## SENATE BILL NO. 250

INTRODUCED BY KEATING, MAZUREK, GAGE, SWYSGOOD,
J. RICE, T. BECK, CRIPPEN, GRINDE, GRADY,
HARDING, STRIZICH, BOHARSKI, DARKO, STICKNEY,
J. JOHNSON, VAUGHN, BRADLEY
BY REQUEST OF THE DEPARTMENT OF INSTITUTIONS
AND THE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

## IN THE SENATE

FEBRUARY 1, 1991	INTRODUCED AND REFERRED TO COMMITTEE ON JUDICIARY.
FEBRUARY 2, 1991	FIRST READING.
FEBRUARY 16, 1991	COMMITTEE RECOMMEND BILL DO PASS AS AMENDED. REPORT ADOPTED.
FEBRUARY 18, 1991	PRINTING REPORT.
	SECOND READING, DO PASS.
FEBRUARY 19, 1991	ENGROSSING REPORT.
	THIRD READING, PASSED. AYES, 50; NOES, 0.
	TRANSMITTED TO HOUSE.
I	N THE HOUSE
MARCH 4, 1991	INTRODUCED AND REFERRED TO COMMITTEE ON JUDICIARY.
	FIRST READING.
MARCH 15, 1991	COMMITTEE RECOMMEND BILL BE CONCURRED IN AS AMENDED. REPORT ADOPTED.
MARCH 18, 1991	SECOND READING, CONCURRED IN.
MARCH 19, 1991	THIRD READING, CONCURRED IN. AYES, 95; NOES, 4.
	RETURNED TO SENATE WITH AMENDMENTS.
I	N THE SENATE

RECEIVED FROM HOUSE.

MARCH 23, 1991

SECOND READING, AMENDMENTS CONCURRED IN.

MARCH 25, 1991

THIRD READING, AMENDMENTS CONCURRED IN.

SENT TO ENROLLING.

REPORTED CORRECTLY ENROLLED.

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1	SENTE BILL NO. 350
2 /	INTRODUCED BY Satisfy Ragues Day
<sub>3</sub> (	REQUEST OF THE DEPARTMENT OF INSTITUTIONS
4	AND THE DEPARTMENT OF SOCIAL AND BEHABILITATION SERVICES
- <b>-</b> 5	At Marketing Broad
_	A RILL FOR AN ACT ENTITLED: "AN ACT AMENDING THE LAWS
6	A BIDD FOR AN ACT DATE: DD
7	RELATING TO COMMITMENT OF PERSONS WHO ARE DEVELOPMENTALLY
8	DISABLED; PROVIDING AN ADMINISTRATIVE SCREENING PROCESS
9	PRIOR TO COMMITMENT; CLARIFYING TERMINOLOGY; PROVIDING FOR A
LO	NEW DEFINITION OF SERIOUSLY DEVELOPMENTALLY DISABLED;
11	AMENDING SECTIONS 53-20-102, 53-20-104, 53-20-106,
12	53-20-111, 53-20-112, 53-20-113, 53-20-116, 53-20-121,
13	53-20-125, 53-20-127, 53-20-128, 53-20-129, 53-20-131,
14	53-20-132, 53-20-141, 53-20-142, 53-20-145, 53-20-146,
15	53-20-148, 53-20-161, 53-20-162, 53-20-163, AND 53-20-164,
16	MCA; REPEALING SECTIONS 53-20-115, 53-20-117, 53-20-120,
17	53-20-122, 53-20-123, AND 53-20-124, MCA; AND PROVIDING A
18	TERMINATION DATE."
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20	STATEMENT OF INTENT
21	This bill provides a new definition of seriously
22	developmentally disabled and establishes a new
23	administrative process as part of the commitment of
24	seriously developmentally disabled persons to residential

facilities of the state of Montana. These changes are

necessary to provide a commitment standard and process that will meet the new mission that has been developed for the state-operated residential facilities.

The new definition of seriously developmentally disabled

The new definition of seriously developmentally disabled incorporates behavioral language to cover endangered and dangerous persons as well as self-help deficit language to cover current residents. The incorporation into the commitment process of an administrative screening team ensures that persons who are to be placed in a residential facility are thoroughly considered for placement in community services before a commitment may be made.

screening process. Rules necessary for the screening process must provide for the membership, terms, and various responsibilities of the team and the standards and procedures used by the team in making placement determinations. New rules are to be adopted to implement the

Rules are necessary to implement the administrative

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#### BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

changes in the definition of professional person.

NEW SECTION. Section 1. Residential facility screening
team -- referral by court -- membership -- rules. (1) When
the district court considers a person for commitment to a
residential facility under this part, the court shall refer
the person to the residential facility screening team for

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screening to determine whether placement and habilitation in a residential facility are appropriate for the person.

- (2) A court may not commit a person to a residential facility under 53-20-125 unless the residential facility screening team determines that placement and habilitation in a residential facility are appropriate for the person.
- 7 (3) The residential facility screening team may not 8 determine that placement and habilitation in a residential 9 facility are appropriate unless the residential facility 10 screening team determines that the person is seriously 11 developmentally disabled.
- 12 (4) The residential facility screening team shall
  13 provide the court with the social and placement information
  14 relied upon by the residential facility screening team in
  15 making its determination.
  - (5) For purposes of this part, the department of social and rehabilitation services and the department of institutions shall adopt rules providing for the membership and terms of the members of the residential facility screening team and setting forth the criteria and procedures to govern the determinations made by the residential facility screening team.
- Section 2. Section 53-20-102, MCA, is amended to read:

  "53-20-102. Definitions. As used in this part, the
- 25 following definitions apply:

- 1 (1) "Board" or "mental disabilities board of visitors"
  2 means the mental disabilities board of visitors created by
  3 2-15-211.
  - (2) "Community-based facilities" or "community-based services" includes those services and facilities which are available for the evaluation, treatment, and habilitation of the developmentally disabled in a community setting, including but not limited to outpatient facilities, special education services, group homes, foster homes, day-care facilities, sheltered workshops, and other community-based services and facilities.
- 12 (3) "Court" means a district court of the state of
  13 Montana.
  - (4) "Developmentally disabled" means suffering from a disability attributable to mental retardation, cerebral palsy, epilepsy, autism, or any other neurologically handicapping condition closely related to mental retardation and requiring treatment similar to that required by mentally retarded individuals if the disability originated before the individual attained age 18, has continued or can be expected to continue indefinitely, and constitutes a substantial handicap of such individual.
- 23 (5) "Habilitation" means the process by which a person 24 who is developmentally disabled is assisted to acquire and 25 maintain those life skills which enable him to cope more

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- effectively with the demands of his own person and environment and to raise the level of his physical, mental,
- 3 and social efficiency. Habilitation includes but is not
- 4 limited to formal, structured education and treatment.
- 5 (6) "Individual treatment planning team" means the
- 6 interdisciplinary team of persons involved in and
- 7 responsible for the habilitation of a person committed to a
- 8 residential facility. The committed person is a member of
- 9 the team.
- 10 (6)(7) "Next of kin" includes but need not be limited
- 11 to the spouse, parents, adult children, and adult brothers
- 12 and sisters of a person.
- 13 (7)(8) "Professional person" means:
- 14 (a) a licensed medical-doctor; or
- 15 (b)--a--person--who--has--been psychologist, licensed
- 16 psychiatrist, or a person with a master's degree in
- 17 psychology, who:
- 18 (i) has training and experience in psychometric testing
- 19 and evaluation;
- 20 (ii) has experience in the field of developmental
- 21 disabilities; and
- 22 (iii) is certified as provided for in 53-20-106 by the
- 23 department of social and rehabilitation services and the
- 24 department of institutions.
- 25 (9) "Qualified mental retardation professional" means a

- l person who has at least 1 year of experience working
- 2 directly with persons with mental retardation or other
- 3 developmental disabilities and who is:
- 4 (a) a licensed physician or osteopath;
- 5 (b) a registered nurse; or
- 6 (c) a professional program staff person for the
- 7 residential facility who the department of institutions
- 8 determines meets the professional requirements necessary for
- 9 federal certification of the facility.
- 10 (8)(10) "Resident" means a person admitted to
- 11 residential facility for a course of evaluation, treatment,
- 12 or habilitation.
- 13 {9}(11) "Residential facility" or "facility" means any
- 14 residential-hospital-or-hospital-and-school-which-exists-for
- 15 the--purpose--of--evaluating--treating--and-habilitating-the
- 16 developmentally-disabled-on-an-inpatient-basis;--including
- 17 the Montana developmental center and the Eastmont human
- 18 services center. The-term-does-not--include--a--group--home;
- 19 foster--home,-or-halfway-house,-A-correctional-facility-or-a
- 20 facility-for-the-treatment-of-the-mentally-ill-shall-not--be
- 21 a-"residential-facility"-within-the-meaning-of-this-part-
- 22 (12) "Residential facility screening team" means a team
- of persons appointed as provided in [section 1].
- 24 (13) "Respondent" means a person alleged in a
- 25 petition filed pursuant to this part to be developmentally

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- 1 disabled and in need of developmental disability services.
- 2 filt(14) "Responsible person" means any person willing
- 3 and able to assume responsibility for a person who is
- developmentally disabled or alleged to be developmentally 4
- 5 disabled.
- 6 +12+(15) "Seriously developmentally disabled" means
- 7 developmentally-disabled-due-to--developmental--or--physical
- disability--or--a--combination--of--both;-rendering-a-person 8
- 9 unable-to-function-in-a-community-based--setting--and--which
- has-resulted-in-self-inflicted-injury-or-injury-to-others-or 10
- the-imminent-threat-thereof-or-which-has-deprived-the-person 11
- 12 afflicted--of--the--ability-to-protect-his-life-or-health: a
- 13 person who:

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- 14 (a) is developmentally disabled;
- 15 (b) is impaired in cognitive functioning; and
- 16 (c) has behaviors that pose an imminent risk of serious
- 17 harm to self or others or self-help deficits so severe as to
- require total care or near total care and because of those
- behaviors or deficits, cannot be safely and effectively 19
- habilitated in community-based services." 20
- 21 Section 3. Section 53-20-104, MCA, is amended to read:
- "53-20-104. Powers and duties of mental disabilities 22
- board of visitors. (1) The board shall-be is an independent 23
- 24 board of inquiry and review to assure ensure that the
- treatment of all persons admitted to a residential facility 25

1 is humane and decent and meets the requirements set forth in

this part.

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(2) The board shall review all plans for experimental 4 research or hazardous treatment procedures involving persons admitted to any a residential facility to assure ensure that

the research project is humane and not unduly hazardous and 7 that it complies with the principles of the statement on the

use of human subjects for research of the American

association on mental deficiency and with the principles for

10 research involving human subjects required by the United

States department of healthy-education, and welfare human

12 services. No An experimental research project involving

13 persons admitted to any a residential facility affected by

this part may not be commenced unless it is approved by the 14

mental disabilities board of visitors. 15

- 16 (3) The board shall investigate all cases of alleged 17 mistreatment of a resident.
- 18 (4) The board shall at least annually inspect every 19 residential facility which that is providing a course of

residential habilitation and treatment to any person

21 pursuant to this part. The board shall inspect the physical

22 plant, including residential, recreational, dining, and

23 sanitary facilities. It shall visit all wards and treatment

24 or habilitation areas. The board shall inquire concerning

25 all habilitation programs being implemented by the

#### institution facility.

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- (5) The board shall inspect the file of each person 2 admitted to a residential facility pursuant to this part to 3 insure ensure that a habilitation plan exists and is being implemented. The board shall inquire concerning all use of 5 restraints, isolation, or other extraordinary measures. 6
  - (6) The board may assist any a resident at a residential facility in resolving any grievance he may have concerning his admission or his course of treatment and habilitation in the facility.
  - (7) If the board believes that any a facility is failing to comply with the provisions of this part in regard to its physical facilities or its treatment of any resident, it shall report its findings at once to the professional person--in--charge superintendent of the facility and the director of the department of institutions. If appropriate, after waiting a reasonable time for a response from such professional-person the superintendent or the director, the board may notify the parents or guardian of any the resident involved, the next of kin, if known, the responsible person appointed by the court for any the resident involved, and the district court which that has jurisdiction over the facility.
- (8) The board shall report annually to the governor and 24 shall report to each session of the legislature concerning 25

- the status of the residential facilities and habilitation 1 programs which that it has inspected."
- Section 4. Section 53-20-106, MCA, is amended to read:
- \*53-20-106. Certification of professional persons. (1) The department of social and rehabilitation services and the department of institutions shall certify professional
- persons for purposes of this part. (2) The department of social and rehabilitation services and the department of institutions shall adopt 10 rules governing the certification of professional persons. 11 The rules must establish the appropriate combination of 12 education, skills, and experience necessary 13 certification and set forth qualifications developed by 14 reference to recognized national standards in the field of 15 developmental disabilities;--such-as-standards-published-by 16 the-accreditation-council-for-services-for-mentally-retarded 17 and--other--developmentally---disabled---persons---{ACMRDD}; 18 standards-published-in-Title-XIX-of-the-Social-Security-Act, 19 and-other-similar-standards."
- 20 Section 5. Section 53-20-111, MCA, is amended to read:

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- "53-20-111. Limitation on who compelled to undertake treatment. No A person who has reached the age of majority shall may be compelled against his will to undertake a
- 24 course of treatment and habilitation solely-because-he in a residential facility only if the person is seriously

- developmentally disabled\_-but-only-if-such-disability-causes
- 2 him-to-be-unable-to--protect--his--life--and--health--or--to
- 3 protect-the-life-or-safety-of-others."
- 4 Section 6. Section 53-20-112, MCA, is amended to read:
- 5 "53-20-112. Procedural rights. (1) Any A person subject
- 6 to emergency admittance to a residential facility -- to
- 7 examination--or--evaluation--by-a-professional-person; or to
- 8 any hearing held pursuant to this part shall--have has all
- 9 the rights accorded to a person subject to involuntary
- 10 commitment proceedings under the laws of this state relating
- .
- 11 to involuntary commitment of the seriously mentally ill, as
  - provided in 53-21-115 through 53-21-118.
- 13 (2) In addition, the parents or guardian of any  $\underline{a}$
- 14 person alleged to be seriously developmentally disabled and
- in need of developmental disabilities services have the
- 16 right to:
- 17 (a) be present at any hearing held pursuant to this
- 18 part;

- (b) be represented by counsel in any hearing;
- 20 (c) offer evidence and cross-examine witnesses in any
- 21 hearing; and
- (d) have the respondent examined by a professional
- 23 person of their choice when such professional person is
- 24 reasonably available, unless the person so chosen is
- 25 objected to by the respondent or by a responsible person

- 1 appointed by the court."
- Section 7. Section 53-20-113, MCA, is amended to read:
- 3 "53-20-113. Waiver of rights. (1) A person may waive
- 4 his procedural rights provided that the waiver is knowingly
- 5 and intentionally made. The right to counsel in a hearing
- 6 held pursuant to 53-20-123 53-20-125 may not be waived. The
- 7 right to habilitation provided for in this part may not be
- 8 waived.
- 9 (2)--In--the-case-of-a-person-who-has-been-admitted-to-a
- 10 residential-facility-for-up-to-30--days--of--evaluation--and
- 11 treatment--or--who; --pursuant--to--the--recommendation--of-a
- 12 professional--person,--may--be--admitted--to--a--residential
- 13 facility-for-an-extended-course-of-habilitation;-a-waiver-of
- 14 rights-can-be-knowingly-and-intentionally-made-only-with-the
- 15 concurrence-of-the-person's-counsel;-if-any;-his-parents--or
- 16 quardiany-and-the-responsible-person-appointed-by-the-courty
- 17 if-any-
- 18 (3)(2) (a) In the case of a minor, the waiver of rights
- 19 can may be knowingly and intentionally made:
- 20 (i) when the minor is under the age of 12, by the
- 21 parents of the minor with the concurrence of the responsible
- 22 person, if any;
- (ii) when the minor is over the age of 12, by the minor
- 24 and his parents;

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(iii) when the minor is over the age of 12 and the minor

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- and his parents do not agree, the minor can may make an effective waiver of his rights only with the advice of counsel.
- 4 (b) If the court believes that there may be a conflict
  5 of interest between a minor and his parents or guardian, the
  6 court may appoint a responsible person or guardian ad litem
  7 for the minor."
- 8 Section 8. Section 53-20-116, MCA, is amended to read:

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- \*53-20-116. Professional person to attend hearing. In any hearing held pursuant to this part which—involves consideration—of—the—recommendation—and—report—of—a professional—person, a member of the residential facility screening team or the professional person who made—the recommendation—and—report—shall evaluated the person must be present at the hearing and subject to cross—examination."
- Section 9. Section 53-20-121, MCA, is amended to read:
- "53-20-121. Petition for involuntary treatment -contents of. (1) Any person who believes that there is a
  person who is seriously developmentally disabled and in need
  of developmental--disability--services placement in a
  residential facility may report--the--situation--to--a
  professional-person--If--the--professional--person--believes
  from--the--facts--given--to--him--that--the--person--may--be
  developmentally---disabled--and--in--need--of--developmental
  disability--services---he--shall--contact--the--parents---or

- 1 guardian--of--the--person--alleged--to--be--developmentally
- 2 disabled-or-the-person-himself--If-any--of--the--persons--so
- 3 contacted--refuse--to-cooperate-with-the-professional-person
- 4 and--if--the--professional--person--believes--from--all--the
- 5 circumstances--of--the--case--that---the---person---may---be
- 6 developmentally---disabled--and--in--need--of--developmental
- 7 disability-services, he-shall request the county attorney to
  - file a petition alleging that there-is-a the person in--the
- 9 county-who is seriously developmentally disabled and in need
- 10 of developmental---disability---services placement in a
- ll residential facility.

- (2) The petition shall must contain:
- (a) the name and address of the professional person and any-other-person requesting the petition and their interest in the case:
- (b) the name and address of the respondent;
- 17 (c) the name and address of the parents or guardian of 18 the respondent and of any other person believed to be
- 19 legally responsible for the care, support, and maintenance
- 20 of the respondent;
- 21 (d) the name and address of the respondent's next of
- 22 kin, to the extent known;
- (e) the name and address of any person who the county
- 24 attorney believes might be willing and able to be appointed
- 25 responsible person: and

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(f) a statement of the rights of the respondent and his parents or guardian which-shall that must be in conspicuous print and identified by a suitable heading."

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Section 10. Section 53-20-125, MCA, is amended to read: #53-20-125. Outcome of evaluation---and---treatment screening -- recommendation for treatment at residential facility -- hearing. (1) If as a result of the evaluation and-treatment,-either-agreed-to-by-the-parents,-guardian,-or the-person-himself-pursuant-to-53-20-120-or-ordered--by--the court, -- the -- professional -- person -- in -- charge -- of -- the -- case screening required by [section 1] the residential facility screening team concludes that the person evaluated is seriously developmentally disabled and recommends that treatment and habilitation be-had in a residential facility on an extended basis, the professional--person team shall file his its written recommendation and report with the court and request that the court order the admission. The report shall include the factual basis for recommendation and shall describe any tests or evaluation devices which that have been employed in evaluating the patient.

(2) If no responsible person has yet been appointed, the court may appoint one at this time. If there is no parent or guardian, the court shall appoint a responsible person.

- (3) At the request of the respondent, his parents or 1 quardian, or the responsible person, the court shall appoint 2 3 counsel for the respondent. If the parents (or quardian) are indigent and if they request it, the court shall appoint counsel for the parents or guardian.
- 6 (4) Notice of the recommendation shall must be mailed 7 or delivered to the respondent, his parents or quardian, the 8 responsible person, next of kin, if known, and the attorney 9 for the respondent, if any, and for the parents or quardian, 10 if anv.
  - (2)(5) The respondent, his parents or quardian, the responsible person, or the attorney for any party may request that a hearing be had held on the recommendation. If a hearing is requested, the court shall mail or deliver notice of the date, time, and place of the hearing to each of the parties listed at the beginning of this subsection. The hearing shall must be to held before the court without
- jury. The rules of civil procedure shall must apply. 19 (3)(6) If the court finds that the respondent is 20 seriously developmentally disabled and---that---available 21 community-based--services--are--not--adequate-to-protect-the 22 life-and-physical-safety-of-the--person--and--others--or--to 23 provide--appropriate--treatment--and--habilitation, it shall order the respondent admitted to a residential facility for 24

an extended course of treatment and habilitation. If the

court finds that the respondent is developmentally disabled 1 2 but not seriously developmentally disabled, in--need-of developmental--disability---services,---and---eligible---for 3 placement--in--community-based--services--and-that-available 4 community-based-services-are-adequate-to--protect--the--life 5 and--physical-safety-of-the-person-and-others-and-to-provide 7 appropriate-treatment-and-habilitation; it shall dismiss the 8 petition and refer the respondent to the department of social and rehabilitation services to be considered for 10 placement in community-based services according to 11 53-20-209. If the court finds that the respondent is not 12 developmentally disabled or is not in need of developmental disability services, it shall dismiss the petition. 13

(4)(7) If none of the parties notified of the recommendation request a hearing, the court may issue an order authorizing the person to be admitted to the residential facility for an extended period of treatment and habilitation or the court may initiate its own inquiry as to whether the order should be granted. The court may refuse to authorize admission of a person to a residential facility for an extended period of treatment and habilitation if such admission is not in the best interests of the person."

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Section 11. Section 53-20-127, MCA, is amended to read:

"53-20-127. Transfer to another residential facility -
release to community-based alternative -- hearing. (1) If,

at any time during the period for which a person is admitted a residential facility for an extended period of habilitation and treatment, the qualified mental retardation professional person in charge of the resident decides that the person no longer requires placement in a residential facility and that there exist sufficient community-based 7 alternatives to provide adequate treatment and habilitation for the resident and adequate protection of the life and physical safety of the resident and others or that it is in the best interests of the resident that he be transferred to 10 11 another residential facility, then he may release the 12 resident to such the community-based alternative or transfer 13 the resident to the other residential facility no less than 14 15 days after sending notice of the proposed release or 15 transfer to the resident, his parents or guardian, the 16 attorney who most recently represented the resident, if any, 17 the responsible person appointed by the court, if any, and 18 the court which that ordered the admission. If the resident 19 has been found unfit to proceed to trial, notice shall must 20 be sent to the court which that found the resident unfit to 21 proceed to trial and to the county attorney and the attorney 22 who represented the resident at the time the resident was 23 found unfit to proceed to trial.

release or transfer, they may petition the court for a

(a) If any of the parties so notified objects to the

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- 1 hearing to determine whether the release or transfer should
- 2 be allowed. The hearing shall must comply with the
- 3 procedures set forth in 53-20-125. The court may on its own
  - initiative inquire concerning the propriety of the release
- 5 or transfer.

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- 6 (b) Nothing in this subsection shall--prevent
- 7 prevents the transfer of a resident to a hospital or other
- medical facility for necessary medical treatment or 8
- emergency transfer of a resident to a mental health facility 9
- 10 provided such the emergency transfer complies with the
- statutory requirements for emergency detention of the 11
- 13 psychiatric transfer, notice shall must be given to the

mentally ill. Within 24 hours of an emergency medical or

- 14 parents or guardian of the resident, the responsible person
- 15 appointed by the court, if any, and the court.
- 16 (2) If any a person is admitted to a residential
- 17 facility for an extended course of habilitation without a
- 18 hearing and if subsequent to such admission one of the
- 19 parties who could have requested a hearing learns that an
- 20 alternative course of treatment is available which that is
- 21 more suitable to the needs of the resident, the party may
- 22 request the qualified mental retardation professional person
- 23 in charge of the resident to release the resident to the
- alternative if it is a community-based alternative or 24
- 25 transfer the resident to the alternative if it is a

- residential alternative. Any such transfer or release shall
- must comply with the requirements of subsection (1) of--this
- section. If the qualified mental retardation professional 3
- person in charge of the resident refuses to authorize the
  - release or transfer, then the party may petition the court
- for a hearing to determine whether the present residential
- alternative should be continued. The hearing shall must
- comply with the procedures set forth in 53-20-125." R
- 9 Section 12. Section 53-20-128, MCA, is amended to read:
- 10 "53-20-128. Extension of admission period -- hearing.
- (1) If the qualified mental retardation professional person 11
- 12 in charge of the resident determines that the admission to
- 13 the residential facility should continue beyond the period
- specified in the court order, he shall, at least 15 days
- before the end of the period set out in the court order, 15
- 16 send written notice of his recommendation and request for
- 17 renewal of the order to the court which that issued the
- order, the resident, his parents or quardian, the next of 18
- 19 kin, if known, the attorney who most recently represented
- 20 the resident, if any, and the responsible person appointed
- 21 by the court, if any. The recommendation and request shall
- 22 must be accompanied by a written report which-shall-describe
- 23 describing the habilitation plan which that has
  - undertaken for the resident and the future habilitation plan
- 25 which that is anticipated by the qualified mental

- 1 retardation professional person.
- 2 (2) If any person so notified requests a hearing, the 3 court shall set a time and place for the hearing and shall mail or deliver notice to all of the persons informed of the 5 recommendation. The hearing shall must be conducted in the 6 manner set out forth in 53-20-125. If the court finds that 7 the residential admission is still justified, it may order 8 continuation of the admission to that residential facility 9 or transfer of the resident to a different residential 10 facility. If the court finds that the resident is still in 11 need of developmental disabilities services but does not 12 require residential treatment in a residential facility or 13 if all parties are willing for the resident to participate 14 in a community-based program of habilitation, it shall refer 15 respondent to the department of social 16 rehabilitation services to be considered for placement in 17 community-based services according to 53-20-209. If the 18 person is placed in community-based services or if the need 19 for developmental disabilities services no longer exists, 20 the court shall dismiss the petition. The court shall may 21 not order continuation of admission to a residential 22 facility which that does not have an individualized 23 habilitation plan for the resident. In its order, the court 24 shall make findings of fact on which its order is based. The 25 court may on its own initiative inquire concerning the

- suitability of continuing an admission to a residential
  facility."
- Section 13. Section 53-20-129, MCA, is amended to read: \*53-20-129. Emergency admission. The parents; -quardian; 5 the--person--himself;-or-a A professional person may admit a 6 person believed to be seriously developmentally disabled to a residential facility on an emergency basis when necessary to protect the person or others from death or serious bodily 8 9 harm. If-requested-by-the-parents;-guardian;-or--the--person admitted--on--an-emergency-basisy-a A petition as set out in 10 53-20-121 and 53-20-122-shall 53-20-125 must be filed on the 11 12 next judicial day by the county attorney of the county where the person resides. If a petition is filed, the professional 13 14 person-assigned-by-the-court-to-conduct-the-examination--and inquiry residential facility screening team shall report 15 16 back to the court on the next fifth judicial day following 17 the filing of the petition. Once a petition is filed, 18 continued detention in the residential facility shall may be 19 allowed only on order of the court when necessary to protect 20 the respondent or others from death or serious bodily harm. In no case shall may an emergency admission to a residential 21 22 facility continue for longer than 30 days without subsequent 23 proceedings before the court."
  - Section 14. Section 53-20-131, MCA, is amended to read:

25 "53-20-131. Placement in nonstate facility. (1)-If-a

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person-is-admitted--to--a--residential--facility--under--the 1 provisions--of--this-part-and-is-eligible-for-hospital-care; 2 treatment,-or-habilitation-by-an-agency-of-the-United-States 3 and-if--a--certificate--of--notification--from--such--agency 4 showing-that-facilities-are-available-and-that-the-person-is 5 eligible--for--care--or--treatment--therein-is-received;-the 6 court-may-order-the-person-to-be-placed-in--the--custody--of 7 the--agency--for--hospitalization:--The-chief-officer-of-any 8 hospital-or-residential-facility-operated-by-the-agency--and 9 in--which--the-person-is-admitted-shall;-with-respect-to-the 10 person;-be-vested-with-the-same-powers-as-the-superintendent 11 of--the--Montana--developmental--center--with---respect---to 12 detention, -- custody, -- transfer, -- and -- release of -the -person. 13 durisdiction-shall-be-retained-in-the-appropriate-courts--of 14 this--state--to-inquire-into-the-mental-condition-of-persons 15 so-admitted-and-to-determine-the-necessity--for--continuance 16 of-their-admission-17

(2)(1) Consistent with other provisions of this part, a person admitted to a residential facility under this part for a period of more than 30 days may be committed by the court to the custody of friends or next of kin residing outside the state or transferred to a--residential an out-of-state facility located--outside--the--state for the habilitation of persons who are developmentally disabled if the out-of-state facility agrees to receive the person. No

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1 such Such a commitment or transfer shall may not be for a longer period of time than is permitted within the -- state 2 Montana. If the person is indigent, the expense of 3 supporting him in an out-of-state facility and the expense 5 of transportation shall must be borne by the state of 6 Montana.

(3)(2) The transfer of persons admitted residential facility out of Montana under the provisions of this part or into Montana under the laws of another jurisdiction shall must be governed by the provisions of the Interstate Compact on Mental Health."

Section 15. Section 53-20-132, MCA, is amended to read:

13 \*53-20-132. Court-ordered placement in community-based 14 services prohibited. Nothing in this part may be construed 15 as authorizing the placement of and delivery of services to 16 developmentally disabled persons in community-based services 17 by court order except-as-provided-in-53-20-123(4). Placement 18 of persons in community-based services is governed by

20 Section 16. Section 53-20-141, MCA, is amended to read: "53-20-141. Denial of legal rights. (1) Unless 21 22 specifically stated in an order by the court, a person 23 admitted to a residential facility for an extended course of

24 habilitation shall does not forfeit any legal right or 25

suffer any legal disability by reason of the provisions of

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this part, except insofar as it may be necessary to detain the person for habilitation, evaluation, or care.

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- (2) Whenever any a person is admitted to a residential facility for a period of more than 30 days for an extended course of habilitation, the court ordering the admission may make an order stating specifically any legal rights which that are denied the respondent and any legal disabilities which that are imposed on him. As part of its order, the court may appoint a person to act as conservator of the respondent's property. Any conservatorship created pursuant to this section shell—terminate terminates upon the conclusion of the admission if not sooner terminated by the court. A conservatorship or guardianship extending beyond the period of the admission may not be created except according to the procedures set forth under Montana law for the appointment of conservators and guardians generally.
  - (3) Any A person who has been admitted to a residential facility pursuant to this part shall must, upon the termination of the admission, be automatically restored to all of his civil and legal rights which that may have been lost when he was admitted. However, this subsection shall does not affect any guardianship or conservatorship created independently of the admission proceedings according to the provisions of Montana law relating to the appointment of conservators and guardians generally. Any A person who

- leaves a residential facility following a period of
  evaluation and habilitation shall must be given a written
  statement setting forth the substance of this subsection.
- 4 (4)--Any-person-admitted-to-a-residential-facility-prior 5 to-July-1,-1975,-shall-enjoy-all-the-rights--and--privileges 6 of-a-person-admitted-after-July-1,-1975;"
- Section 17. Section 53-20-142, MCA, is amended to read:

  8 \*53-20-142. Rights while in a residential facility.

  9 Persons admitted to a residential facility for a period of

  10 habilitation shall enjoy the following rights:
- (1) Residents shall have a right to dignity, privacy,
  12 and humane care.
  - (2) Residents shall-be are entitled to send and receive sealed mail. Moreover, it shall-be is the duty of the facility to foster the exercise of this right by furnishing the necessary materials and assistance.
- 17 (3) Residents shall must have the same rights and access to private telephone communication as patients at any 18 19 public hospital except to the extent that a the individual 20 treatment planning team or the qualified mental retardation professional person responsible for formulation of a 21 particular resident's habilitation plan writes an order 22 imposing special restrictions and explains the reasons for 23 any-such the restrictions. The written order must be renewed 24
- monthly if any restrictions are to be continued.

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- (4) Residents shall have an unrestricted right to visitation except to the extent that a the individual treatment planning team or the qualified mental retardation professional person responsible for formulation of a particular resident's habilitation plan writes an order imposing special restrictions and explains the reasons for any-such the restrictions. The written order must be renewed monthly if any restrictions are to be continued.
  - (5) Residents shall have a right to receive suitable educational and habilitation services regardless of chronological age, degree of retardation, or accompanying disabilities or handicaps.

(6) Each resident shall must have an adequate allowance of neat, clean, suitably fitting, and seasonable clothing. Except when a particular kind of clothing is required because of a particular condition, residents shall must have the opportunity to select from various types of neat, clean, and seasonable clothing. Such The clothing shall must be considered the resident's throughout his stay in the institution facility. Clothing, both in amount and type, shall must make it possible for residents to go out of doors in inclement weather, to go for trips or visits appropriately dressed, and to make a normal appearance in the community. The facility shall make provision for the adequate and regular laundering of the residents' clothing.

- (7) Each resident shall-have has the right to keep and use his own personal possessions except insofar as such clothes or personal possessions may be determined by a the individual treatment planning team or the qualified mental retardation professional person to be dangerous either to himself or to others.
- (8) A Each resident has a right to a humane physical environment within the residential facilities facility.

  These-facilities-shall The facility must be designed to make a positive contribution to the efficient attainment of the habilitation goals of the resident. To accomplish this purpose:
- (a) regular housekeeping and maintenance procedures which that will ensure that the facility is maintained in a safe, clean, and attractive condition shall must be developed and implemented;
- (b) pursuant to an established routine maintenance and repair program, the physical plant shall must be kept in a continuous state of good repair and operation so as to ensure the health, comfort, safety, and well-being of the residents and so as not to impede in any manner the habilitation programs of the residents;
- 23 (c) the physical facilities must meet all fire and 24 safety standards established by the state and locality. In 25 addition, the facility shall must meet such the provisions

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of the life safety code of the national fire protection association as that are applicable to it.

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- (d) there must be special facilities for nonambulatory residents to assure ensure their safety and comfort, including special fittings on toilets and wheelchairs.

  Appropriate provision shall must be made to permit nonambulatory residents to communicate their needs to staff.
- (9) Residents shall have a right to receive prompt and adequate medical treatment for any physical or mental ailments or injuries or physical disabilities and for the prevention of any illness or disability. Such medical treatment shall must meet standards of medical practice in the community. However, nothing in this subsection may be interpreted to impair other rights of any a resident in regard to involuntary commitment for mental illness, use of psychotropic medication, use of hazardous, aversive, or experimental procedures, or the refusal of such treatment.
- 18 (10) Corporal punishment shall is not be permitted.
- 19 (11) The opportunity for religious worship shall must be
  20 accorded to each resident who desires such worship.
  21 Provisions for religious worship shall must be made
  22 available to all residents on a nondiscriminatory basis. No
  23 An individual shall may not be compelled to engage in any
  24 religious activities.
  - (12) Residents shall have a right to a nourishing,

1 well-balanced diet. The diet for residents shall must

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- 2 provide at a minimum the recommended daily dietary allowance
- 3 as developed by the national academy of sciences. Provisions
- 4 shall must be made for special therapeutic diets and for
- 5 substitutes at the request of the resident, his parents,
- guardian, or next of kin, or the responsible person
- 7 appointed by the court in accordance with the religious
- 8 requirements of any resident's faith. Denial of a
- 9 nutritionally adequate diet shall may not be used as
- 10 punishment.

- 11 (13) Residents shall have a right to regular physical
- 12 exercise several times a week. It shall-be is the duty of
- 13 the facility to provide both indoor and outdoor facilities
- 14 and equipment for such exercise. Residents shall have a
  - right to be outdoors daily in the absence of contrary
- 16 medical considerations.
- 17 (14) Residents shall have a right, under appropriate
- 18 supervision, to suitable opportunities for the interaction
- 19 with members of the opposite sex except where a the
- 20 individual treatment planning team or the qualified mental
- 21 <u>retardation</u> professional person responsible for the
- 22 formulation of a particular resident's habilitation plan
- 23 writes an order to the contrary and explains the reasons
- 24 therefor for the order. The order must be renewed monthly if
- 25 the restriction is to be continued."

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condition of the resident."

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1 Section 18. Section 53-20-145, MCA, is amended to read: 2 \*53-20-145. Right to be free from unnecessary or excessive medication. Residents have a right to be free from 3 unnecessary or excessive medication. No-medication-shall Medication may not be administered unless at the written 6 order of a physician. The professional-person-in-charge-of the-facility individual treatment planning team and the attending physician shall--be are responsible for all medication given or administered to a resident. The use of 9 10 medication shall may not exceed standards of use that are advocated by the United States food and drug administration. 11 Notation of each individual's medication shall must be kept 12 in his medical records. A pharmacist or a registered nurse 13 shall review monthly the record of each resident on 14 medication for potential adverse reactions, allergies, 15 interactions, contraindications, rationality, and laboratory 16 test modifications and shall advise the physician of any 17 18 problems. Medications shall must be reviewed quarterly by 19 the attending or staff physician. At least monthly, an attending physician shall review the drug regimen of each 20 patient on psychotropic medication. All prescriptions shall 21 must be written with a termination date that may not exceed 22 90 days. Medication for newly admitted residents shall must 23 be reviewed and reordered as necessary upon admission and 24 then every 30 days for the first 90 days. Medications shall 25

may not be used as punishment, for the convenience of staff,
as a substitute for <u>a habilitation</u> program, or in quantities
that interfere with the resident's treatment program.

Nothing in this section may be interpreted to relieve <u>any a</u>
physician or other professional or medical staff person from
any obligation to adequately monitor the medication of <u>any a</u>
resident, with due consideration to the nature of the
medication, the purpose for which it is given, and the

Section 19. Section 53-20-146, MCA, is amended to read:

"53-20-146. Right not to be subjected to certain treatment procedures. (1) Residents of a residential facility shall have a right not to be subjected to any unusual or hazardous treatment procedures without the express and informed consent of the resident, if the resident is able to give such consent, and of his parents or guardian or the responsible person appointed by the court after opportunities for consultation with independent specialists and legal counsel. Such proposed procedures shall must first have been reviewed and approved by the mental disabilities board of visitors before such consent shall-be is sought.

(2) Physical restraint shall may be employed only when absolutely necessary to protect the resident from injury to himself or to prevent injury to others. Mechanical supports

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- 1 used to achieve proper body position and balance which that are ordered by a physician are not considered a physical 3 restraint. Restraint shall may not be employed as punishment, for the convenience of staff, or as a substitute for a habilitation program. Restraint shall may be applied only if alternative techniques have failed and only if such 7 the restraint imposes the least possible restriction consistent with its purpose. Only-a-professional-person-may 9 authorize-the-use Use of restraints may be authorized by a 10 physician, professional person, or qualified mental retardation professional. Orders for restraints by --- a 11 12 professional -- person -- shall must be in writing and shall may 13 not be in force for longer than 12 hours. Whenever physical 14 restraint is ordered, suitable provision shall must be made 15 for the comfort and physical needs of the person restrained.
  - (3) Seclusion, defined as the placement of a resident alone in a locked room for nontherapeutic purposes, shall may not be employed. Legitimate "time out" procedures may be utilized under close and direct professional supervision as a technique in behavior-shaping programs.

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(4) Behavior modification programs involving the use of noxious or aversive stimuli shall must be reviewed and approved by the mental disabilities board of visitors and shall may be conducted only with the express and informed consent of the affected resident, if the resident is able to

give such consent, and of his parents or guardian or the responsible person appointed by the court after opportunities for consultation with independent specialists

and with legal counsel. Such behavior modification programs

- shall may be conducted only under the supervision of and in
- the presence of a <u>qualified mental retardation</u> professional
- 7 person who has had proper training in such techniques.
  - (5) No A resident shall may not be subjected to a behavior modification program which that attempts to excinguish socially appropriate behavior or to develop new behavior patterns when such behavior modifications serve only institutional convenience.

(6) Electric shock devices shall-be are considered a

- research technique for the purpose of this part. Such 14 15 devices shall may be used only in extraordinary 16 circumstances to prevent self-mutilation leading to repeated 17 and possibly permanent physical damage to the resident and only after alternative techniques have failed. The use of 18 such devices shall--be is subject to the conditions 19 prescribed by this part for experimental research generally 20 21
- and shall may be used only under the direct and specific order of the professional person in charge a physician and
- 23 the superintendent of the residential facility."
- Section 20. Section 53-20-148, MCA, is amended to read:
- 25 \*53-20-148. Right to habilitation. (1) Persons admitted

- residential facilities shall have a right to 1 habilitation, including medical treatment, education, and 2 care suited to their needs, regardless of age, degree of 3 retardation, or handicapping condition. Each resident has a 4 right to a habilitation program which that will maximize his 5 human abilities and enhance his ability to cope with his 6 environment. Every residential facility shall recognize that 7 each resident, regardless of ability or status, is entitled 8 to develop and realize his fullest potential. The facility 9 shall implement the principle of normalization so that each 10 11 resident may live as normally as possible.
- 12 (2) Residents shall have a right to the least
  13 restrictive conditions necessary to achieve the purposes of
  14 habilitation. To this end, the facility shall make every
  15 attempt to move residents from:
- 16 (a) more to less structured living;
- 17 (b) larger to smaller facilities;
- 18 (c) larger to smaller living units;
- (d) group to individual residence residences;
- 20 (e) segregated from the community to integrated into
- 21 the community living;

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- (f) dependent to independent living.
- 23 (3) Within 30 days of his admission to a residential
- 24 facility, each resident shall  $\underline{\text{must}}$  have an evaluation by
- 25 appropriate specialists for programming purposes.

- 1 (4) Each resident shall must have an individualized
  2 habilitation plan formulated by the facility an individual
  3 treatment planning team. This plan shall must be developed
- 4 by-appropriate-professional-persons-and implemented as soon
  5 as possible, but no later than 30 days after the resident's
- 6 admission to the facility. An interim program of
- 7 habilitation, based on the preadmission evaluation conducted
- pursuant to this part, shall must commence promptly upon the
- 9 resident's admission. Each individualized habilitation plan
- 10 shall must contain:
- 11 (a) a statement of the nature of the specific
- 12 limitations and the needs of the resident;
- (b) a description of intermediate and long-range
- 14 habilitation goals with a projected timetable for their
- 15 attainment;
- (c) a statement of and an explanation for the plan of
- 17 habilitation for achieving these intermediate and long-range
- 18 goals:
- 19 (d) a statement of the least restrictive setting for
- 20 habilitation necessary to achieve the habilitation goals of
- 21 the resident:
- 22 (e) a specification of the professional---persons
  - professionals and other staff members who are responsible
- 24 for the particular resident's attaining these habilitation
- 25 goals;

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(f) criteria for release to less restrictive settings for habilitation, based on the resident's needs, including criteria for discharge and a projected date for discharge.

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- (5) As part of his habilitation plan, each resident shall must have an individualized postinstitutionalization plan that includes an identification of services needed to make a satisfactory community placement possible. This plan shall must be developed by a-professional-person-who the individual treatment planning team that shall begin preparation of such the plan upon the resident's admission 11 to the institution facility and shall complete such the plan 12 as soon as practicable. The parents or quardian or next of 13 kin of the resident, the responsible person appointed by the 14 court, if any, and the resident, if able to give informed consent, shall must be consulted in the development of such 15 the plan and shall must be informed of the content of such 16 17 the plan.
  - qualified mental retardation professional person shall whenever possible be responsible for supervising implementation of the habilitation plan, integrating the various aspects of the habilitation program, and recording the resident's progress as measured by objective indicators. This The qualified mental retardation professional person shall also be responsible for ensuring that the resident is

(6) In the interests of continuity of care,

- released when appropriate to a less restrictive habilitation setting.
- (7) The habilitation plan shall must be reviewed 3 monthly by the qualified mental retardation professional person responsible for supervising the implementation of the plan and shall must be modified if necessary. In addition, 6 months after admission and at least annually thereafter, each resident shall must receive a comprehensive psychological, social, habilitative, and medical diagnosis 10 and evaluation and his habilitation plan shall must be reviewed by-an-interdisciplinary-team-of-no--less--than--two 11 12 professional--persons--and-such-resident-care-workers-as-are 13 directly-involved-in-his-habilitation-and-care and revised 14 accordingly by the individual treatment planning team. A 15 habilitation plan shall must be reviewed monthly.
- 16 (8) Each resident placed in the community shall must 17 receive transitional habilitation assistance.
  - (9) The professional-person-in-charge superintendent of the residential facility, or his designee, shall report in writing to the parents or quardian of the resident or the responsible person at least every 6 months on the resident's habilitation and medical condition. Such The report shall must also state any appropriate habilitation program which that has not been afforded to the resident because of

inadequate habilitation resources.

(10) The Each resident, the parents or guardian of each resident, or and the responsible person appointed by the court shall must promptly upon the resident's admission receive a written copy of and be orally informed of all the above standards for adequate habilitation.—Each—resident—if the—resident—is—able—to—comprehend,—shall—promptly—upon—his admission—be—orally—informed—in—clear—language—of—the—above standards—and,—where—appropriate,—be—provided—with—a—written copy:—In—addition,—the—parents,—guardian,——responsible person,—and—where—able—to—comprehend,—the—resident—shall receive—such, the rights accorded by 53-20-142, and other information concerning the care and habilitation of the resident as that may be available to assist them in understanding the situation of the resident and the rights of the resident in the institution facility."

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Section 21. Section 53-20-161, MCA, is amended to read:

"53-20-161. Maintenance of records. (1) Complete records for each resident shall must be maintained and shall must be readily available to professional persons;—to—the resident-care—workers who are directly involved with the particular resident; and to the mental disabilities board of visitors. All information contained in a resident's records shall must be considered privileged and confidential. The parents or guardian, the responsible person appointed by the court, and any person properly authorized in writing by the

- resident, if such the resident is capable of giving informed
- 2 consent, or by his parents or guardian or the responsible
- 3 person shall must be permitted access to the resident's
- 4 records. No-information Information may not be released from
- 5 the records of a resident or former resident of the
  - residential facility unless the release of such the
- 7 information has been properly authorized in writing by:
- (a) the court;
- 9 (b) the resident or former resident if he is over the 10 age of majority and is capable of giving informed consent;
- 11 (c) the parents or guardian in charge of a resident
- 12 under the age of 12;
- (d) the parents or guardian in charge of a resident
- 14 over the age of 12 but under the age of majority and the
- 15 resident if the resident is capable of giving informed
- 16 consent;
- 17 (e) the guardian of a resident over the age of majority
- 18 who is incapable of giving informed consent:
- 19 (f) the superintendent of the residential facility or
- 20 his designee as custodian of a resident over the age of
- 21 majority who is incapable of giving informed consent and for
- 22 whom no legal guardian has been appointed:
- 23 (g) the superintendent of the residential facility or
- 24 his designee as custodian of a resident under the age of
- 25 majority for whom there is no parent or legal guardian; or

1 (h) the superintendent of the residential facility or his designee as custodian of a resident of that facility whenever release is required by federal or state law or department of social and rehabilitation services rules.

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5 (2) Information may not be released by a superintendent 6 or his designee as set forth in subsection (1)(f), (1)(g). 7 or (1)(h) less than 15 days after sending notice of the proposed release of information to the resident, his parents 8 9 or quardian, the attorney who most recently represented the 10 resident, if any, the responsible person appointed by the 11 court, if any, and the court which that ordered the admission. If any of the parties so notified objects to the 12 13 release of information, they may petition the court for a 14 hearing to determine whether the release of information 15 should be allowed. No--information Information may not be released pursuant to subsection (1)(f), (1)(g), or (1)(h)16 17 unless it is released to further some legitimate need of the resident or to accomplish a legitimate purpose of the 18 19 institution facility which that is not inconsistent with the 20 needs and rights of the resident. No-information Information may not be released pursuant to these subsections except in 21 accordance with written policies consistent with the 22 requirements of this part adopted by the institution 23 24 facility. Persons receiving notice of a proposed release of 25 information shall also receive a copy of the written policy

- the institution facility governing release of information.
- 3 (3) These records shall must include:
- (a) identification data, including the resident's legal
- 6 (b) the resident's history, including but not limited to:
- (i) family data, educational background, and employment record:
- 10 (ii) prior medical history, both physical and mental, including prior institutionalization; 11
- 12 (c) the resident's grievances, if any;
- 13 (d) an inventory of the resident's life skills.
- 14 including mode of communication:
- 15 (e) a record of each physical examination which that 16 describes the results of the examination;
- 17 (f) a copy of the individual habilitation plan and any
- 18 modifications thereto and an appropriate summary which that
  - quide and assist the resident care workers in
- 20 implementing the resident's program:
- 21 (g) the findings made in monthly reviews of
- 22 habilitation plan, which findings shall must include an
- 23 analysis of the successes and failures of the habilitation
- 24 program and shall direct whatever modifications are
- 25 necessary;

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status:

- 1 (h) a copy of the postinstitutionalization plan that 2 includes a statement of services needed in the community and 3 any modifications thereto and a summary of the steps that have been taken to implement that plan; 4
- 5 (i) a medication history and status;
- 6 (j) a summary of each significant contact by a professional person with a resident;
- 8 (k) a summary of the resident's response to his 9 habilitation plan, prepared by a qualified mental retardation professional person involved in the resident's 10 11 habilitation and recorded at least monthly. 12 possible, such response shall must be scientifically 13 documented.
- (1) a monthly summary of the extent and nature of the 14 resident's work activities and the effect of such the 15 16 activity upon the resident's progress along in 17 habilitation plan;
- 18 (m) a signed order by a qualified mental retardation professional, professional person, or physician for any 19 20 physical restraints;
- 21 (n) a description of any extraordinary incident or accident in the facility involving the resident, to be 22 23 entered by a staff member noting personal knowledge of the incident or accident or other source of information, 24 25 including any reports of investigations of resident's

1 mistreatment:

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- (o) a summary of family visits and contacts: 2
- (p) a summary of attendance and leaves from 3 the facility; 4
- (q) a record of any seizures, illnesses, injuries, and 5 treatments thereof and immunizations." 6
- 7 Section 22. Section 53-20-162, MCA, is amended to read:
- "53-20-162. Training for resident care workers. All resident care workers who have not had prior clinical experience in a residential facility for habilitation of the 10 developmentally disabled shall-have must be given suitable 11
- 12 orientation training. Staff members on all levels shall-have
- 1.3 must be given suitable, regularly scheduled in-service training. Each resident care worker shall be-under-the 14
- 15 direct-professional-supervision--of--a--professional--person
- 16 receive supervision that emphasizes the protection of
- residents and their rights." 17
- 18 Section 23. Section 53-20-163, MCA, is amended to read:
- 19 "53-20-163. Abuse of residents prohibited. (1) Every
- residential facility shall prohibit mistreatment, neglect, 20
- 21 or abuse in any form of any resident. Alleged violations
  - shall must be reported immediately to the professional
- person-in-charge superintendent of the facility, and there 23
- 24 shall must be a written record that:
- 25 (a) each alleged violation has been thoroughly

1 investigated and findings stated;

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- 2 (b) the results of such the preliminary investigation
  3 are reported to the professional--person--in--charge
  4 superintendent of the facility within 24 hours of the report
  5 of the incident.
  - (2) Such The reports shall must also be made to the mental disabilities board of visitors monthly and-to-the developmental-disabilities—advisory—council—at—its—next scheduled—public—meeting. Each facility shall cause a written statement of this policy to be posted in each cottage and building and circulated to all staff members."
- Section 24. Section 53-20-164, MCA, is amended to read:

  13 \*53-20-164. Resident labor. The following rules shall
  14 govern resident labor:
  - (1) No A resident shall may not be required to perform labor which that involves the operation and maintenance of the facility or for which the facility is under contract with an outside organization. Privileges or release from the facility shall may not be conditioned upon the performance of labor covered by this provision. Residents may voluntarily engage in such labor if the labor is compensated in accordance with the minimum wage laws of the Fair Labor Standards Act, 29 U.S.C.7-sec. 206, as amended.
  - (2) No A resident shall may not be involved in the care (feeding, clothing, bathing), training, or supervision of

- 1 other residents unless he:
- 2 (a) has volunteered;
- 3 (b) has been specifically trained in the necessary
- 4 skills;
- 5 (c) has the humane judgment required for such 6 activities:
- (d) is adequately supervised; and
- 8 (e) is reimbursed in accordance with the minimum wage
- 9 laws of the Fair Labor Standards Act, 29 U.S.C.7-sect 206,
- 10 as amended.
- 11 (3) Residents may be required to perform vocational
- 12 training tasks which that do not involve the operation and
- 13 maintenance of the facility, subject to a presumption that
- 14 an assignment of longer than 3 months to any task is not a
- 15 training task, provided the specific task or any change in
- 16 task assignment is:
- 17 (a) an integrated part of the resident's habilitation
- 18 plan and approved as a habilitation activity by a the
- 19 qualified mental retardation professional person and the
- 20 individual treatment planning team responsible fo
- 21 supervising the resident's habilitation; and
- 22 (b) supervised by a staff member to oversee th
- 23 habilitation aspects of the activity.
- 24 (4) Residents may voluntarily engage in habilitative
- 25 labor at nonprogram hours for which the facility would

- otherwise have to pay an employee, provided the specific labor or any change in labor is:
- 3 (a) an integrated part of the resident's habilitation
  4 plan and approved as a habilitation activity by a the
  5 qualified mental retardation professional person and the
  6 individual treatment planning team responsible for
  7 supervising the resident's habilitation:
- 8 (b) supervised by a staff member to oversee the 9 habilitation aspects of the activity; and
- 10 (c) compensated in accordance with the minimum wage
  11 laws of the Fair Labor Standards Act, 29 U.S.C., -sec= 206,
  12 as amended.
- 13 (5) If any a resident performs habilitative labor which that involves the operation and maintenance of a facility 14 15 but due to physical or mental disability is unable to 16 perform the labor as efficiently as a person not so 17 physically or mentally disabled, then such the resident may 18 compensated at a rate which that bears the same 19 approximate relation to the statutory minimum wage as his 20 ability to perform that particular job bears to the ability of a person not so afflicted. 21
- 22 (6) Residents may be required to perform tasks of a 23 personal housekeeping nature, such as the making of one's 24 own bed.
- 25 (7) Deductions or payments for care and other charges

- 1 shall may not deprive a resident of a reasonable amount of
- 2 the compensation received pursuant to this section for
- 3 personal and incidental purchases and expenses.
- 4 (B) Staffing shall must be sufficient so that the
  - facility is not dependent upon the use of residents or
- 6 volunteers for the care, maintenance, or habilitation of
- 7 other residents or for income-producing services. The
- 8 facility shall formulate a written policy to protect the
  - residents from exploitation when they are engaged in
- 10 productive work."

- 11 NEW SECTION. Section 25. Repealer. Sections 53-20-115,
- 12 53-20-117, 53-20-120, 53-20-122, 53-20-123, and 53-20-124,
- 13 MCA, are repealed.
- 14 NEW SECTION. Section 26. Codification instruction.
- 15 [Section 1] is intended to be codified as an integral part
- 16 of Title 53, chapter 20, part 1, and the provisions of Title
- 17 53, chapter 20, part 1, apply to [section 1].
- 18 NEW SECTION. Section 27. Termination. The amendment to
- 19 the definition of "seriously developmentally disabled" in
- 20 53-20-102(15) terminates September 30, 1993.

-End-

## STATE OF MONTANA - FISCAL NOTE

#### Form BD-15

In compliance with a written request, there is hereby submitted a Fiscal Note for SB0250, as introduced.

#### DESCRIPTION OF PROPOSED LEGISLATION:

A bill for an act entitled: "An act amending the laws relating to commitment of persons who are developmentally disabled; providing an administrative screening process prior to commitment; clarifying terminology; providing for a new definition of seriously developmentally disabled; amending sections; and providing a termination date."

#### **ASSUMPTIONS:**

- 1. SB0250 rewrites current Developmentally Disabled (DD) commitment laws and has a programmatic impact on the Department of Institutions (DOI) because as it changes the DD commitment laws to Montana Developmental Center (MDC) and Eastmont Human Services Center (EHSC).
- 2. SB0250 is needed to carry out the Montana Developmental Disabilities Service System (MDDSS) action plan and reduce MDC to 100-110 residents.
- 3. A four member screening team will be created to evaluate, review, and make recommendations to the courts.
- 4. The team will consist of one staff member each from the DOI. Department of Social and Rehabilitation Services (SRS), and a corporation currently serving adults with developmental disabilities. The fourth member will be a consumer-oriented person. The \*ream will rely on "professional persons" to assist with this process.
- 5. An evaluation by the team will occur for each individual seeking commitment or recommitment to MDC or EHSC.
- 6. The number of commitment requests is estimated at less than 12 per year.
- 7. The number of recommitments will be approximately 160 after Phase IV of the MDDSS action plan has been completed.
- 8. The team will have six two-day meetings to review recommitments and make recommendations.
- 9. The team will have twelve one-day meetings to review commitments and determine the team recommendation to the court.
- 10. The required professional persons will be staff at DOI and SRS or private consultants.
- 11. The medicaid administrative match rate of 50/50 will be applied to all expenses relating to medicaid-eligible individuals.

#### FISCAL IMPACT:

	FY 92		FY 93			
	Current Law	Proposed Law	<u>Difference</u>	Current Law	Proposed Law	Difference
Expenditures:						
Operating	0	16,602	16,602	0	22,136	22,136
Equipment	0	2,725	2,725	0	0	0
Total	0	19,327	19,327	0	22,136	22,136
Funding:						
General Fund	0	10,630	10,630	0	12,175	12,175
Federal Funds	0	8,697	8,697	0	9,961	9,961
Total	0	19,327	19,327	, 0	22,136	22,136
/ / /				7		

ROD SUNDSTED, BUDGET DIRECTOR

DATE

Office of Budget and Program Planning

HOMAS F. KEATING, PRIMARY SPONSOR

Fiscal Note for SB0250, as introduced

SB 250

Fiscal Note Request,  $\underline{SB0250}$ , as introduced Form BD-15 Page 2

## EFFECT ON COUNTY OR OTHER LOCAL REVENUES OR EXPENDITURES:

None

### LONG-RANGE EFFECTS OF PROPOSED LEGISLATION:

The legislation should prevent inappropriate placement of persons in residential facilities, which have the highest per-day service costs. Placement of persons in other services will require funding in community-based services.

# APPROVED BY COMMITTEE

ON JUDICIARY

1	SENATE BILL NO. 250
2	INTRODUCED BY KEATING, MAZUREK, GAGE, SWYSGOOD,
3	J. RICE, T. BECK, CRIPPEN, GRINDE, GRADY,
4	HARDING, STRIZICH, BOHARSKI, DARKO, STICKNEY,
5	J. JOHNSON, VAUGHN, BRADLEY
6	BY REQUEST OF THE DEPARTMENT OF INSTITUTIONS
7	AND THE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES
8	
9	A BILL FOR AN ACT ENTITLED: "AN ACT AMENDING THE LAWS
10	RELATING TO COMMITMENT OF PERSONS WHO ARE DEVELOPMENTALLY
11	DISABLED; PROVIDING AN ADMINISTRATIVE SCREENING PROCESS
12	PRIOR TO COMMITMENT; CLARIFYING TERMINOLOGY; PROVIDING FOR A
13	NEW DEFINITION OF SERIOUSLY DEVELOPMENTALLY DISABLED;
14	AMENDING SECTIONS 53-20-102, 53-20-104, 53-20-106,
15	53-20-111, 53-20-112, 53-20-113, 53-20-116, 53-20-121,
16	53-20-125, 53-20-127, 53-20-128, 53-20-129, 53-20-131,
17	53-20-132, 53-20-141, 53-20-142, 53-20-145, 53-20-146,
18	53-20-148, 53-20-161, 53-20-162, 53-20-163, AND 53-20-164,
19	MCA; REPEALING SECTIONS 53-20-115, 53-20-117, 53-20-120,
20	53-20-122, 53-20-123, AND 53-20-124, MCA; AND PROVIDING A
21	TERMINATION DATE."
22	
23	STATEMENT OF INTENT
24	This bill provides a new definition of seriously
25	developmentally disabled and establishes a new

for complete text.

The only change on this bill is on line 23, page 48 (below). Please refer to introduced copy (white)

21 <u>NEW SECTION.</u> Section 27. Termination. The amendment to

22 the definition of "seriously developmentally disabled" in

23 53-20-102(15) terminates September 30, 1993 1995.

-End-

SECOND READING

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SB 250

2	INTRODUCED BY KEATING, MATUREK, GAGE, SWYSGOOD,
3	J. RICE, T. BECK, CRIPPEN, GRINDE, GRADY,
4	HARDING, STRIZICH, BOHARSKI, DARKO, STICKNEY,
5	J. JOHNSON, VAUGHN, BRADLEY
6	BY REQUEST OF THE DEPARTMENT OF INSTITUTIONS
7	AND THE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES
8	
9	A BILL FOR AN ACT ENTITLED: "AN ACT AMENDING THE LAWS
.0	RELATING TO COMMITMENT OF PERSONS WHO ARE DEVELOPMENTALLY
.1	DISABLED; PROVIDING AN ADMINISTRATIVE SCREENING PROCESS
.2	PRIOR TO COMMITMENT; CLARIFYING TERMINOLOGY; PROVIDING FOR A
13	NEW DEFINITION OF SERIOUSLY DEVELOPMENTALLY DISABLED;
L4	AMENDING SECTIONS 53-20-102, 53-20-104, 53-20-106,
15	53-20-111, 53-20-112, 53-20-113, 53-20-116, 53-20-121,
L <b>6</b>	53-20-125, 53-20-127, 53-20-128, 53-20-129, 53-20-131,
17	53-20-132, 53-20-141, 53-20-142, 53-20-145, 53-20-146,
18	53-20-148, 53-20-161, 53-20-162, 53-20-163, AND 53-20-164,
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20	53-20-122, 53-20-123, AND 53-20-124, MCA; AND PROVIDING A
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24	This bill provides a new definition of seriously
25	developmentally disabled and establishes a new

SENATE BELL NO. 250

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21 NEW SECTION. Section 27. Termination. The amendment to

22 the definition of "seriously developmentally disabled" in

23 53-20-102(15) terminates September 30, ±993 1995.

-End-

THIRD READING

-48-

Sh 24

#### HOUSE STANDING COMMITTEE REPORT

March 15, 1991 Page 1 of 1

Mr. Speaker: We, the committee on <u>Judiciary</u> report that Senate Bill 250 (third reading copy -- blue) bacconcurred in as

amended .

Signeda

Bill Strizich, Chairman

Carried by: Rep. Messmore

## And, that such amendments read:

1. Page 12. Following: line 20

Insert: "(2) A person admitted to a residential facility for evaluation and treatment or for an extended course of habilitation may knowingly and intentionally waive his rights only with the concurrence of the person's counsel, if any, or, if he has no counsel, his parents, guardian, or other responsible person appointed by the court."

Renumber: subsequent subsection

HOUSE

5 B Z 5 O 5 6 1 4 0 1 S C . H S F

2	INTRODUCED BY KEATING, MAZUREK, GAGE, SWYSGOOD,
3	J. RICE, T. BECK, CRIPPEN, GRINDE, GRADY,
4	HARDING, STRIZICH, BOHARSKI, DARKO, STICKNEY,
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6	BY REQUEST OF THE DEPARTMENT OF INSTITUTIONS
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9	A BILL FOR AN ACT ENTITLED: "AN ACT AMENDING THE LAWS
10	RELATING TO COMMITMENT OF PERSONS WHO ARE DEVELOPMENTALLY
11	DISABLED; PROVIDING AN ADMINISTRATIVE SCREENING PROCESS
12	PRIOR TO COMMITMENT; CLARIFYING TERMINOLOGY; PROVIDING FOR A
13	NEW DEFINITION OF SERIOUSLY DEVELOPMENTALLY DISABLED;
14	AMENDING SECTIONS 53-20-102, 53-20-104, 53-20-106,
15	53-20-111, 53-20-112, 53-20-113, 53-20-116, 53-20-121,
16	53-20-125, 53-20-127, 53-20-128, 53-20-129, 53-20-131,
17	53-20-132, 53-20-141, 53-20-142, 53-20-145, 53-20-146,
18	53-20-148, 53-20-161, 53-20-162, 53-20-163, AND 53-20-164,
19	MCA; REPEALING SECTIONS 53-20-115, 53-20-117, 53-20-120,
20	53-20-122, 53-20-123, AND 53-20-124, MCA; AND PROVIDING A
21	TERMINATION DATE."
22	
23	STATEMENT OF INTENT
24	This bill provides a new definition of seriously
26	dovolonmentally disabled and establishes a new

SENATE BILL NO. 250

administrative process as part of the commitment of seriously developmentally disabled persons to residential facilities of the state of Montana. These changes are necessary to provide a commitment standard and process that will meet the new mission that has been developed for the state-operated residential facilities. The new definition of seriously developmentally disabled incorporates behavioral language to cover endangered and dangerous persons as well as self-help deficit language to 10 cover current residents. The incorporation into the 11 commitment process of an administrative screening team 12 ensures that persons who are to be placed in a residential 13 facility are thoroughly considered for placement in 14 community services before a commitment may be made. 15 Rules are necessary to implement the administrative 16 screening process. Rules necessary for the screening process 17 must provide for the membership, terms, and various 18 responsibilities of the team and the standards 19 procedures used by the team in making placement

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23 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

changes in the definition of professional person.

NEW SECTION. Section 1. Residential facility screening team -- referral by court -- membership -- rules. (1) When

determinations. New rules are to be adopted to implement the

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- 1 the district court considers a person for commitment to a 2 residential facility under this part, the court shall refer 3 the person to the residential facility screening team for 4 screening to determine whether placement and habilitation in 5 a residential facility are appropriate for the person.
  - (2) A court may not commit a person to a residential facility under 53-20-125 unless the residential facility screening team determines that placement and habilitation in a residential facility are appropriate for the person.

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- (3) The residential facility screening team may not determine that placement and habilitation in a residential 12 facility are appropriate unless the residential facility 13 screening team determines that the person is seriously 14 developmentally disabled.
  - (4) The residential facility screening team shall provide the court with the social and placement information relied upon by the residential facility screening team in making its determination.
- 19 (5) For purposes of this part, the department of social 20 and rehabilitation services and the department of 21 institutions shall adopt rules providing for the membership 22 and terms of the members of the residential facility 23 screening team and setting forth the criteria and procedures 24 govern the determinations made by the residential 25 facility screening team.

-3-

- Section 2. Section 53-20-102, MCA, is amended to read:
- \*53-20-102. Definitions. As used in this part, the following definitions apply:
- (1) "Board" or "mental disabilities board of visitors" means the mental disabilities board of visitors created by 2-15-211.
- (2) "Community-based facilities" or "community-based services" includes those services and facilities which are available for the evaluation, treatment, and habilitation of 10 the developmentally disabled in a community setting, including but not limited to outpatient facilities, special 11 12 education services, group homes, foster homes, day-care 13 facilities, sheltered workshops, and other community-based 14 services and facilities.
- 15 (3) "Court" means a district court of the state of 16 Montana.
- 17 (4) "Developmentally disabled" means suffering from a 18 disability attributable to mental retardation, cerebral 19 palsy, epilepsy, autism, or any other neurologically 20 handicapping condition closely related to mental retardation 21 and requiring treatment similar to that required by mentally 22 retarded individuals if the disability originated before the 23 individual attained age 18, has continued or can be expected 24 to continue indefinitely, and constitutes a substantial

handicap of such individual.

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1	(5) "Habilitation" means the process by which a person
2	who is developmentally disabled is assisted to acquire and
3	maintain those life skills which enable him to cope more
4	effectively with the demands of his own person and
5	environment and to raise the level of his physical, mental,
6	and social efficiency. Habilitation includes but is not
7	limited to formal, structured education and treatment.
8	(6) "Individual treatment planning team" means the
9	interdisciplinary team of persons involved in and

12 the team.
13 (6)(7) "Next of kin" includes but need not be limited
14 to the spouse, parents, adult children, and adult brothers
15 and sisters of a person.

responsible for the habilitation of a person committed to a

residential facility. The committed person is a member of

- 16 (7)(8) "Professional person" means:
- 17 (a) a licensed medical-doctor;-or
- 18 (b)--a---person--who--has--been psychologist, licensed
- 19 psychiatrist, or a person with a master's degree in
- 20 psychology, who:

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- (i) has training and experience in psychometric testingand evaluation;
- 23 <u>(ii) has experience in the field of developmental</u>
  24 disabilities; and
- 25 (iii) is certified as provided for in 53-20-106 by the

- department of social and rehabilitation services and the department of institutions.
- 3 (9) "Qualified mental retardation professional" means a
  4 person who has at least 1 year of experience working
  5 directly with persons with mental retardation or other
- 6 developmental disabilities and who is:
- 7 (a) a licensed physician or osteopath;
  - (b) a registered nurse; or
- 9 (c) a professional program staff person for the
  10 residential facility who the department of institutions
  11 determines meets the professional requirements necessary for
- 12 federal certification of the facility.
- 13 (0)(10) "Resident" means a person admitted to a

  14 residential facility for a course of evaluation, treatment,

  15 or habilitation.
- 16 +9+(11) "Residential facility" or "facility" means any residential-hospital-or-hospital-and-school-which-exists-for 17 18 the--purpose--of--evaluating--treating--and-habilitating-the 19 developmentally-disabled-on-an-inpatient--basis;--including 20 the Montana developmental center and the Eastmont human 21 services center. The-term-does-not--include--a--group--home; 22 foster--home,-or-halfway-house,-A-correctional-facility-or-a 23 facility-for-the-treatment-of-the-mentally-ill-shall-not--be 24 a-"residential-facility"-within-the-meaning-of-this-part-
- 25 (12) "Residential facility screening team" means a team

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this part.

of persons appointed as provided in [section 1].

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2 (10)(13) "Respondent" means a person alleged in a
3 petition filed pursuant to this part to be developmentally
4 disabled and in need of developmental disability services.

5 (11)(14) "Responsible person" means any person willing
6 and able to assume responsibility for a person who is
7 developmentally disabled or alleged to be developmentally
8 disabled.

ti2)(15) "Seriously developmentally disabled" means developmentally-disabled-due-to-developmental-or-physical disability-or-a-combination-of-both7-rendering-a-person unable-to-function-in-a-community-based-setting-and-which has-resulted-in-self-inflicted-injury-or-injury-to-others-or the-imminent-threat-thereof-or-which-has-deprived-the-person afflicted-of-the-ability-to-protect-his-life-or-health: a person who:

- (a) is developmentally disabled;
- 18 (b) is impaired in cognitive functioning; and
- 19 (c) has behaviors that pose an imminent risk of serious
  20 harm to self or others or self-help deficits so severe as to
  21 require total care or near total care and because of those
  22 behaviors or deficits, cannot be safely and effectively
- 23 habilitated in community-based services."
- Section 3. Section 53-20-104, MCA, is amended to read:
- 25 "53-20-104. Powers and duties of mental disabilities

- board of visitors. (1) The board shall-be is an independent board of inquiry and review to assure ensure that the treatment of all persons admitted to a residential facility is humane and decent and meets the requirements set forth in
- 6 (2) The board shall review all plans for experimental 7 research or hazardous treatment procedures involving persons 8 admitted to any a residential facility to assure ensure that 9 the research project is humane and not unduly hazardous and 10 that it complies with the principles of the statement on the 11 use of human subjects for research of the American 12 association on mental deficiency and with the principles for research involving human subjects required by the United 13 14 States department of healthy-educationy and welfare human 15 services. No An experimental research project involving 16 persons admitted to any a residential facility affected by 17 this part may not be commenced unless it is approved by the 18 mental disabilities board of visitors.
- 19 (3) The board shall investigate all cases of alleged 20 mistreatment of a resident.
- 21 (4) The board shall at least annually inspect every
  22 residential facility which that is providing a course of
  23 residential habilitation and treatment to any person
  24 pursuant to this part. The board shall inspect the physical
  25 plant, including residential, recreational, dining, and

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- sanitary facilities. It shall visit all wards and treatment 1 or habilitation areas. The board shall inquire concerning 2 all habilitation programs being implemented by the 3 institution facility.
- (5) The board shall inspect the file of each person 5 admitted to a residential facility pursuant to this part to 6 insure ensure that a habilitation plan exists and is being 7 implemented. The board shall inquire concerning all use of 8 restraints, isolation, or other extraordinary measures. 9

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- (6) The board may assist any a resident at a residential facility in resolving any grievance he may have concerning his admission or his course of treatment and habilitation in the facility.
- (7) If the board believes that any a facility is failing to comply with the provisions of this part in regard to its physical facilities or its treatment of any resident, it shall report its findings at once to the professional person--in--charge superintendent of the facility and the director of the department of institutions. If appropriate, after waiting a reasonable time for a response from such 20 professional-person the superintendent or the director, the 21 board may notify the parents or quardian of any the resident 22 involved, the next of kin, if known, the responsible person 23 appointed by the court for any the resident involved, and 24 the district court which that has jurisdiction over the 25

- facility.
- (8) The board shall report annually to the governor and 2 shall report to each session of the legislature concerning 3 the status of the residential facilities and habilitation programs which that it has inspected."
- Section 4. Section 53-20-106, MCA, is amended to read: 6
- \*53-20-106. Certification of professional persons. (1) The department of social and rehabilitation services and the department of institutions shall certify professional 10 persons for purposes of this part.
- (2) The department of social and rehabilitation 11 12 services and the department of institutions shall adopt rules governing the certification of professional persons. 13 The rules must establish the appropriate combination of 14 15 education, skills, and experience necessary 16 certification and set forth qualifications developed by 17 reference to recognized national standards in the field of 18 developmental disabilities, -- such-as-standards-published-by 19 the-accreditation-council-for-services-for-mentally-retarded and--other--developmentally---disabled---persons---(ACMRDD); 20 21 standards-published-in-Title-XIX-of-the-Social-Security-Act7 and-other-similar-standards." 22
- 23 Section 5. Section 53-20-111, MCA, is amended to read:
- 24 "53-20-111. Limitation on who compelled to undertake treatment. No A person who has reached the age of majority

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- 1 shall may be compelled against his will to undertake a
- 2 course of treatment and habilitation solely-because-he in a
- 3 residential facility only if the person is seriously
- 4 developmentally disabledy-but-only-if-such-disability-causes
  - him-to-be-unable-to--protect--his--life--and--health--or--to
- protect-the-life-or-safety-of-others."
- 7 Section 6. Section 53-20-112, MCA, is amended to read:
- 8 \*53-20-112. Procedural rights. (1) Any A person subject
- 9 to emergency admittance to a residential facility,--to
- 10 examination--or--evaluation--by-a-professional-person; or to
- ll any hearing held pursuant to this part shall--have has all
- 12 the rights accorded to a person subject to involuntary
- 13 commitment proceedings under the laws of this state relating
- 14 to involuntary commitment of the seriously mentally ill, as
- 15 provided in 53-21-115 through 53-21-118.
- 16 (2) In addition, the parents or quardian of any a
- 17 person alleged to be seriously developmentally disabled and
- 18 in need of developmental disabilities services have the
- 19 right to:
- 20 (a) be present at any hearing held pursuant to this
- 21 part;

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- (b) be represented by counsel in any hearing;
- 23 (c) offer evidence and cross-examine witnesses in any
- 24 hearing; and
- 25 (d) have the respondent examined by a professional

- l person of their choice when such professional person is
  - reasonably available, unless the person so chosen is
- 3 objected to by the respondent or by a responsible person
- 4 appointed by the court."
- 5 Section 7. Section 53-20-113, MCA, is amended to read:
- 6 "53-20-113. Waiver of rights. (1) A person may waive
- 7 his procedural rights provided that the waiver is knowingly
- 8 and intentionally made. The right to counsel in a hearing
- 9 held pursuant to 53-20-123 53-20-125 may not be waived. The
  - right to habilitation provided for in this part may not be
- ll waived.

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- 12 (2)--In--the-case-of-a-person-who-has-been-admitted-to-a
- 13 residential-facility-for-up-to-36--days--of--evaluation--and
- 14 treatment--or--who;--pursuant--to--the--recommendation--of-a
- 15 professional--person,--may--be--admitted--to--a--residential
- 16 facility-for-an-extended-course-of-habilitation;-a-waiver-of
- 17 rights-can-be-knowingly-and-intentionally-made-only-with-the
- 18 concurrence-of-the-person's-counsely-if-anyy-his-parents--or
- 19 guardian,-and-the-responsible-person-appointed-by-the-court,
- 20 if-any-
- 21 (2) A PERSON ADMITTED TO A RESIDENTIAL FACILITY FOR
- 22 EVALUATION AND TREATMENT OR FOR AN EXTENDED COURSE OF
- 23 HABILITATION MAY KNOWINGLY AND INTENTIONALLY WAIVE HIS
- 24 RIGHTS ONLY WITH THE CONCURRENCE OF THE PERSON'S COUNSEL, IF
- 25 ANY, OR, IF HE HAS NO COUNSEL, HIS PARENTS, GUARDIAN, OR

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-12-

1	OTHER	RESPONSIBLE	PERSON	APPOINTED	BY	THE	COURT.

- 2 (3)(2)(3) (a) In the case of a minor, the waiver of rights can may be knowingly and intentionally made:
- 4 (i) when the minor is under the age of 12, by the 5 parents of the minor with the concurrence of the responsible 6 person, if any;
- 7 (ii) when the minor is over the age of 12, by the minor 8 and his parents;
- 9 (iii) when the minor is over the age of 12 and the minor
  10 and his parents do not agree, the minor can may make an
  11 effective waiver of his rights only with the advice of
  12 counsel.

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- (b) If the court believes that there may be a conflict of interest between a minor and his parents or guardian, the court may appoint a responsible person or guardian ad litem for the minor."
- Section 8. Section 53-20-116, MCA, is amended to read:
  - "53-20-116. Professional person to attend hearing. In any hearing held pursuant to this part which--involves consideration--of---the--recommendation--and--report--of--a professional-person, a member of the residential facility screening team or the professional person who made-the recommendation-and-report-shall evaluated the person must be present at the hearing and subject to cross-examination."
  - Section 9. Section 53-20-121, MCA, is amended to read:

- 1 "53-20-121. Petition for involuntary treatment --2 contents of. (1) Any person who believes that there is a person who is seriously developmentally disabled and in need 3 of developmental--disability--services placement in a 4 residential facility may report--the--situation--to--a 5 professional-person--If--the--professional--person--believes 6 from--the--facts--given--to--him--that--the--person--may--be 7 8 developmentally---disabled--and--in--need--of--developmental 9 disability--services;--he--shall--contact--the--parents---or 10 quardian---of--the--person--alleged--to--be--developmentally 11 disabled-or-the-person-himself--If-any--of--the--persons--so 12 contacted--refuse--to-cooperate-with-the-professional-person 13 and--if--the--professional--person--believes--from--all--the 14 circumstances--of--the--case--that---the---person---may---be 15 developmentally---disabled--and--in--need--of--developmental 16 disability-services;-he-shall request the county attorney to 17 file a petition alleging that there-is-a the person in--the 18 county-who is seriously developmentally disabled and in need 19 of developmental -- disability -- services placement in a 20 residential facility.
  - (2) The petition shall must contain:
- (a) the name and address of the professional person and any-other-person requesting the petition and their interest in the case;

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(b) the name and address of the respondent;

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- the respondent and of any other person believed to be legally responsible for the care, support, and maintenance of the respondent;
- 5 (d) the name and address of the respondent's next of 6 kin, to the extent known;

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- (e) the name and address of any person who the county attorney believes might be willing and able to be appointed responsible person; and
- (f) a statement of the rights of the respondent and his parents or guardian which-shall that must be in conspicuous print and identified by a suitable heading."
- Section 10. Section 53-20-125, MCA, is amended to read:

  "53-20-125. Outcome of evaluation---and---treatment screening -- recommendation for treatment at residential facility -- hearing. (1) If as a result of the evaluation and-treatment, either-agreed-to-by-the-parents, guardian, or the-person-himself-pursuant-to-53-20-120-or-ordered--by--the court, --the--professional--person--in--charge--of--the--case screening required by [section 1] the residential facility screening team concludes that the person evaluated is seriously developmentally disabled and recommends that treatment and habilitation be-had in a residential facility on an extended basis, the professional--person team shall file his its written recommendation and report with the

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- court and request that the court order the admission. The report shall include the factual basis for the
- 3 recommendation and shall describe any tests or evaluation
- 4 devices which that have been employed in evaluating the
- 5 patient.

person.

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- 6 (2) If no responsible person has yet been appointed,
  7 the court may appoint one at this time. If there is no
  8 parent or guardian, the court shall appoint a responsible
- 10 (3) At the request of the respondent, his parents or guardian, or the responsible person, the court shall appoint counsel for the respondent. If the parents (or guardian) are indigent and if they request it, the court shall appoint counsel for the parents or guardian.
- 15 <u>(4)</u> Notice of the recommendation shall must be mailed 16 or delivered to the respondent, his parents or guardian, the 17 responsible person, next of kin, if known, and the attorney 18 for the respondent, if any, and for the parents or guardian, 19 if any.
- responsible person, or the attorney for any party may
  request that a hearing be had held on the recommendation. If
  a hearing is requested, the court shall mail or deliver
  notice of the date, time, and place of the hearing to each

of the parties listed at the beginning of this subsection.

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t2)(5) The respondent, his parents or guardian, the

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The hearing shall must be to held before the court without
jury. The rules of civil procedure shall must apply.

3 (3)(6) If the court finds that the respondent is seriously developmentally disabled and -- that -- available 5 community-based--services--are--not--adequate-to-protect-the life-and-physical-safety-of-the--person--and--others--or--to provide--appropriate--treatment--and--habititation, it shall order the respondent admitted to a residential facility for an extended course of treatment and habilitation. If the 10 court finds that the respondent is developmentally disabled but not seriously developmentally disabled, in--meed-of 11 developmental--disability---services,---and---eligible---for 12 13 placement -- in -- community - based -- services -- and - that -available 14 community-based-services-are-adequate-to--protect--the--life and--physical-safety-of-the-person-and-others-and-to-provide 15 appropriate-treatment-and-habilitation; it shall dismiss the 16 petition and refer the respondent to the department of 17 18 social and rehabilitation services to be considered for placement in community-based services according 19 53-20-209. If the court finds that the respondent is not 20 developmentally disabled or is not in need of developmental 21 disability services, it shall dismiss the petition. 22

(4)(7) If none of the parties notified of the recommendation request a hearing, the court may issue an order authorizing the person to be admitted to the

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residential facility for an extended period of treatment and habilitation or the court may initiate its own inquiry as to whether the order should be granted. The court may refuse to authorize admission of a person to a residential facility for an extended period of treatment and habilitation if such admission is not in the best interests of the person."

Section 11. Section 53-20-127, MCA, is amended to read: \*53-20-127. Transfer to another residential facility -release to community-based alternative -- hearing. (1) If, at any time during the period for which a person is admitted a residential facility for an extended period of habilitation and treatment, the qualified mental retardation professional person in charge of the resident decides that the person no longer requires placement in a residential facility and that there exist sufficient community-based alternatives to provide adequate treatment and habilitation for the resident and adequate protection of the life and physical safety of the resident and others or that it is in the best interests of the resident that he be transferred to another residential facility, then he may release the resident to such the community-based alternative or transfer the resident to the other residential facility no less than 15 days after sending notice of the proposed release or transfer to the resident, his parents or guardian, the

attorney who most recently represented the resident, if any,

- the responsible person appointed by the court, if any, and
  the court which that ordered the admission. If the resident
  has been found unfit to proceed to trial, notice shall must
  be sent to the court which that found the resident unfit to
  proceed to trial and to the county attorney and the attorney
  who represented the resident at the time the resident was
  found unfit to proceed to trial.
  - (a) If any of the parties so notified objects to the release or transfer, they may petition the court for a hearing to determine whether the release or transfer should be allowed. The hearing shall must comply with the procedures set forth in 53-20-125. The court may on its own initiative inquire concerning the propriety of the release or transfer.

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- (b) Nothing in this subsection shall—prevent (1) prevents the transfer of a resident to a hospital or other medical facility for necessary medical treatment or emergency transfer of a resident to a mental health facility provided such the emergency transfer complies with the statutory requirements for emergency detention of the mentally ill. Within 24 hours of an emergency medical or psychiatric transfer, notice shall must be given to the parents or guardian of the resident, the responsible person appointed by the court, if any, and the court.
- (2) If any a person is admitted to a residential

- facility for an extended course of habilitation without a 2 hearing and if subsequent to such admission one of the 3 parties who could have requested a hearing learns that an alternative course of treatment is available which that is 5 more suitable to the needs of the resident, the party may request the qualified mental retardation professional person in charge of the resident to release the resident to the alternative if it is a community-based alternative or transfer the resident to the alternative if it is a 10 residential alternative. Any such transfer or release shall 11 must comply with the requirements of subsection (1) of--this 12 section. If the qualified mental retardation professional 13 person in charge of the resident refuses to authorize the 14 release or transfer, then the party may petition the court 15 for a hearing to determine whether the present residential 16 alternative should be continued. The hearing shall must 17 comply with the procedures set forth in 53-20-125."
  - Section 12. Section 53-20-128, MCA, is amended to read:

    "53-20-128. Extension of admission period -- hearing.

    (1) If the qualified mental retardation professional person in charge of the resident determines that the admission to the residential facility should continue beyond the period specified in the court order, he shall, at least 15 days before the end of the period set out in the court order, send written notice of his recommendation and request for

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1 renewal of the order to the court which that issued the 2 order, the resident, his parents or quardian, the next of 3 kin, if known, the attorney who most recently represented 4 the resident, if any, and the responsible person appointed 5 by the court, if any. The recommendation and request shall 6 must be accompanied by a written report which-shall-describe describing the habilitation plan which that has been 7 8 undertaken for the resident and the future habilitation plan that is anticipated by the qualified mental 9 which 10 retardation professional person.

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(2) If any person so notified requests a hearing, the court shall set a time and place for the hearing and shall mail or deliver notice to all of the persons informed of the recommendation. The hearing shall must be conducted in the manner set out forth in 53-20-125. If the court finds that the residential admission is still justified, it may order continuation of the admission to that residential facility or transfer of the resident to a different residential facility. If the court finds that the resident is still in need of developmental disabilities services but does not require residential treatment in a residential facility or if all parties are willing for the resident to participate in a community-based program of habilitation, it shall refer the department of social and respondent to rehabilitation services to be considered for placement in community-based services according to 53-20-209. If the person is placed in community-based services or if the need for developmental disabilities services no longer exists, the court shall dismiss the petition. The court shall may not order continuation of admission to a residential facility which that does not have an individualized habilitation plan for the resident. In its order, the court shall make findings of fact on which its order is based. The court may on its own initiative inquire concerning the suitability of continuing an admission to a residential facility."

Section 13. Section 53-20-129, MCA, is amended to read:

"53-20-129. Emergency admission. The-parentsy-quardiany
the-person-himselfy-or-a A professional person may admit a
person believed to be seriously developmentally disabled to
a residential facility on an emergency basis when necessary
to protect the person or others from death or serious bodily
harm. If-requested-by-the-parentsy-quardiany-or-the-person
admitted-on-an-emergency-basisy-a A petition as set out in
53-20-121 and 53-20-122-shall 53-20-125 must be filed on the
next judicial day by the county attorney of the county where
the person resides. If a petition is filed, the professional
person-assigned-by-the-court-to-conduct-the-examination-and
inquiry residential facility screening team shall report
back to the court on the next fifth judicial day following

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1 the filing of the petition. Once a petition is filed, 2 continued detention in the residential facility shall may be 3 allowed only on order of the court when necessary to protect the respondent or others from death or serious bodily harm. 4 In no case shall may an emergency admission to a residential 5 6 facility continue for longer than 30 days without subsequent proceedings before the court." 7

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Section 14. Section 53-20-131, MCA, is amended to read: "53-20-131. Placement in nonstate facility. (+)-If-a person-is-admitted--to--a--residential--facility--under--the provisions--of--this-part-and-is-eligible-for-hospital-care; treatmenty-or-habilitation-by-an-agency-of-the-United-States and-if--a--certificate--of--notification--from--such--agency showing-that-facilities-are-available-and-that-the-person-is eligible--for--care--or--treatment--therein-is-received, -the court-may-order-the-person-to-be-placed-in--the--custody--of the--agency--for--hospitalization;--The-chicf-officer-of-any hospital-or-residential-facility-operated-by-the-agency--and in--which--the-person-is-admitted-shall;-with-respect-to-the person;-be-vested-with-the-same-powers-as-the-superintendent of--the--Montana--developmental--center--with---respect---to detention; -- custody; -- transfer; -- and -- release - of - the -persondurisdiction-shall-be-retained-in-the-appropriate-courts--of this--state--to-inquire-into-the-mental-condition-of-persons so-admitted-and-to-determine-the-necessity--for--continuance of-their-admission-

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2 (2)(1) Consistent with other provisions of this part, a person admitted to a residential facility under this part 3 for a period of more than 30 days may be committed by the 4 5 court to the custody of friends or next of kin residing 6 outside the state or transferred to a--residential an 7 out-of-state facility located-outside-the--state for the 8 habilitation of persons who are developmentally disabled if 9 the out-of-state facility agrees to receive the person. No 1.0 such Such a commitment or transfer shall may not be for a 11 longer period of time than is permitted within the--state 12 Montana. If the person is indigent, the expense of 13 supporting him in an out-of-state facility and the expense 14 of transportation shall must be borne by the state of 15 Montana.

16 (3)(2) The transfer of persons admitted residential facility out of Montana under the provisions of this part or into Montana under the laws of another jurisdiction shall must be governed by the provisions of the Interstate Compact on Mental Health."

Section 15. Section 53-20-132, MCA, is amended to read: "53-20-132. Court-ordered placement in community-based services prohibited. Nothing in this part may be construed as authorizing the placement of and delivery of services to developmentally disabled persons in community-based services

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- by court order except-as-provided-in-53-20-123(4). Placement
  of persons in community-based services is governed by
  53-20-209."
- Section 16. Section 53-20-141, MCA, is amended to read:

  "53-20-141. Denial of legal rights. (1) Unless
  specifically stated in an order by the court, a person
  admitted to a residential facility for an extended course of
  habilitation shall does not forfeit any legal right or
  suffer any legal disability by reason of the provisions of
  this part, except insofar as it may be necessary to detain
  the person for habilitation, evaluation, or care.

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(2) Whenever any a person is admitted to a residential facility for a period of more than 30 days for an extended course of habilitation, the court ordering the admission may make an order stating specifically any legal rights which that are denied the respondent and any legal disabilities which that are imposed on him. As part of its order, the court may appoint a person to act as conservator of the respondent's property. Any conservatorship created pursuant to this section shall—terminate terminates upon the conclusion of the admission if not sooner terminated by the court. A conservatorship or guardianship extending beyond the period of the admission may not be created except according to the procedures set forth under Montana law for the appointment of conservators and guardians generally.

- (3) Any A person who has been admitted to a residential 1 facility pursuant to this part shall must, upon termination of the admission, be automatically restored to all of his civil and legal rights which that may have been lost when he was admitted. However, this subsection shall does not affect any guardianship or conservatorship created independently of the admission proceedings according to the provisions of Montana law relating to the appointment of conservators and quardians generally. Any A person who 9 10 leaves a residential facility following a period of 11 evaluation and habilitation shall must be given a written 12 statement setting forth the substance of this subsection.
  - (4)--Any-person-admitted-to-a-residential-facility-prior
    to-July-1;-1975;-shall-enjoy-all-the-rights--and--privileges
    of-a-person-admitted-after-July-1;-1975;"
- Section 17. Section 53-20-142, MCA, is amended to read:
  17 "53-20-142. Rights while in a residential facility.
  18 Persons admitted to a residential facility for a period of
- 20 (1) Residents shall have a right to dignity, privacy, 21 and humane care.

habilitation shall enjoy the following rights:

sealed mail. Moreover, it shall—be is the duty of the facility to foster the exercise of this right by furnishing the necessary materials and assistance.

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(3) Residents shall must have the same rights and access to private telephone communication as patients at any public hospital except to the extent that a the individual treatment planning team or the qualified mental retardation professional person responsible for formulation of a particular resident's habilitation plan writes an order imposing special restrictions and explains the reasons for any-such the restrictions. The written order must be renewed monthly if any restrictions are to be continued.

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- (4) Residents shall have an unrestricted right to visitation except to the extent that a the individual treatment planning team or the qualified mental retardation professional person responsible for formulation of a particular resident's habilitation plan writes an order imposing special restrictions and explains the reasons for any-such the restrictions. The written order must be renewed monthly if any restrictions are to be continued.
- (5) Residents shall have a right to receive suitable educational and habilitation services regardless of chronological age, degree of retardation, or accompanying disabilities or handicaps.
- (6) Each resident shall must have an adequate allowance 22 of neat, clean, suitably fitting, and seasonable clothing. Except when a particular kind of clothing is required 24 because of a particular condition, residents shall must have 25

- the opportunity to select from various types of neat, clean, and seasonable clothing. Such The clothing shall must be 2 3 considered the resident's throughout his stay in the institution facility. Clothing, both in amount and type, shall must make it possible for residents to go out of doors inclement weather, to go for trips or visits 7 appropriately dressed, and to make a normal appearance in the community. The facility shall make provision for the 9 adequate and regular laundering of the residents' clothing.
- 10 (7) Each resident shall-have has the right to keep and use his own personal possessions except insofar as such 11 12 clothes or personal possessions may be determined by a the 13 individual treatment planning team or the qualified mental 14 retardation professional person to be dangerous either to 15 himself or to others.
- 16 (8) A Each resident has a right to a humane physical environment within the residential facilities facility. 17 18 These-facilities-shall The facility must be designed to make 19 a positive contribution to the efficient attainment of the 20 habilitation goals of the resident. To accomplish this 21 purpose:
- 22 (a) regular housekeeping and maintenance procedures 23 which that will ensure that the facility is maintained in a 24 safe, clean, and attractive condition shall must be 25 developed and implemented;

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(b) pursuant to an established routine maintenance and repair program, the physical plant shall must be kept in a continuous state of good repair and operation so as to ensure the health, comfort, safety, and well-being of the residents and so as not to impede in any manner the habilitation programs of the residents;

- (c) the physical facilities must meet all fire and safety standards established by the state and locality. In addition, the facility shall must meet such the provisions of the life safety code of the national fire protection association as that are applicable to it.
- (d) there must be special facilities for nonambulatory residents to assure ensure their safety and comfort, including special fittings on toilets and wheelchairs. Appropriate provision shall must be made to permit nonambulatory residents to communicate their needs to staff.
- (9) Residents shall have a right to receive prompt and adequate medical treatment for any physical or mental ailments or injuries or physical disabilities and for the prevention of any illness or disability. Such medical treatment shall must meet standards of medical practice in the community. However, nothing in this subsection may be interpreted to impair other rights of any a resident in regard to involuntary commitment for mental illness, use of psychotropic medication, use of hazardous, aversive, or

- 1 experimental procedures, or the refusal of such treatment.
  - (10) Corporal punishment shall is not be permitted.
  - (11) The opportunity for religious worship shall must be accorded to each resident who desires such worship. Provisions for religious worship shall must be made available to all residents on a nondiscriminatory basis. No An individual shall may not be compelled to engage in any religious activities.
  - (12) Residents shall have a right to a nourishing, well-balanced diet. The diet for residents shall must provide at a minimum the recommended daily dietary allowance as developed by the national academy of sciences. Provisions shall must be made for special therapeutic diets and for substitutes at the request of the resident, his parents, guardian, or next of kin, or the responsible person appointed by the court in accordance with the religious requirements of any resident's faith. Denial of a nutritionally adequate diet shall may not be used as punishment.
  - (13) Residents shall have a right to regular physical exercise several times a week. It shall-be is the duty of the facility to provide both indoor and outdoor facilities and equipment for such exercise. Residents shall have a right to be outdoors daily in the absence of contrary medical considerations.

(14) Residents shall have a right, under appropriate supervision, to suitable opportunities for the interaction with members of the opposite sex except where a the individual treatment planning team or the qualified mental retardation professional person responsible for the formulation of a particular resident's habilitation plan writes an order to the contrary and explains the reasons therefor for the order. The order must be renewed monthly if the restriction is to be continued."

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Section 18. Section 53-20-145, MCA, is amended to read: \*53-20-145. Right to be free from unnecessary or excessive medication. Residents have a right to be free from unnecessary or excessive medication. No-medication-shall Medication may not be administered unless at the written order of a physician. The professional-person-in-charge-of the-facility individual treatment planning team and the attending physician shall--be are responsible for all medication given or administered to a resident. The use of medication shell may not exceed standards of use that are advocated by the United States food and drug administration. Notation of each individual's medication shall must be kept in his medical records. A pharmacist or a registered nurse shall review monthly the record of each resident on medication for potential adverse reactions, allergies, interactions, contraindications, rationality, and laboratory

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test modifications and shall advise the physician of any 1 problems. Medications shall must be reviewed quarterly by 3 the attending or staff physician. At least monthly, an 4 attending physician shall review the drug regimen of each patient on psychotropic medication. All prescriptions shall must be written with a termination date that may not exceed 7 90 days. Medication for newly admitted residents shall must 8 be reviewed and reordered as necessary upon admission and 9 then every 30 days for the first 90 days. Medications shall 10 may not be used as punishment, for the convenience of staff, 11 as a substitute for a habilitation program, or in quantities 12 that interfere with the resident's treatment program. 13 Nothing in this section may be interpreted to relieve any a 14 physician or other professional or medical staff person from 15 any obligation to adequately monitor the medication of any a 16 resident, with due consideration to the nature of the 17 medication, the purpose for which it is given, and the 18 condition of the resident."

Section 19. Section 53-20-146, MCA, is amended to read:

"53-20-146. Right not to be subjected to certain treatment procedures. (1) Residents of a residential facility shall have a right not to be subjected to any unusual or hazardous treatment procedures without the express and informed consent of the resident, if the resident is able to give such consent, and of his parents or

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quardian or the responsible person appointed by the court
after opportunities for consultation with independent
specialists and legal counsel. Such proposed procedures

must first have been reviewed and approved by the
mental disabilities board of visitors before such consent
shall-be is sought.

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(2) Physical restraint shall may be employed only when absolutely necessary to protect the resident from injury to himself or to prevent injury to others. Mechanical supports used to achieve proper body position and balance which that are ordered by a physician are not considered a physical Restraint shall may not be employed as restraint. punishment, for the convenience of staff, or as a substitute for a habilitation program. Restraint shall may be applied only if alternative techniques have failed and only if such the restraint imposes the least possible restriction consistent with its purpose. Only-a-professional-person-may authorize-the-use Use of restraints may be authorized by a physician, professional person, or qualified mental retardation professional. Orders for restraints by---a professional--person--shall must be in writing and shall may not be in force for longer than 12 hours. Whenever physical restraint is ordered, suitable provision shall must be made for the comfort and physical needs of the person restrained.

- alone in a locked room for nontherapeutic purposes, shall may not be employed. Legitimate "time out" procedures may be utilized under close and direct professional supervision as a technique in behavior-shaping programs.
- (4) Behavior modification programs involving the use of noxious or aversive stimuli shall must be reviewed and approved by the mental disabilities board of visitors and shall may be conducted only with the express and informed consent of the affected resident, if the resident is able to give such consent, and of his parents or guardian or the responsible person appointed by the court after opportunities for consultation with independent specialists and with legal counsel. Such behavior modification programs shall may be conducted only under the supervision of and in the presence of a qualified mental retardation professional person who has had proper training in such techniques.
- (5) No A resident shall may not be subjected to a behavior modification program which that attempts to extinguish socially appropriate behavior or to develop new behavior patterns when such behavior modifications serve only institutional convenience.
- (6) Electric shock devices shall-be are considered a research technique for the purpose of this part. Such devices shall may be used only in extraordinary circumstances to prevent self-mutilation leading to repeated

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- and possibly permanent physical damage to the resident and only after alternative techniques have failed. The use of such devices shall—be is subject to the conditions prescribed by this part for experimental research generally and shall may be used only under the direct and specific order of the-professional-person-in-charge a physician and the superintendent of the residential facility."
- 8 Section 20. Section 53-20-148, MCA, is amended to read: \*53-20-148. Right to habilitation. (1) Persons admitted 9 10 residential facilities shall have a right to habilitation, including medical treatment, education, and 11 12 care suited to their needs, regardless of age, degree of retardation, or handicapping condition. Each resident has a 13 14 right to a habilitation program which that will maximize his human abilities and enhance his ability to cope with his 15 environment. Every residential facility shall recognize that 16 17 each resident, regardless of ability or status, is entitled to develop and realize his fullest potential. The facility 18 19 shall implement the principle of normalization so that each 20 resident may live as normally as possible.
- 21 (2) Residents shall have a right to the least
  22 restrictive conditions necessary to achieve the purposes of
  23 habilitation. To this end, the facility shall make every
  24 attempt to move residents from:
- 25 (a) more to less structured living;

- 1 (b) larger to smaller facilities;
- 2 (c) larger to smaller living units;
- 3 (d) group to individual residence residences;
- 4 (e) segregated from the community to integrated into 5 the community living;
- 6 (f) dependent to independent living.
- 7 (3) Within 30 days of his admission to a residential 8 facility, each resident shall must have an evaluation by appropriate specialists for programming purposes.
- 10 (4) Each resident shall must have an individualized 11 habilitation plan formulated by the-facility an individual 12 treatment planning team. This plan shall must be developed 13 by-appropriate-professional-persons-and implemented as soon 14 as possible, but no later than 30 days after the resident's 15 admission to the facility. An interim program 16 habilitation, based on the preadmission evaluation conducted 17 pursuant to this part, shall must commence promptly upon the 18 resident's admission. Each individualized habilitation plan 19 shell must contain:
- 20 (a) a statement of the nature of the specific 21 limitations and the needs of the resident;
- 22 (b) a description of intermediate and long-range 23 habilitation goals with a projected timetable for their 24 attainment:
- 25 (c) a statement of and an explanation for the plan of

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- habilitation for achieving these intermediate and long-range
  goals;
- 3 (d) a statement of the least restrictive setting for 4 habilitation necessary to achieve the habilitation goals of 5 the resident;

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- (e) a specification of the professional---persons

  professionals and other staff members who are responsible

  for the particular resident's attaining these habilitation

  goals;
- (f) criteria for release to less restrictive settings for habilitation, based on the resident's needs, including criteria for discharge and a projected date for discharge.
  - shall must have an individualized postinstitutionalization plan that includes an identification of services needed to make a satisfactory community placement possible. This plan shall must be developed by a-professional-person-who the individual treatment planning team that shall begin preparation of such the plan upon the resident's admission to the institution facility and shall complete such the plan as soon as practicable. The parents or guardian or next of kin of the resident, the responsible person appointed by the court, if any, and the resident, if able to give informed consent, shall must be consulted in the development of such the plan and shall must be informed of the content of such

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the plan.

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- 2 (6) In the interests of continuity of care, 3 qualified mental retardation professional person shall whenever possible be responsible for supervising 5 implementation of the habilitation plan, integrating the various aspects of the habilitation program, and recording 7 the resident's progress as measured by objective indicators. This The qualified mental retardation professional person shall also be responsible for ensuring that the resident is 10 released when appropriate to a less restrictive habilitation 11 setting.
- person responsible for supervising the implementation of the
  plan and shall must be modified if necessary. In addition, 6
  months after admission and at least annually thereafter,
  each resident shall must receive a comprehensive
  psychological, social, habilitative, and medical diagnosis
  and evaluation and his habilitation plan shall must be

monthly by the qualified mental retardation professional

habilitation plan shall must be reviewed

- 20 reviewed by-an-interdisciplinary-team-of-no--less--than--two
- 22 directly-involved-in-his-habilitation-and-care and revised
  - accordingly by the individual treatment planning team. A

professional--persons--and-such-resident-care-workers-as-are

- habilitation plan shall must be reviewed monthly.
- 25 [8] Each resident placed in the community shall must

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receive transitional habilitation assistance.

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- (9) The professional-person-in-charge superintendent of the residential facility, or his designee, shall report in writing to the parents or guardian of the resident or the responsible person at least every 6 months on the resident's habilitation and medical condition. Such The report shall must also state any appropriate habilitation program which that has not been afforded to the resident because of inadequate habilitation resources.
- resident, or and the responsible person appointed by the court shall must promptly upon the resident's admission receive a written copy of and be orally informed of all the above standards for adequate habilitation—Bach—resident—if the—resident—is—able—to—comprehend,—shall—promptly—upon—his admission—be—orally—informed—in—clear—language—of—the—above standards—and,—where—appropriate,—be—provided—with—a—written copy.—in—addition,—the—parents,—guardian,——responsible person,—and—where—able—to—comprehend,—the—resident—shall receive—such, the rights accorded by 53-20-142, and other information concerning the care and habilitation of the resident as that may be available to assist them in understanding the situation of the resident and the rights of the resident in the institution facility."
  - Section 21. Section 53-20-161, MCA, is amended to read:

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- \*53-20-161. Maintenance of records. (1) Complete records for each resident shall must be maintained and shall must be readily available to professional persons, -- to--the resident-care--workers who are directly involved with the particular resident; and to the mental disabilities board of visitors. All information contained in a resident's records shall must be considered privileged and confidential. The parents or guardian, the responsible person appointed by the court, and any person properly authorized in writing by the resident, if such the resident is capable of giving informed consent, or by his parents or guardian or the responsible person shall must be permitted access to the resident's records. No-information Information may not be released from the records of a resident or former resident of the residential facility unless the release of such the information has been properly authorized in writing by:
  - (a) the court;
- (b) the resident or former resident if he is over the age of majority and is capable of giving informed consent;
  - (c) the parents or guardian in charge of a resident under the age of 12;
- 22 (d) the parents or guardian in charge of a resident
  23 over the age of 12 but under the age of majority and the
  24 resident if the resident is capable of giving informed
  25 consent;

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(e) the guardian of a resident over the age of majority
 who is incapable of giving informed consent;

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- (f) the superintendent of the residential facility or his designee as custodian of a resident over the age of majority who is incapable of giving informed consent and for whom no legal guardian has been appointed;
- (g) the superintendent of the residential facility or his designee as custodian of a resident under the age of majority for whom there is no parent or legal guardian; or
- (h) the superintendent of the residential facility or his designee as custodian of a resident of that facility whenever release is required by federal or state law or department of social and rehabilitation services rules.
- (2) Information may not be released by a superintendent or his designee as set forth in subsection (1)(f), (1)(g), or (1)(h) less than 15 days after sending notice of the proposed release of information to the resident, his parents or guardian, the attorney who most recently represented the resident, if any, the responsible person appointed by the court, if any, and the court which that ordered the admission. If any of the parties so notified objects to the release of information, they may petition the court for a hearing to determine whether the release of information should be allowed. Ne--information Information may not be released pursuant to subsection (1)(f), (1)(g), or (1)(h)

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- unless it is released to further some legitimate need of the
- 2 resident or to accomplish a legitimate purpose of the
- 3 institution facility which that is not inconsistent with the
- 4 needs and rights of the resident. No-information Information
- 5 may not be released pursuant to these subsections except in
- 6 accordance with written policies consistent with the
  - requirements of this part adopted by the institution
- 8 <u>facility</u>. Persons receiving notice of a proposed release of
- 9 information shall also receive a copy of the written policy
- 10 of the institution facility governing release of
- 11 information.
- 12 (3) These records shall must include:
- 13 (a) identification data, including the resident's legal
- 14 status;
- (b) the resident's history, including but not limited
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- 17 (i) family data, educational background, and employment
- 18 record;
- 19 (ii) prior medical history, both physical and mental,
- 20 including prior institutionalization;
- 21 (c) the resident's grievances, if any;
- 22 (d) an inventory of the resident's life skills,
- 23 including mode of communication;
- (e) a record of each physical examination which that
- 25 describes the results of the examination:

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- (f) a copy of the individual habilitation plan and any modifications thereto and an appropriate summary which that will guide and assist the resident care workers in implementing the resident's program;
- findings made in monthly reviews of the habilitation plan, which findings shall must include an analysis of the successes and failures of the habilitation program and shall direct whatever modifications are necessary:
- 10 (h) a copy of the postinstitutionalization plan that
  11 includes a statement of services needed in the community and
  12 any modifications thereto and a summary of the steps that
  13 have been taken to implement that plan;
- 14 (i) a medication history and status;

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- 15 (j) a summary of each significant contact by a l6 professional person with a resident;
- 17 (k) a summary of the resident's response to his
  18 habilitation plan, prepared by a <u>qualified mental</u>
  19 <u>retardation</u> professional <u>person</u> involved in the resident's
  20 habilitation and recorded at least monthly. Wherever
  21 possible, such response <u>shall must</u> be scientifically
  22 documented.
- 23 (1) a monthly summary of the extent and nature of the 24 resident's work activities and the effect of such the 25 activity upon the resident's progress along in the

- habilitation plan;
- 2 (m) a signed order by a <u>qualified mental retardation</u>
  3 <u>professional</u>, professional person, <u>or physician</u> for any
  4 physical restraints;
- 5 (n) a description of any extraordinary incident or 6 accident in the facility involving the resident, to be 7 entered by a staff member noting personal knowledge of the 8 incident or accident or other source of information, 9 including any reports of investigations of resident's mistreatment:
- (o) a summary of family visits and contacts:
- 12 (p) a summary of attendance and leaves from the 13 facility:
- (q) a record of any seizures, illnesses, injuries, and treatments thereof and immunizations."
- 16 Section 22. Section 53-20-162, MCA, is amended to read: 17 "53-20-162. Training for resident care workers. All 18 resident care workers who have not had prior clinical 19 experience in a residential facility for habilitation of the 20 developmentally disabled shall-have must be given suitable 21 orientation training. Staff members on all levels shall-have 22 must be given suitable, regularly scheduled in-service 23 training. Each resident care worker shall be-under-the 24 direct-professional-supervision-of-a--professional--person

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receive supervision that emphasizes the protection of

- l residents and their rights."
- Section 23. Section 53-20-163, MCA, is amended to read:
- 3 "53-20-163. Abuse of residents prohibited. (1) Every
- 4 residential facility shall prohibit mistreatment, neglect,
- 5 or abuse in any form of any resident. Alleged violations
- 6 shall must be reported immediately to the professional
- 7 person-in-charge superintendent of the facility, and there
- shall must be a written record that:
- 9 (a) each alleged violation has been thoroughly
- 10 investigated and findings stated;
- 11 (b) the results of such the preliminary investigation
- 12 are reported to the professional--person--in--charge
- 13 <u>superintendent</u> of the facility within 24 hours of the report
- 14 of the incident.
- 15 (2) Such The reports shall must also be made to the
- 16 mental disabilities board of visitors monthly and-to-the
- 17 developmental-disabilities--advisory--council--at--its--next
- 18 scheduled--public--meeting. Each facility shall cause a
- 19 written statement of this policy to be posted in each
- 20 cottage and building and circulated to all staff members."
- 21 Section 24. Section 53-20-164, MCA, is amended to read:
- 22 "53-20-164. Resident labor. The following rules shatk
- 23 govern resident labor:
- 24 (1) No A resident shall may not be required to perform
- 25 labor which that involves the operation and maintenance of

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- 1 the facility or for which the facility is under contract
- 2 with an outside organization. Privileges or release from the
- 3 facility shall may not be conditioned upon the performance
- 4 of labor covered by this provision. Residents may
- 5 voluntarily engage in such labor if the labor is compensated
- 6 in accordance with the minimum wage laws of the Fair Labor
- 7 Standards Act, 29 U.S.C.7-sect 206, as amended.
- 8 (2) No A resident shall may not be involved in the care
- 9 (feeding, clothing, bathing), training, or supervision of
- 10 other residents unless he:
- 11 (a) has volunteered:
- 12 (b) has been specifically trained in the necessary
- 13 skills:
- 14 (c) has the humane judgment required for such
- 15 activities:
- (d) is adequately supervised; and
- 17 (e) is reimbursed in accordance with the minimum wage
- 18 laws of the Fair Labor Standards Act, 29 U.S.C., -sec = 206,
- 19 as amended.
- 20 (3) Residents may be required to perform vocational
- 21 training tasks which that do not involve the operation and
- 22 maintenance of the facility, subject to a presumption that
- 23 an assignment of longer than 3 months to any task is not a
- 24 training task, provided the specific task or any change in
- 25 task assignment is:

(a) an integrated part of the resident's habilitation plan and approved as a habilitation activity by a the qualified mental retardation professional person and the individual treatment planning team responsible for supervising the resident's habilitation; and

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- 6 (b) supervised by a staff member to oversee the 7 habilitation aspects of the activity.
  - (4) Residents may voluntarily engage in habilitative labor at nonprogram hours for which the facility would otherwise have to pay an employee, provided the specific labor or any change in labor is:
  - (a) an integrated part of the resident's habilitation plan and approved as a habilitation activity by a the qualified mental retardation professional person and the individual treatment planning team responsible for supervising the resident's habilitation;
- 17 (b) supervised by a staff member to oversee the 18 habilitation aspects of the activity; and
- 19 (c) compensated in accordance with the minimum wage
  20 laws of the Fair Labor Standards Act, 29 U.S.C., see: 206,
  21 as amended.
- 22 (5) If any <u>a</u> resident performs habilitative labor which
  23 that involves the operation and maintenance of a facility
  24 but due to physical or mental disability is unable to
  25 perform the labor as efficiently as a person not so

- physically or mentally disabled, then such the resident may
  be compensated at a rate which that bears the same
  approximate relation to the statutory minimum wage as his
  ability to perform that particular job bears to the ability
  of a person not so afflicted.
- 6 (6) Residents may be required to perform tasks of a 7 personal housekeeping nature, such as the making of one's 8 own bed.
- 9 (7) Deductions or payments for care and other charges
  10 shall may not deprive a resident of a reasonable amount of
  11 the compensation received pursuant to this section for
  12 personal and incidental purchases and expenses.
- 13 (8) Staffing shall must be sufficient so that the
  14 facility is not dependent upon the use of residents or
  15 volunteers for the care, maintenance, or habilitation of
  16 other residents or for income-producing services. The
  17 facility shall formulate a written policy to protect the
  18 residents from exploitation when they are engaged in
  19 productive work."
- 20 <u>NEW SECTION.</u> **Section 25.** Repealer. Sections 53-20-115, 21 53-20-117, 53-20-120, 53-20-122, 53-20-123, and 53-20-124,
- 22 MCA, are repealed.
- NEW SECTION. Section 26. Codification instruction.

  [Section 1] is intended to be codified as an integral part

of Title 53, chapter 20, part 1, and the provisions of Title

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- 1 53, chapter 20, part 1, apply to [section 1].
- 2 NEW SECTION. Section 27. Termination. The amendment to
- 3 the definition of "seriously developmentally disabled" in
- 4 53-20-102(15) terminates September 30, <del>1993</del> 1995.

-End-