpatient treatment is medically necessary.

Evaluation must be completed within 24 hours, unless the person assessing determines that the individual's condition requires more time. Evaluation cannot take longer than 120 hours.

If inpatient treatment is medically necessary, parent signs consent on the adolescent's behalf.

Within 24 hours of admission, provider notifies HCA's contracted, independent reviewer.

Prior to the review conducted under RCW 71.34.610, the professional person shall notify the adolescent of his or her right to petition superior court for release from the facility. The petition may be filed not sooner than five days following the review (RCW 71.34.320).

If the professional person in charge and the parent believe that it is medically necessary for the adolescent to remain in inpatient treatment, and the adolescent doesn't consent to continued treatment, the provider shall release the adolescent to the parent on the 2nd business day after receiving notice.

This allows the parent time to file an at risk youth petition under RCW 13.32A.



For more information on Family Initiated Treatment please contact:

 hca.wa.gov/fit

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