

- 1 Witness _____ appeared in person by video or
 2 under CR 43 by telephone _____
 3 Witness _____ appeared in person by video or
 4 under CR 43 by telephone _____
 5 Agreed order

6 In addition to the findings of fact and conclusions of law written below, the court incorporates by reference
 7 the oral findings of fact and conclusions of law.

8 **Findings of Fact**

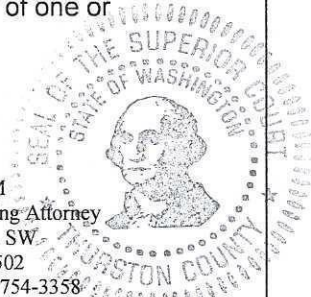
9 The court makes the following findings of fact:

- 10 1. **Time of Hearing.** The hearing was held within the time period allowed in RCW 71.05.240.
 11 2. **Firearm Notice.** (Not applicable for substance use disorder treatment.) Before this order was
 12 entered, the court notified the Respondent orally and in writing, that the failure to make a good
 13 faith effort to seek voluntary treatment will result in the loss of Respondent's firearm rights if
 14 Respondent is detained for involuntary treatment as the result of a mental disorder.
 15 3. **Reasons for Commitment.** Petitioner has proven by a preponderance of the evidence that
 16 Respondent suffers from a substance use disorder mental disorder. The diagnosis is
 17 Bipolar one disorder, most recent episode manic, with psychotic features; PTSD by history;
 18 ADHD by history; depression by history. The Respondent presents as gravely disabled with a risk
 19 of serious harm due to danger to others, as evidenced by the Respondent's poor insight and
 20 judgment, as evidenced by his communication with "Society's" owner regarding Fox messaging
 21 statement, "Fox is dead, long live the queen!" The Respondent is manifesting severe
 22 deterioration in routine functioning as evidenced by repeated and escalating loss of cognitive
 23 volitional control, as evidenced by the Respondent entering Society nightclub, doing the "Sieg
 24 Heil!" [Hail Victory!] Salute resulting in him getting kicked out of the club where he then drove
 25 around the club throughout the weekend playing white supremacy music.

26 As a result of that disorder (check the boxes that apply and write facts in support below):

Likelihood of harm or gravely disabled:

- There is a substantial risk that Respondent:
- will inflict harm upon him/herself, as evidenced by threats or attempts to commit suicide or inflict physical harm to him/herself. RCW 71.05.020(35)(a)(i).
 - will inflict harm upon another person, as evidenced by behavior which has caused such harm or which places another person or persons in reasonable fear of sustaining such harm. RCW 71.05.020(35)(a)(ii).
 - will inflict harm to the property of others, as evidenced by behavior which as caused substantial loss or damage to the property of others. RCW 71.05.020(35)(iii).
- Respondent has threatened the physical safety of another and has a history of one or more violent acts. RCW 71.05.020(35)(b).
- Respondent's condition is such that Respondent:



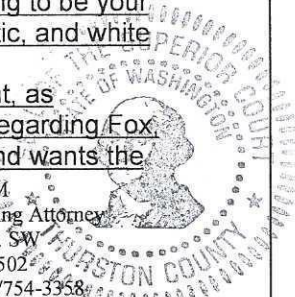
- 1 is in danger of serious physical harm resulting from the failure to provide for
his/her essential needs of health or safety. RCW 71.05.020(22)(a).
- 2 ~~manifests severe deterioration in routine functioning evidenced by repeated and~~
3 ~~escalating loss of cognitive or volitional control over actions and is not receiving~~
4 ~~such care as is essential for health and safety. Harmful consequences will follow~~
5 ~~if involuntary treatment is not ordered and Respondent is unable to make a~~
6 ~~rational decision regarding the need for treatment. RCW 71.05.020(22)(b).~~

7 **In need of assisted outpatient behavioral health treatment:**

8 Respondent:

- 9
- 10 • has been committed by a court to detention for involuntary behavioral health
11 treatment during the preceding thirty-six months (excluding confinement as a
12 result of a criminal conviction); RCW 71.05.020(30)(a).
 - 13 • is unlikely to voluntarily participate in outpatient treatment without an order for
14 less restrictive alternative treatment, based on a history of nonadherence with
15 treatment or in view of the person's current behavior; RCW 71.05.020(30)(b).
 - 16 • is likely to benefit from less restrictive alternative treatment; RCW
17 71.05.020(30)(c); and
 - 18 • requires less restrictive alternative treatment to prevent a relapse,
19 decompensation, or deterioration that is likely to result in the Respondent
20 presenting a likelihood of serious harm or the Respondent becoming gravely
21 disabled within a reasonably short period of time. RCW 71.05.020(30)(d).

22 *Facts in support:* The Respondent, Patrick Turner, is a 33-year-old, Caucasian, male who was
23 referred for an ITA act assessment by Sgt. Howzer with Olympia Police Department on March 26,
24 2019, at approximately 2321, due to concerns for grave disability and danger to others; as he has
25 been trespassed at a local bar and has been posting neo-Nazi and anti-black statements on
26 Facebook. On March 26, 2019, at approximately 2321, Sgt. Howzer with Olympia Police
Department requested an ITA evaluation. On March 26, 2019, at approximately 2341, Shelley
Barnett, DCR, arrived at the Olympia Police Department to evaluate the Respondent. According
to DCR notes, the DCR consulted with Officer Howzer and FBI agent Doug Capra, who reported,
"the FBI got a report from the club (Society) that the Respondent has drastically changed his
appearance and demeanor in the past 3 weeks (shaved his head, started wearing Nazi looking
apparel and posting neo-Nazi and anti-black statements on social media and doing the "Sieg
Heil!" salute inside the nightclub). The Respondent believes the bar is poisoning the water and is
sex trafficking women and boys. He's made many concerning statements on social media, and
through text messages, that have gotten the attention of police, and the FBI placing him as a
"person of interest." The DCR then interviewed the Respondent, according to DCR notes, the
Respondent appears well groomed, dressed in black slacks, a button up white shirt, black tie and
black Doc Martens with white shoelaces. The Respondent has fixed eye contact, blunted affect,
paranoid and delusional thought process as evidenced by his reports, "Society is involved in the
drug trade and sex trafficking. They've overdosed me multiple times, drugging my drinks. They
wanted me to be part of the Black Panther, so I could get any girl I want. I'm not going to be your
Malcolm X." The Respondent's Facebook page has been filled with Nazi, anti-semitic, and white
power memos, and post as evidenced by hash tagging (#beprepared #herelcme
#nomoremniceguy #knowyourclub). The Respondent has poor insight and judgment, as
evidenced by text messages between the Respondent and the Society club owner regarding Fox,
also known as Jaymee, the owner's girlfriend; who the Respondent claims to love and wants the



1 club owner's blessing for her hand and heart. Fox (aka Jaymee) had to block the Respondent as
2 she does not want to communicate with him any longer. The Respondent continued to send
3 messages emphasizing white power and including a list of "top/hi priority" individuals further
4 stating, "Fox is dead. Long live the queen!" Society club has placed a protection order for the
5 Respondent to not return to the club, as individuals feel they are in danger. The DCR noted that
6 the Respondent was unable to participate in the development of a reasonable available plan for
7 safety. When asked about his willingness to accept medication management, the Respondent
8 declined stating, "I don't have any mental health problems, medications won't help." The
9 Respondent was unwilling to participate in voluntary mental health treatment, as he is unwilling to
10 take medications. As a result of the DCR's evaluation, the Respondent was detained as a danger
11 to others, and as a danger to others and as gravely disabled (clause B-loss of cognitive of
12 volitional control) pursuant to RCW 71.05. Since his admission, the Respondent presents as
13 delusional and paranoid, he is guarded with responses, and has decompensated, due to
14 nonadherence to medications. He has made threatening statements, and in social media, and
15 has a protection order restraining him from returning to the club, due to patrons feeling that they
16 are in danger. It is the opinion of the treatment team, that if the Respondent were to be
17 discharged today, he would continue to present a significant risk of harm to others, specifically
18 patrons of the club, and the person known as Fox (aka Jaymee).

19 According to reports from the Respondent's father, the Respondent's current level of
20 functioning represents a severe deterioration from his normal routine baseline level of functioning.
21 Currently the Respondent cannot be good faith voluntary patient, in light of the fact that he has
22 recently refused voluntary treatment, stating that he does not have a mental illness and does not
23 need medication. Patrick is not a good candidate for less restrictive treatment placement, at this
24 time, due to his poor insight into his illness, and the severity of his symptomatology. Currently the
25 Respondent continues to require inpatient hospitalization, where others can be kept safe and
26 where the Respondent can be stabilized on medications, while being closely monitored for any
side effects, as well as for medication efficacy.

4. **Less Restrictive Alternative Treatment.**

Less restrictive alternative treatment is in the best interest of the Respondent or others.

OR,

Less restrictive alternative treatment is not in the best interest of the Respondent or
others. (*Explain*)

Respondent requires intensive, supervised, 24-hour restrictive care and is not ready for
less restrictive care; or

Diligent efforts have not disclosed the availability of a suitable less restrictive alternative.

5. **Voluntary Treatment.**

Respondent has not volunteered to undergo treatment.

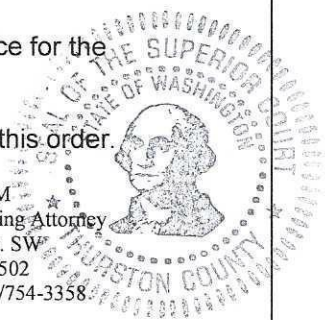
Good Faith Voluntary: The parties addressed the issue. Respondent is not willing or
able in good faith to consent to voluntary treatment:

6. **Adequate space for Respondent's substance use disorder treatment.**

A secure detoxification facility with adequate space for the Respondent is available
 is not available.

An approved substance use disorder treatment program with adequate space for the
Respondent is available is not available.

7. **Agreed Order.** Respondent, after consultation with counsel, agrees to the entry of this order.



1 8. Other. _____

2
3 **Conclusions of Law**

4 9. **Jurisdiction.** The court has jurisdiction over the parties and subject matter of this
mental illness proceeding.

5 10. **Criteria.** The Petitioner established by a preponderance of the evidence that the
Respondent:

- 6 presents a likelihood of serious harm. RCW 71.05.020(35)(a)(i) or (ii) or (iii) or (b).
- 7 is gravely disabled. RCW 71.05.020(22)(a) or (b).
- 8 is in need of assisted outpatient behavioral health treatment and the Respondent
9 does not present a likelihood of serious harm and is not gravely disabled. RCW
71.05.020(30).

10 **The court orders**

11 11. **Involuntary Treatment** as follows:

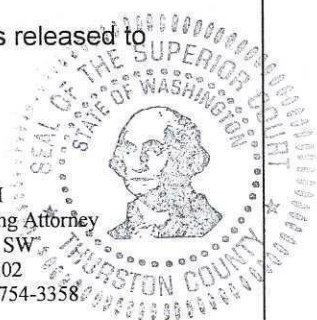
- 12 **14-Day Commitment.** The Respondent is detained for a period not to exceed
13 14 days of intensive inpatient treatment at this facility certified to provide
treatment by the Department of Health:
 - 14 Inpatient mental health treatment at: _____
 - 15 Telecare Thurston-Mason Crisis Triage, Tumwater, Washington
 - 16 Thurston County Evaluation and Treatment Center, Olympia, Washington
 - 17 Providence St. Peter Hospital, Olympia, Washington
 - 18 Fairfax Hospital, Everett / Kirkland / Monroe, Washington
 - 19 Smokey Point Behavioral Hospital, Marysville, Washington
 - 20 Secure detoxification facility at: _____
 - 21 _____
 - 22 Approved substance use treatment program at: _____
 - 23 _____
 - 24 Other: _____

23 **Escape and Recapture.** If the Respondent escapes from the treatment facility, any
24 Peace Officer shall apprehend, detain, and return the Respondent to this treatment
25 facility or to the evaluation and treatment facility designated by a Designated Crisis
26 Responder (DCR)

25 **Less Restrictive Treatment** as follows:

26 **90-Day Less Restrictive Alternative Treatment.** The Respondent is released to
less restrictive alternative treatment (LRA) for up to 90 days:

For mental health treatment substance use disorder treatment



1 **90-Day Assisted Outpatient Behavioral Health Treatment.** The Respondent is
2 released for assisted outpatient treatment on a less restrictive alternative (AOTL)
3 for up to 90 days:

4 For mental health treatment substance use disorder treatment

5 **LRA/AOT services and conditions:**

6 _____ (name) is the mental health service provider
7 responsible for identifying the services the Respondent will receive in accordance with
8 RCW 71.05.585.

9 The following treatment conditions or other conditions are in the best interest of the
10 Respondent and others:

11 _____
12 _____
13 _____
14 _____

15 Respondent must cooperate with the services planned by the mental health service
16 provider.

17 **Violation and Hospitalization.** If a treatment agency or facility, or a Designated Crisis
18 Responder (DCR), determines that the Respondent is not following the terms and
19 conditions of this order, or that substantial deterioration in Respondent's functioning has
20 occurred, or substantial decompensation in Respondent's functioning has occurred, or
21 he/she poses a likelihood of serious harm, they may take action to enforce, modify, or
22 revoke the less restrictive alternative. If revocation procedures are begun under
23 RCW 71.05.590(4), a hearing shall be held within five days to address the allegations
24 and determine whether this order should be modified or whether the Respondent should
25 be returned to an evaluation and treatment facility for intensive inpatient treatment for the
26 remainder of the treatment period.

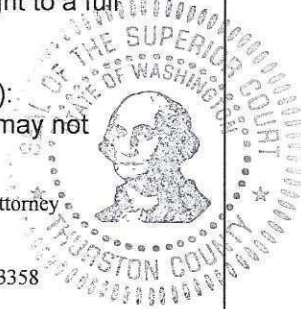
*(If the current less restrictive alternative is solely based on the Respondent being in need
of assisted outpatient behavioral health treatment then revocation proceedings are under
71.05.590(6)).*

27 **12. Transportation.** The Respondent is remanded into the custody of _____
28 for transportation and delivery to the treatment facility.

29 **13. Concurrent Jurisdiction:** The Respondent will be placed in _____ County and
30 that county shall have concurrent jurisdiction with this county to consider any Petition for
31 Revocation of this Order without further order of this court.

32 **14. Right to Full Hearing or Jury Trial.** If involuntary treatment beyond the 14 day period or beyond
33 the ninety days of less restrictive treatment is to be sought, Respondent will have the right to a full
34 hearing or jury trial as required by RCW 71.05.310.

35 **15. Firearms Possession Prohibited (not applicable for substance use disorder treatment):**
36 Respondent shall immediately surrender any concealed pistol license and Respondent may not



1 possess a firearm unless Respondent's right to do so is restored by a court of record. The *Notice*
2 of *Ineligibility to Possess a Firearm* is filed separately.

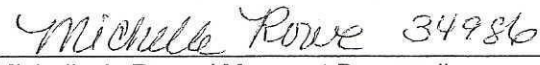
3 **16. Notice to Department of Corrections.** If Respondent is, or becomes, subject to supervision
4 by the department of corrections, Respondent must notify the treatment provider and
5 Respondent's mental health treatment information and substance use disorder treatment
6 information must be shared with the department of corrections for the duration of the
7 Respondent's incarceration and supervision, under RCW 71.05.445. Upon a petition by a
8 person who does not have a history of one or more violent acts, the court may, for good
9 cause, find that public safety would not be enhanced by the sharing of this information.

10 **17. Other:** _____
11 _____
12 _____
13 _____

14 Dated 3/29/19

15 
16 Judge / Commissioner **INDU THOMAS**

17 Approved for entry
18 
19 Jeffery D. Lippert
20 Senior Deputy Prosecuting Attorney
21 WSBA #51931

22 Approved for entry
23 
24 Michelle A. Rowe / Margaret Brammall
25 Attorneys for Respondent
26 WSBA #34986 / WSBA #34986

Patrick Turner
Respondent

Interpreter certifies that he/she has reviewed this order with Respondent

Interpreter

STATE OF WASHINGTON
County of Thurston

I, Linda Myhre Enlow, County Clerk and Ex-officio Clerk of the
Superior Court of the State of Washington, for Thurston County
Holding session at Olympia, do hereby certify that the foregoing is
a true and correct copy of the original as the same appears on file
and of record in my office containing Seven pages.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed
the seal of said court.

DATED: 3-29-19

LINDA MYHRE ENLOW
County Clerk, Thurston County State of
Washington
by:  Deputy

