1	HOUSE BILL NO. 41
2	INTRODUCED BY L. SMITH
3	BY REQUEST OF THE DEPARTMENT OF CORRECTIONS AND HUMAN SERVICES
4	
5	A BILL FOR AN ACT ENTITLED: "AN ACT REQUIRING A DETERMINATION OF INCAPACITY IN AN
6	INVOLUNTARY COMMITMENT PROCEEDING; REQUIRING THE APPOINTMENT OF A TREATMENT
7	GUARDIAN; ENUMERATING THE POWERS AND DUTIES OF A TREATMENT GUARDIAN; AMENDING
8	SECTIONS 41-5-523, 53-21-102, 53-21-106, 53-21-120, 53-21-121, 53-21-123, 53-21-126, 53-21-127,
9	AND 53-21-128, MCA; AND PROVIDING EFFECTIVE DATES."
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11	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:
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13	Section 1. Section 53-21-102, MCA, is amended to read:
14	"53-21-102. (Temporary) Definitions. As used in this part, the following definitions apply:
15	(1) "Board" or "mental disabilities board of visitors" means the mental disabilities board of visitors
16	created by 2-15-211.
17	(2) "Court" means any district court of the state of Montana.
18	(3) "Department" means the department of corrections and human services provided for in Title
19	2, chapter 15, part 23.
20	(4) "Emergency situation" means a situation in which any a person is in imminent danger of death
21	or serious bodily harm from the activity of a person who appears to be seriously mentally ill.
22	(5) "Friend of respondent" means any a person willing and able to assist a mentally ill person, a
23	person alleged to be mentally ill, a seriously mentally ill person, or a person alleged to be seriously mentally
24	ill in dealing with legal proceedings, including consultation with legal counsel and others. The friend of
25	respondent may be the next of $kin_{72}$ the person's conservator or legal guardian, if $any_{72}$ a representative
26	of a charitable or religious organization,; or any other person appointed by the court to perform the
27	functions of a friend of respondent set out in this part. Only one person may at any one time be the friend
28	of respondent within the meaning of this part. In appointing a friend of respondent, the court shall consider
29	the preference of the respondent. The court may at any time, for good cause shown, change its
30	designation of the friend of respondent.



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(	6)	"Mental	disorder"	means	any	organic,	mental,	or	emotional	impairment	which	<u>that</u>	has
substant	ial	adverse e	effects on a	an indivi	dual'	s cognitiv	e or volit	tion	al functions	s. The term o	does no	t incl	ude

- (a) addiction to drugs or alcohol; or
- (b) drug or alcohol intoxication.
- (7) "Mental health facility" or "facility" means a public hospital or a licensed private hospital which that is equipped and staffed to provide treatment for persons with mental disorders or a community mental health center or any a mental health clinic or treatment center approved by the department. A correctional institution or facility or jail is not a mental health facility within the meaning of this part.
- (8) "Mentally ill" means suffering from a mental disorder which that has not resulted in self-inflicted injury or injury to others or the imminent threat of injury but which that:
- (a) has resulted in behavior that creates serious difficulty in protecting the person's life or health even with the available assistance of family, friends, or others;
- (b) is treatable, with a reasonable prospect of success and consistent with the least restrictive course of treatment as provided in 53-21-127(3), at or through the facility to which the person is to be committed;
  - (c) has deprived the person of the capacity to make an informed decision concerning treatment;
- (d) has resulted in the person's refusing or being unable to consent to voluntary admission for treatment; and
- (e) poses a significant risk of the person's becoming seriously mentally ill or will, if untreated, predictably result in further serious deterioration in the mental condition of the person. Predictability may be established by the patient's medical history.
- (9) "Next of kin" includes but is not limited to the spouse, parents, adult children, and adult brothers and sisters of a person.
- (10) "Patient" means a person committed by the court for treatment for any period of time or who is voluntarily admitted for treatment for any period of time.
- 26 (11) "Peace officer" means any a sheriff, deputy sheriff, marshal, police officer, or other peace officer.
  - (12) "Professional person" means:
- 29 (a) a medical doctor; or
  - (b) a person who has been certified, as provided for in 53-21-106, by the department.



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1	(13) "Reasonable medical certainty" means reasonable certainty as judged by the	standards of a
2	professional person.	

- (14) "Respondent" means a person alleged in a petition filed pursuant to this part to be mentally ill or seriously mentally ill.
- (15) "Seriously mentally ill" means suffering from a mental disorder which that has resulted in self-inflicted injury or injury to others or the imminent threat of injury or which that has deprived the person afflicted of the ability to protect the person's life or health. For this purpose, injury means physical injury. A person may not be involuntarily committed to a mental health facility or detained for evaluation and treatment because the person is an epileptic, or is mentally deficient, mentally retarded, senile, or suffering from a mental disorder unless the condition causes the person to be seriously mentally ill within the meaning of this part.
  - (16) "State hospital" means the Montana state hospital.
- (17) "Treatment guardian" means a competent person; a suitable institution, association, or nonprofit corporation; or a member of a suitable institution, association, or nonprofit corporation who makes decisions on behalf of an incapacitated person as to medical and psychiatric treatment. (Terminates July 1, 1997--sec. 1, Ch. 541, L. 1989.)
- 53-21-102. (Effective July 1, 1997) 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) "Court" means any district court of the state of Montana.
- 22 (3) "Department" means the department of corrections and human services provided for in Title 2, chapter 15, part 23.
- 24 (4) "Emergency situation" means a situation in which any a person is in imminent danger of death 25 or serious bodily harm from the activity of a person who appears to be seriously mentally ill.
  - (5) "Friend of respondent" means any a person willing and able to assist a seriously mentally ill person or person alleged to be seriously mentally ill in dealing with legal proceedings, including consultation with legal counsel and others. The friend of respondent may be the next of kin<sub>7</sub>; the person's conservator or legal guardian, if any<sub>7</sub>; representatives of a charitable or religious organization<sub>7</sub>; or any other person appointed by the court to perform the functions of a friend of respondent set out in this part. Only one



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person may at any one time be the friend of respondent within the meaning of this part. In appointing a friend of respondent, the court shall consider the preference of the respondent. The court may at any time, for good cause shown, change its designation of the friend of respondent.

- (6) "Mental disorder" means any organic, mental, or emotional impairment which that has substantial adverse effects on an individual's cognitive or volitional functions. The term does not include:
  - (a) addiction to drugs or alcohol; or
- 7 (b) drug or alcohol intoxication.
  - (7) "Mental health facility" or "facility" means a public hospital or a licensed private hospital which that is equipped and staffed to provide treatment for persons with mental disorders or a community mental health center or any a mental health clinic or treatment center approved by the department. A correctional institution or facility or jail is not a mental health facility within the meaning of this part.
  - (8) "Next of kin" includes but is not limited to the spouse, parents, adult children, and adult brothers and sisters of a person.
  - (9) "Patient" means a person committed by the court for treatment for any period of time or who is voluntarily admitted for treatment for any period of time.
  - (10) "Peace officer" means any a sheriff, deputy sheriff, marshal, policeman police officer, or other peace officer.
    - (11) "Professional person" means:
- 19 (a) a medical doctor; or
- 20 (b) a person who has been certified, as provided for in 53-21-106, by the department.
- 21 (12) "Reasonable medical certainty" means reasonable certainty as judged by the standards of a professional person.
  - (13) "Respondent" means a person alleged in a petition filed pursuant to this part to be seriously mentally ill.
    - (14) "Seriously mentally ill" means suffering from a mental disorder which that has resulted in self-inflicted injury or injury to others or the imminent threat of injury or which that has deprived the person afflicted of the ability to protect the person's life or health. For this purpose, injury means physical injury. A person may not be involuntarily committed to a mental health facility or detained for evaluation and treatment because the person is an epileptic, mentally deficient, mentally retarded, senile, or suffering from a mental disorder unless the condition causes the person to be seriously mentally ill within the meaning of



1	this part.
2	(15) "State hospital" means the Montana state hospital.
3	(16) "Treatment guardian" means a competent person; a suitable institution, association, or
4	nonprofit corporation; or a member of a suitable institution, association, or nonprofit corporation who makes
5	decisions on behalf of an incapacitated person as to medical and psychiatric treatment."
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7	Section 2. Section 53-21-106, MCA, is amended to read:
8	"53-21-106. (Temporary) Certification of professional persons. (1) The department shall certify
9	professional persons, as defined in 53-21-102, for the purpose of this part.
10	(2) The department, with reference to recognized national standards in the field of mental health
11	shall adopt standards and rules governing the certification of professional persons.
12	(3) The rules for certification must address but are not limited to:
13	(a) the type of education that an individual has received, including degrees;
14	(b) the type of experience of or training received by the individual;
15	(c) continuing education, training, instruction, and work experience necessary to maintain
16	certification;
17	(d) an examination instrument to be used to determine an individual's proficiency and
18	understanding of mental health laws, diagnosis, and treatment procedures;
19	(e) the procedure for categorical certification qualifying the level of professional authority and
20	responsibility of an individual; and
21	(f) specific procedures for certification, recertification, and revocation of certification. (Terminates
22	July 1, 1997sec. 1, Ch. 541, L. 1989.)
23	53-21-106. (Effective July 1, 1997) Certification of professional persons. (1) The department shall
24	certify professional persons as defined in 53-21-102(10)(b) for the purpose of this part.
25	(2) The department, with reference to recognized national standards in the field of mental health
26	shall adopt standards and rules governing the certification of professional persons as defined in 53-21-102



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(c) continuing education, training, instruction, and work experience necessary to maintain

(3) The rules for certification must address but are not limited to:

(b) the type of experience of or training received by the individual;

(a) the type of education that an individual has received, including degrees;

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- (d) an examination instrument to be used to determine an individual's proficiency and understanding of mental health laws, diagnosis, and treatment procedures;
  - (e) the procedure for categorical certification qualifying the level of professional authority and responsibility of an individual; and
    - (f) specific procedures for certification, recertification, and revocation of certification."

## Section 3. Section 53-21-120, MCA, is amended to read:

- "53-21-120. (Temporary) Detention to be in least restrictive environment -- preference for mental health facility -- court relief -- prehearing detention of mentally ill person prohibited. (1) A person detained pursuant to this part must be detained in the least restrictive environment required to protect the life and physical safety of the person detained or members of the public; in this respect. With regard to this detention, prevention of significant injury to property may be considered.
- (2) Whenever possible, a person detained pursuant to this part must be detained in a mental health facility and in the county of residence. If the person detained demands a jury trial and the trial cannot be held within 7 days, the individual may be sent to the state hospital until the time of trial if arrangements can be made to return him the person to trial. The trial must be held within 30 days. The county of residence shall pay the cost of travel and professional services associated with the trial. A person may not be detained in any a hospital or other medical facility that is not a mental health facility unless the hospital or facility has agreed in writing to admit the person.
  - (3) A person may not be detained pursuant to this part in a jail or other correctional facility.
- (4) A person detained prior to involuntary commitment may apply to the court for immediate relief with respect to the need for detention or the adequacy of the facility where the person is being utilized to detain detained.
- (5) Detention may not be ordered under this part for a person concerning whom a petition has been filed under 53-21-121(1)(b)(a)(ii).
- (6) A person may not be involuntarily committed to a mental health facility or detained for evaluation and treatment because he the person is an epileptic, er is mentally deficient, mentally retarded, senile, or suffering from a mental disorder unless the condition causes him the person to be seriously mentally ill within the meaning of this part. (Terminates July 1, 1997--sec. 1, Ch. 541, L. 1989.)



53-21-120. (Effective July 1, 1997) Detention to be in least restrictive environment preference
for mental health facility court relief prehearing detention of mentally ill person prohibited. (1) A
person detained pursuant to this part must be detained in the least restrictive environment required to
protect the life and physical safety of the person detained or members of the public; in this respect. With
regard to this detention, prevention of significant injury to property may be considered.

- (2) Whenever possible, a person detained pursuant to this part must be detained in a mental health facility and in the county of residence. If the person detained demands a jury trial and the trial cannot be held within 7 days, the individual person may be sent to the state hospital until the time of trial if arrangements can be made to return him the person to trial. The trial must be held within 30 days. The county of residence shall pay the cost of travel and professional services associated with the trial. A person may not be detained in any a hospital or other medical facility that is not a mental health facility unless the hospital or facility has agreed in writing to admit the person.
  - (3) A person may not be detained pursuant to this part in a jail or other correctional facility.
- (4) A person detained prior to involuntary commitment may apply to the court for immediate relief with respect to the need for detention or the adequacy of the facility where the person is being utilized to detain detained."

Section 4. Section 53-21-121, MCA, is amended to read:

- "53-21-121. (Temporary) Petition for commitment -- contents of -- notice of. (1) The county attorney, upon the written request of any person having direct knowledge of the facts, may file a petition with the court:
  - (a) alleging that there is a person within the county:
- (i) who is seriously mentally ill and requesting that the person be committed to a mental health facility for a period of no more than 3 months; or
- (b)(ii) alloging that there is a person within the county who is mentally ill and requesting that the person be committed to a mental health facility for a period of no more than 30 days; and
  - (b) alleging that the person is an incapacitated person as defined in 72-5-101.
- 28 (2) The petition shall must contain:
- 29 (a) the name and address of the person requesting the petition and his the person's interest in the 30 case;



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- 1 (b) the name of the respondent and, if known, the address, age, sex, marital status, and cocupation of the respondent;
  - (c) the purported facts supporting the allegation of mental illness and incapacity;
- 4 (d) the name and address of every person known or believed to be legally responsible for the care,
  5 support, and maintenance of the person for whom evaluation is sought respondent;
  - (e) the name and address of the person's respondent's next of kin to the extent known to the county attorney and the person requesting the petition;
  - (f) the name and address of any person whom who the county attorney believes might be willing and able to be appointed as friend of respondent;
    - (g) the name and address of a potential treatment guardian;
    - the name, address, and telephone number of the attorney, if any, who has most recently represented the person for whom evaluation is sought; if respondent. If there is no attorney, there shall must be a statement as to whether to the best knowledge of the person requesting the petition the person for whom evaluation is sought respondent is indigent and therefore unable to afford the services of an attorney; and.
  - (h)(i) a statement of the rights of the respondent which shall that must be in conspicuous print and identified by a suitable heading.
  - (3) Notice of the petition shall must be hand-delivered to the respondent and to his the respondent's counsel on or before the initial appearance of the respondent before the judge or justice of the peace. Notice of the petition and the order setting the date and time of the hearing and the names of the respondent's counsel, professional person, and friend of respondent shall, and proposed treatment quardian must be hand-delivered or mailed to the person or persons who are legally responsible for care, support, and maintenance of the respondent, the next of kin identified in the petition, and any other person identified by the county attorney as a possible friend of respondent other than the one named as the friend of respondent. The notice may provide, other than as to the respondent and his the respondent's counsel, that no further notice will be given unless a written request is filed with the clerk of court. (Terminates July 1, 1997--sec. 1, Ch. 541, L. 1989.)
  - 53-21-121. (Effective July 1, 1997) Petition for commitment -- contents of -- notice of. (1) The county attorney, upon the written request of any person, may file a petition with the court:
    - (a) alleging that there is a person within the county who is seriously mentally ill and requesting that



the	person be	committed:	to a me	ental health	facility	for a	neriod i	of no	more	than 3	months:	and
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- 2 (b) alleging that the person is an incapacitated person as defined in 72-5-101.
  - (2) The petition shall must contain:
- 4 (a) the name and address of the person requesting the petition and his the person's interest in the 5 case;
  - (b) the name of the respondent and, if known, the address, age, sex, marital status, and occupation of the respondent;
    - (c) the purported facts supporting the allegation of mental illness and incapacity;
- (d) the name and address of every person known or believed to be legally responsible for the care,
   support, and maintenance of the person for whom evaluation is sought respondent;
  - (e) the name and address of the person's respondent's next of kin to the extent known to the county attorney and the person requesting the petition;
  - (f) the name and address of any person whom who the county attorney believes might be willing and able to be appointed as a friend of respondent;
    - (g) the name and address of a potential treatment guardian;
  - (h) the name, address, and telephone number of the attorney, if any, who has most recently represented the person for whom evaluation is sought; if respondent. If there is no attorney, there shall must be a statement as to whether to the best knowledge of the person requesting the petition the person for whom evaluation is sought respondent is indigent and therefore unable to afford the services of an attorney; and.
  - (h)(i) a statement of the rights of the respondent which shall that must be in conspicuous print and identified by a suitable heading.
  - (3) Notice of the petition shall must be hand-delivered to the respondent and to his the respondent's counsel on or before the initial appearance of the respondent before the judge or justice of the peace. Notice of the petition and the order setting the date and time of the hearing and the names of the respondent's counsel, professional person, and friend of respondent shall, and proposed treatment guardian must be hand-delivered or mailed to the person or persons who are legally responsible for care, support, and maintenance of the respondent, the next of kin identified in the petition, and any other person identified by the county attorney as a possible friend of respondent other than the one named as the friend of respondent. The notice may provide, other than as to the respondent and his the respondent's counsel,



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that no further notice will be given unless a written request is filed with the clerk of court."

- Section 5. Section 53-21-123, MCA, is amended to read:
- "53-21-123. (Temporary) Examination of respondent following initial hearing -- recommendation of professional person. (1) Following the initial hearing, whether before a judge or justice of the peace, the respondent shall must be examined by the a professional person without unreasonable delay. In the case of a petition alleging incapacity, the professional person must be a physician or psychologist. The examination may not exceed a period of 4 hours. The professional person shall immediately notify the county attorney of his the findings in person or by phone and shall make a written report of his the examination to the court, with and send copies to the respondent's attorney and the county attorney.
  - (2) The following action shall must be taken based on the professional person's findings:
- (a) If he the professional person recommends dismissal, he the professional person shall additionally notify counsel and the respondent, if he has been detained, shall must be released and the petition dismissed. However, the county attorney may, upon good cause shown, request the court to order an no more than one additional, but no more than one, examination by a different professional person for a period of no more than 4 hours.
- (b) If he the professional person finds that commitment proceedings should continue, the hearing shall must be held as scheduled.
- (3) The court may not order further evaluation pending the hearing unless sound medical reasons require additional time for a complete evaluation. Such The reasons shall must be set forth in the order, along with the amount of additional time needed. (Terminates July 1, 1997--sec. 1, Ch. 541, L. 1989.)
- 53-21-123. (Effective July 1, 1997) Examination of respondent following initial hearing -recommendation of professional person. (1) Following the initial hearing, whether before a judge or justice
  of the peace, the respondent shall must be examined by the a professional person without unreasonable
  delay. In the case of a petition alleging incapacity, the professional person must be a physician or
  psychologist. The examination may not exceed a period of 4 hours. The professional person shall
  immediately notify the county attorney of his the findings in person or by phone and shall make a written
  report of his the examination to the court, with and send copies to the respondent's attorney and the
  county attorney.
  - (2) The following action shall must be taken based on the professional person's findings:



- (a) If he the professional person recommends dismissal, he the professional person shall additionally notify counsel and the respondent shall, if detained, must be released and the petition dismissed. However, the county attorney may, upon good cause shown, request the court to order an no more than one additional, but no more than one, examination by a different professional person for a period of no more than 4 hours.
- (b) If he the professional person finds that commitment proceedings should continue, the hearing shall must be held as scheduled.
- (3) The court may not order further evaluation pending the hearing unless sound medical reasons require additional time for a complete evaluation. Such The reasons shall must be set forth in the order, along with the amount of additional time needed."

Section 6. Section 53-21-126, MCA, is amended to read:

- "53-21-126. (Temporary) Trial or hearing on petition. (1) The respondent shall must be present unless his the respondent's presence has been waived as provided in 53-21-119(2), and he shall the respondent must be represented by counsel at all stages of the trial. The trial shall be is limited to the determination of whether or not the respondent is mentally ill or seriously mentally ill or is an incapacitated person within the meaning set forth in this part.
- (2) The standard of proof in any a hearing held pursuant to this section is proof beyond a reasonable doubt with respect to any physical facts or evidence and clear and convincing evidence as to all other matters, except that mental disorders shall must be evidenced to a reasonable medical certainty. Imminent threat of self-inflicted injury or injury to others shall must be evidenced by overt acts, sufficiently recent in time as to be material and relevant as to the respondent's present condition.
- (3) The professional person appointed by the court shall must be present for the trial and subject to cross-examination. The trial shall be is governed by the Montana Rules of Civil Procedure except that, if tried by a jury, at least two-thirds of the jurors must shall concur on a finding that the respondent is seriously mentally ill. The written report of the professional person that indicates the professional person's diagnosis may be attached to the petition, but any matter otherwise inadmissible, such as hearsay matter, is not admissible merely because it is contained in the report. The court may order the trial closed to the public for the protection of the respondent.
  - (4) The professional person may testify as to the ultimate issue of whether the respondent is



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mentally ill or seriously mentally ill and whether the respondent is an incapacitated person. Testimony from
a professional person or others must be received on each element of the definition of mentally ill or
seriously mentally ill as those terms are defined in 53-21-102 and the definition of incapacitated person as
that term is defined in 72-5-101.

- (5) The court, upon the showing of good cause and when it is in the best interests of the respondent, may order a change of venue. (Terminates July 1, 1997--sec. 1, Ch. 541, L. 1989.)
- 53-21-126. (Effective July 1, 1997) Trial or hearing on petition. (1) The respondent shall must be present unless his the respondent's presence has been waived as provided in 53-21-119(2), and he shall the respondent must be represented by counsel at all stages of the trial. The trial shall be is limited to the determination of whether or not the respondent is seriously mentally ill or is an incapacitated person within the meaning set forth in this part.
- (2) The standard of proof in any a hearing held pursuant to this section is proof beyond a reasonable doubt with respect to any physical facts or evidence and clear and convincing evidence as to all other matters, except that mental disorders shall must be evidenced to a reasonable medical certainty. Imminent threat of self-inflicted injury or injury to others shall must be evidenced by overt acts, sufficiently recent in time as to be material and relevant as to the respondent's present condition.
- (3) The professional person appointed by the court shall must be present for the trial and subject to cross-examination. The trial shall be is governed by the Montana Rules of Civil Procedure except that, if tried by a jury, at least two-thirds of the jurors must shall concur on a finding that the respondent is seriously mentally ill. The written report of the professional person that indicates the professional person's diagnosis may be attached to the petition, but any matter otherwise inadmissible, such as hearsay matter, is not admissible merely because it is contained in the report. The court may order the trial closed to the public for the protection of the respondent.
- (4) The professional person may testify as to the ultimate issue of whether the respondent is seriously mentally ill. This testimony is insufficient unless accompanied by evidence from the professional person or others that:
  - (a) the respondent is suffering from a mental disorder; and
- (b) the mental disorder has resulted in self-inflicted injury or injury to others or the imminent threat thereof of injury or has deprived the person afflicted of the ability to protect his the person's life or health.
  - (5) The professional person may testify as to the ultimate issue of whether the respondent is an



incapacitated person. This testimony is insufficient unless accompanied by evidence from the professi	<u>onal</u>
person or others that the respondent lacks sufficient understanding or capacity to make or communi	cate
responsible decisions or that the mental disorder has impaired the respondent's judgment to the extent	that
the respondent is incapable of realizing and making a rational decision with respect to the responde	ent's
need for treatment.	

(6) The court, upon the showing of good cause and when it is in the best interests of the respondent, may order a change of venue."

Section 7. Section 53-21-127, MCA, is amended to read:

"53-21-127. (Temporary) Posttrial disposition. (1) If, upon trial, it is determined that the respondent is not mentally ill or seriously mentally ill within the meaning of this part, he shall the respondent must be discharged and the petition dismissed.

- (2) (a) If it is determined in a proceeding on a petition under 53-21-121(1)(a)(i) that the respondent is seriously mentally ill within the meaning of this part, the court shall hold a posttrial disposition hearing. The disposition hearing shall must be held within 5 days (including Saturdays, Sundays, and holidays unless the fifth day falls on a Saturday, Sunday, or holiday), during which time the court may order further evaluation and treatment of the respondent. At the conclusion of the disposition hearing, the court shall:
  - (i) commit the respondent to a facility for a period of not more than 3 months;
- (ii) order the respondent to be placed in the care and custody of his a relative or guardian or some other appropriate place other than an institution;
  - (iii) order outpatient therapy; or
  - (iv) make some other appropriate order for treatment.
- (b) No treatment <u>Treatment</u> ordered pursuant to this subsection (2)(a) may affect not effect the respondent's custody for a period of more than 3 months.
- (c) In determining which of the above alternatives in subsection (2)(a) to order, the court shall choose the least restrictive alternatives necessary to protect the respondent and the public and to permit effective treatment. The court shall consider and shall describe in its order what the alternatives for treatment of the respondent that are available, what the alternatives that were investigated, and why the investigated alternatives were not deemed considered suitable. The court shall enter into the record a detailed statement of the facts upon which it found the respondent to be seriously mentally ill.



(3) If it is determined in a proceeding on a petition under 53-21-121 <del>(1)(b)</del> (1)(a)(ii) that the
respondent is mentally ill within the meaning of this part, the court shall order that he the respondent
receive treatment for a period of no more than 30 days. The court shall choose the least restrictive course
of treatment reasonably available to the respondent. The court must shall make a separate finding, setting
forth the reason therefor for the finding if the order includes a requirement of inpatient treatment or
involuntary medication. The court may not order inpatient treatment in the Montana state hospital at Warm
Springs under this subsection (3). The respondent may not be required to pay for court-ordered treatment
unless <del>he is</del> financially able <u>to do so</u> .

- (4) Before ordering any treatment <u>under subsection (3)</u> for a respondent found to be mentally ill under subsection (3), the court shall make findings of fact that treatment appropriate to the needs of the respondent is available. The court shall also indicate on the order the name of the facility that is to be responsible for the management and supervision of the respondent's treatment. No A person may <u>not</u> use physical force to administer medication. A court may use any legal means to enforce an order to take medication, including immediate detention not to exceed 72 hours, until the mentally ill person can be returned to the court.
- (5) If it is determined in a proceeding on a petition under 53-21-121 that the respondent is an incapacitated person, the court shall appoint a treatment guardian for the duration of the period of commitment. (Terminates July 1, 1997--sec. 1, Ch. 541, L. 1989.)
- 53-21-127. (Effective July 1, 1997) Posttrial disposition. (1) If, upon trial, it is determined that the respondent is not seriously mentally ill within the meaning of this part, he shall the respondent must be discharged and the petition dismissed.
- (2) (a) If it is determined that the respondent is seriously mentally ill within the meaning of this part, the court shall hold a posttrial disposition hearing. The disposition hearing shall must be held within 5 days (including Saturdays, Sundays, and holidays unless the fifth day falls on a Saturday, Sunday, or holiday), during which time the court may order further evaluation and treatment of the respondent. At the conclusion of the disposition hearing, the court shall:
  - (i) commit the respondent to a facility for a period of not more than 3 months;
- (ii) order the respondent to be placed in the care and custody of his a relative or guardian or some other appropriate place other than an institution;
  - (iii) order outpatient therapy; or



- (iv) make some other appropriate order for treatment.
- (b) No treatment <u>Treatment</u> ordered pursuant to this subsection (2)(a) may affect not effect the respondent's custody for a period of more than 3 months.
- (c) In determining which of the above alternatives in subsection (2)(a) to order, the court shall choose the least restrictive alternatives necessary to protect the respondent and the public and to permit effective treatment. The court shall consider and shall describe in its order what the alternatives for treatment of the respondent that are available, what the alternatives that were investigated, and why the investigated alternatives were not deemed considered suitable. The court shall enter into the record a detailed statement of the facts upon which it found the respondent to be seriously mentally ill.
- (d) If it is determined in a proceeding under 53-21-121 that the respondent is an incapacitated person, the court shall appoint a treatment guardian for the duration of the commitment."

13 Section 8. Section 53-21-128, MCA, is amended to read:

- "53-21-128. (Temporary) Petition for extension of commitment period. (1) To extend the 3-month period of detention provided for in 53-21-127(2), the procedure set forth in this subsection (1) must be followed:
- (a) Not less than 2 calendar weeks prior to the end of the 3-month period, the professional person in charge of the patient at the place of detention may petition the district court in the county where the patient is detained for extension of the detention period unless otherwise ordered by the original committing court. The petition shall must be accompanied by a written report and evaluation of the patient's mental and physical condition. The report shall must describe any tests and evaluation devices which that have been employed in evaluating the patient, the course of treatment which that has been undertaken for the patient, and the future course of treatment anticipated by the professional person.
- (b) Upon the filing of the petition, the court shall give written notice of the filing of the petition to the patient; his the patient's next of kin, if reasonably available; the friend of respondent appointed by the court, if any; and the patient's counsel. If any person so notified requests a hearing prior to the termination of the previous detention authority period, the court shall immediately set a time and place for a hearing on a date not more than 10 days from the receipt of the request and notify the same people, including the professional person in charge of the patient. If a hearing is not requested, the court shall enter an order of commitment for a period not to exceed 6 months.



- must be the same in all respects as the procedure on the petition for the original 3-month commitment, except that the patient is not entitled to a trial by jury. The hearing shall must be held in the district court having jurisdiction over the facility in which the patient is detained unless otherwise ordered by the court. Court costs and witness fees, if any, shall must be paid by the county that paid the same costs in the initial commitment proceedings.
- (d) If upon the hearing the court finds that the patient is not seriously mentally ill within the meaning of this part, he shall the patient must be discharged and the petition dismissed. If the court finds that the patient continues to suffer from serious mental illness, the court shall order commitment, custody in by relatives, outpatient therapy, or ether another order for treatment as set forth in 53-21-127(2), except that no an order may affect his not effect the patient's custody for more than 6 months. In its order, the court shall describe what the alternatives for treatment of the patient that are available, what the alternatives that were investigated, and why the investigated alternatives were not doesned considered suitable. The court shall may not order continuation of an alternative which that does not include a comprehensive, individualized plan of treatment for the patient. A court order for the continuation of an alternative ehall must include a specific finding that a comprehensive, individualized plan of treatment exists.
- (2) To extend the period of treatment provided for in 53-21-127(3), the procedure set forth in this subsection (2) must be followed:
- (a) Not less than 7 days prior to the end of the 30-day period of treatment ordered under 53-21-127(3), the professional person in charge of the respondent's care may petition the court for extension of the treatment period. The petition must be accompanied by a written report and evaluation of the respondent's mental and physical condition. The report shall must describe any tests and evaluation devices which that have been employed in evaluating the respondent, the course of treatment which that has been undertaken for the respondent, and the future course of treatment anticipated by the professional person.
- (b) Upon the filing of the petition, the court shall give written notice of the filing of the petition to the respondent; his the respondent's next of kin, if reasonably available; the friend of respondent appointed by the court, if any; and the respondent's counsel. If any person so notified requests a hearing prior to the termination of the previous detention authority period, the court shall immediately set a time

and place for a hearing on a date not more than 5 days from the receipt of the request and notify the same people, including the professional person in charge of the respondent. If a hearing is not requested, the court shall enter an order of treatment for a period not to exceed 30 days.

- (c) Precedure The procedure on the petition for extension when a hearing has been requested shall must be the same in all respects as the procedure on the petition under 53-21-121(1)(b) for the original treatment, except that the respondent is not entitled to a trial by jury. The hearing shall must be held in the district court for the county in which the treatment is being supervised unless otherwise ordered by the court. Court costs and witness fees, if any, shall must be paid by the county that paid the same costs in the initial proceedings.
- of this part, the petition shall must be dismissed. If the court finds that the respondent continues to be mentally ill, the court shall order treatment for the respondent for a period not to exceed 30 days. In its order, the court shall describe what the alternatives for treatment of the respondent that are available, what the alternatives that were investigated, and why the investigated alternatives were not considered suitable. The court may not order continuation of an alternative which that does not include a comprehensive, individualized plan of treatment for the respondent. A court order for the continuation of an alternative shall must include a specific finding that a comprehensive, individualized plan of treatment exists.
- (3) Further extensions of the period of detention provided for in 53-21-127(2) may be obtained under the same procedure described in subsection (1) of this section, except that the patient's custody may not be affected for more than 1 year without a renewal of the commitment under the procedures set forth in subsection (1), including a statement of the findings required by subsection (1).
- (4) The period of treatment provided for in 53-21-127(3) may be extended only once under this section. (Terminates July 1, 1997--sec. 1, Ch. 541, L. 1989.)
- 53-21-128. (Effective July 1, 1997) Petition for extension of commitment period. (1) (a) Not less than 2 calendar weeks prior to the end of the 3-month period of detention provided for in 53-21-127(2), the professional person in charge of the patient at the place of detention may petition the district court in the county where the patient is detained for extension of the detention period unless otherwise ordered by the original committing court. The petition shall must be accompanied by a written report and evaluation of the patient's mental and physical condition. The report shall must describe any tests and evaluation devices which that have been employed in evaluating the patient, the course of treatment which that has



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been undertaken for the patient, and the future course of treatment anticipated by the professional person.

(b) Upon the filing of the petition, the court shall give written notice of the filing of the petition to the patient; his the patient's next of kin, if reasonably available; the friend of respondent appointed by the court, if any; and the patient's counsel. If any a person so notified requests a hearing prior to the termination of the previous detention authority, the court shall immediately set a time and place for a hearing on a date not more than 10 days from the receipt of the request and notify the same people, including the professional person in charge of the patient. If a hearing is not requested, the court shall enter an order of commitment for a period not to exceed 6 months.

- (c) Precedure The procedure on the petition for extension when a hearing has been requested shall must be the same in all respects as the procedure on the petition for the original 3-month commitment, except that the patient is not entitled to a trial by jury. The hearing shall must be held in the district court having jurisdiction over the facility in which the patient is detained unless otherwise ordered by the court. Court costs and witness fees, if any, shall must be paid by the county that paid the same costs in the initial commitment proceedings.
- (d) If upon the hearing the court finds that the patient is not seriously mentally ill within the meaning of this part, he shall the patient must be discharged and the petition dismissed. If the court finds that the patient continues to suffer from serious mental illness, the court shall order commitment, custody in by relatives, outpatient therapy, or ether another order for treatment as set forth in 53-21-127(2), except that no an order may affect his not effect the patient's custody for more than 6 months. In its order, the court shall describe what the alternatives for treatment of the patient that are available, what the alternatives that were investigated, and why the investigated alternatives were not deemed considered suitable. The court shall may not order continuation of an alternative which that does not include a comprehensive, individualized plan of treatment for the patient. A court order for the continuation of an alternative ehall must include a specific finding that a comprehensive, individualized plan of treatment exists.
- (2) Further extensions may be obtained under the same procedure described in subsection (1), except that the patient's custody may not be affected effected for more than 1 year without a renewal of the commitment under the procedures set forth in subsection (1), including a statement of the findings required by subsection (1)."

<u>NEW SECTION.</u> Section 9. Powers and duties of treatment guardian. (1) The powers and duties of a treatment guardian are those specified in the order appointing the treatment guardian unless the treatment guardian has also been appointed a guardian under Title 72, chapter 5. The treatment guardian is required to report the condition of the incapacitated person as required by the court.

(2) The treatment guardian shall make a decision on behalf of the incapacitated person as to whether to accept treatment, depending on whether the treatment appears to be in the person's best interest and is the least drastic means for accomplishing the treatment objective. In making a decision, the treatment guardian shall consult with the person and consider the person's expressed opinions, if any, even if those opinions do not constitute valid consent or rejection of treatment. The treatment guardian shall give consideration to any previous decisions made by the person in similar circumstances when the person was able to make treatment decisions. The treatment guardian shall consult with the physician or other professional who is proposing treatment, the person's attorney, and interested friends or relatives of the person as the treatment guardian considers appropriate in making the decision.

Section 10. Section 41-5-523, MCA, is amended to read:

"41-5-523. Disposition -- commitment to department -- placement and evaluation of youth -- restrictions. (1) If a youth is found to be a delinquent youth or a youth in need of supervision, the youth court may enter its judgment making any of the following dispositions:

- (a) place the youth on probation;
- (b) commit the youth to the department if the court determines that the youth is in need of placement in other than the youth's own home, provided that:
- (i) the court shall determine whether continuation in the home would be contrary to the welfare of the youth and whether reasonable efforts have been made to prevent or eliminate the need for removal of the youth from the youth's home. The court shall include a determination in the order committing the youth to the department.
- (ii) in the case of a delinquent youth who is determined by the court to be a serious juvenile offender, the judge may specify that the youth be placed in a state youth correctional facility if the judge finds that the placement is necessary for the protection of the public. The court may order the department to notify the court within 5 working days before the proposed release of a youth from a <u>state</u> youth correctional facility. Once a youth is committed to the department for placement in a state youth



- 1 correctional facility, the department is responsible for determining an appropriate date of release into an appropriate placement.
  - (c) order restitution by the youth or the youth's parents;
  - (d) impose a fine as authorized by law if the violation alleged would constitute a criminal offense if committed by an adult;
    - (e) require the performance of community service;
  - (f) require the youth, the youth's parents or guardians, or the persons having legal custody of the youth to receive counseling services;
  - (g) require the medical and psychological evaluation of the youth, the youth's parents or guardians, or the persons having legal custody of the youth;
  - (h) require the parents, guardians, or other persons having legal custody of the youth to furnish services that the court may designate;
  - (i) order further care, treatment, evaluation, or relief that the court considers beneficial to the youth and the community and that does not obligate funding from the department without the department's approval, except that a youth may not be placed by a youth court in a residential treatment facility as defined in 50-5-101. Only the department may, pursuant to subsection (1)(b), place a youth in a residential treatment facility.
  - (j) commit the youth to a mental health facility if, based upon the testimony of a professional person as defined in 53-21-102, the court finds that the youth is seriously mentally ill as defined in 53-21-102. The youth is entitled to all rights provided by 53-21-114 through 53-21-119. A youth adjudicated mentally ill or seriously mentally ill as defined in 53-21-102 may not be committed to a state youth correctional facility. A youth adjudicated to be mentally ill or seriously mentally ill after placement by the department in a state youth correctional facility must be moved to a more appropriate placement in response to the youth's mental health needs and consistent with the disposition alternatives available in 53-21-127.
    - (k) place the youth under home arrest as provided in Title 46, chapter 18, part 10.
  - (2) When a youth is committed to the department, the department shall determine the appropriate placement and rehabilitation program for the youth after considering the recommendations made under 41-5-527 by the youth placement committee. Placement is subject to the following limitations:
    - (a) A youth in need of supervision or adjudicated delinquent for commission of an act that would



not be a criminal offense if committed by an adult may not be placed in a state youth correctional facility.

- (b) A youth may not be held in a state youth correctional facility for a period of time in excess of the maximum period of imprisonment that could be imposed on an adult convicted of the offense or offenses that brought the youth under the jurisdiction of the youth court. Nothing in this section limits the power of the department to enter into an aftercare agreement with the youth pursuant to 52-5-126.
- (c) A youth may not be placed in or transferred to a penal institution or other facility used for the execution of sentences of adults convicted of crimes.
- (3) A youth placed by the department in a state youth correctional facility or other facility or program operated by the department or who signs an aftercare agreement under 52-5-126 must be supervised by the department. A youth who is placed in any other placement by the department, the youth court, or the youth court's juvenile probation officer must be supervised by the probation officer of the youth court having jurisdiction over the youth under 41-5-205 whether or not the youth is committed to the department. Supervision by the youth probation officer includes but is not limited to:
- (a) submitting information and documentation necessary for the person, committee, or team that is making the placement recommendation to determine an appropriate placement for the youth;
- (b) securing approval for payment of special education costs from the youth's school district of residence or the office of public instruction, as required in Title 20, chapter 7, part 4;
  - (c) submitting an application to a facility in which the youth may be placed; and
  - (d) case management of the youth.
- (4) The youth court may order that a youth to receive a medical or psychological evaluation at any time prior to final disposition if the youth waives the youth's constitutional rights in the manner provided for in 41-5-303. The county determined by the court as the residence of the youth is responsible for the cost of the evaluation, except as provided in subsection (5). A county may contract with the department or other public or private agencies to obtain evaluation services ordered by the court.
- (5) The youth court shall determine the financial ability of the youth's parents to pay the cost of an evaluation ordered by the court under subsection (4). If they are financially able, the court shall order the youth's parents to pay all or part of the cost of the evaluation.
- (6) The youth court may not order placement or evaluation of a youth at in a state youth correctional facility unless the youth is found to be a delinquent youth or is alleged to have committed an offense that is transferable to criminal court under 41-5-206.



(7) An e	valuation of a youth may not be performed at the Montana state hospital unless the	youth
is transferred to	the district court under 41-5-206.	

- (8) An order of the court may be modified at any time. In the case of a youth committed to the department, an order pertaining to the youth may be modified only upon notice to the department and  $\underline{a}$  subsequent hearing.
- (9) Whenever the court commits a youth to the department, it shall transmit with the dispositional judgment copies of medical reports, social history material, education records, and any other clinical, predisposition, or other reports and information pertinent to the care and treatment of the youth.
- (10) If a youth is committed to the department, the court shall examine the financial ability of the youth's parents or guardians to pay a contribution covering all or part of the costs for the care, commitment, and treatment of the youth, including the costs of necessary medical, dental, and other health care.
- (11) If the court determines that the youth's parents or guardians are financially able to pay a contribution as provided in subsection (10), the court shall order the youth's parents or guardians to pay an amount based on the uniform child support guidelines adopted by the department of social and rehabilitation services pursuant to 40-5-209.
- (12) (a) Except as provided in subsection (12)(b), contributions ordered under this section and each modification of an existing order are enforceable by immediate or delinquency income withholding, or both, under Title 40, chapter 5, part 4. An order for contribution that is inconsistent with this section is nevertheless subject to withholding for the payment of the contribution without need for an amendment of the support order or for any further action by the court.
- (b) A court-ordered exception from contributions under this section must be in writing and be included in the order. An exception from the immediate income withholding requirement may be granted if the court finds that there is:
  - (i) good cause not to require immediate income withholding; or
- (ii) an alternative arrangement between the department and the person who is ordered to pay contributions.
- (c) A finding of good cause not to require immediate income withholding must, at a minimum, be based upon:
  - (i) a written determination and explanation by the court of the reasons why the implementation of



1	immediate income withholding is not in the best interests of the child; and
2	(ii) proof of timely payment of previously ordered support in cases involving modification of
3	contributions ordered under this section.
4	(d) An alternative arrangement must:
5	(i) provide sufficient security to ensure compliance with the arrangement;
6	(ii) be in writing and be signed by a representative of the department and the person required to
7	make contributions; and
8	(iii) if approved by the court, be entered into the record of the proceeding.
9	(13) Upon a showing of a change in the financial ability of the youth's parents or guardians to pay,
10	the court may modify its order for the payment of contributions required under subsection (11).
11	(14) (a) If the court orders the payment of contributions under this section, the department shall
12	apply to the department of social and rehabilitation services for support enforcement services pursuant to
13	Title IV-D of the Social Security Act.
14	(b) The department of social and rehabilitation services may collect and enforce a contribution order
15	under this section by any means available under law, including the remedies provided for in Title 40,
16	chapter 5, parts 2 and 4."
17	
18	NEW SECTION. Section 11. Codification instruction. [Section 9] is intended to be codified as an
19	integral part of Title 53, chapter 21, part 1, and the provisions of Title 53, chapter 21, part 1, apply to
20	[section 9].
21	
22	NEW SECTION. Section 12. Effective dates. (1) [Sections 1 through 9 and 11 and this section]
23	are effective October 1, 1995.
24	(2) [Section 10] is effective July 1, 1997.
25	-END-



#### STATE OF MONTANA - FISCAL NOTE

#### Fiscal Note for HB0041, as introduced

#### DESCRIPTION OF PROPOSED LEGISLATION:

A bill requiring a determination of incapacity in an involuntary commitment proceeding. This bill would require the appointment of a treatment guardian, enumerating the powers and duties of the treatment guardian.

## ASSUMPTIONS:

- 1. In current law under Title 53, determination of capacity is not related to involuntary commitment, but is done (under Title 72) in a separate hearing, usually held at Montana State Hospital, where the patient is represented by the legal staff of the Board of Visitors and the petitioner (Montana State Hospital MSH) is represented by the legal staff of Department of Corrections and Human Services (DCHS). The current system allows evaluation for commitment by a mental health professional person (MSW, RN, LPC, psychologist, or physician).
- 2. In proposed law under HB41, the district court that commits the person will be responsible for determining competency for involuntary commitment. Evaluation will be required by a psychiatrist or psychologist.
- 3. Current level of filings under 53-21-121, MCA, will remain constant.
- 4. There will be 225 involuntary commitments per year.
- 5. In 60% of commitments(135), capacity to give consent is an issue. In 58% of these commitments(79), a psychologist or physician is already involved and therefore no extra cost is involved.
- 6. In 42% of the 135 commitments (57), without this legislation, would involve an evaluation by someone other than a psychologist or a physician.
- 7. It would cost \$300 more per evaluation to have an evaluation done by a psychologist or a physician rather than by some other professional person.
- 8. In about 25% of the 135 commitments (34), where capacity is an issue, problems in finding a treatment guardian will require an extra day of hospitalization due to this proposed legislation. Psychiatric hospitalization costs \$750 per day.
- 9. In the case of a difference of opinion, the county attorney or the respondent may request an additional evaluation by a different professional person.

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

Appointment of a "treatment guardian" as defined may result in increased costs to counties. Currently, qualified persons under this section may not be readily available in some counties, requiring travel. Many counties do not have suitable mental health facilities; therefore, persons detained under Title 53 must be transported to another county, increasing time and travel costs for the "treatment guardian".

There would be an additional cost of approximately \$42,600 to counties, using the following calculation:

57 commitments X \$300 = \$17,100

34 commitments X \$750 = \$25,500

(continued)

DAVE LEWIS, BUDGET DIRECTOR

ET DIRECTOR DATE

Office of Budget and Program Planning

LIZ SMITH, PRIMARY SPONSOR

Fiscal Note for HB0041, as introduced

HB 41

Fiscal Note Request, <u>HB0041</u>, as introduced Page 2 (continued)

## LONG RANGE EFFECTS OF PROPOSED LEGISLATION:

The long-term effect may be less cost for institutional care.

# TECHNICAL NOTES:

HB41 changes the word "affect" or "affected" to "effect" or "effected" in several places as noted below. The correct word is "affect" and should not be changed.

Page 13 Line 23

Page 15 Line 2

Page 16 Line 11

Page 17 Line 20

Page 18 Lines 19 and 27

1	HOUSE BILL NO. 41
2	INTRODUCED BY L. SMITH
3	BY REQUEST OF THE DEPARTMENT OF CORRECTIONS AND HUMAN SERVICES
4	
5	A BILL FOR AN ACT ENTITLED: "AN ACT REQUIRING A DETERMINATION OF INCAPACITY IN AN
6	INVOLUNTARY COMMITMENT PROCEEDING; REQUIRING THE APPOINTMENT OF A TREATMENT
7	GUARDIAN; ENUMERATING THE POWERS AND DUTIES OF A TREATMENT GUARDIAN; AMENDING
8	SECTIONS 41 5 523, 53 21 102, 53 21 106, 53 21 120, 53 21 121, 53 21 123, 53 21 126, 53 21 127,
9	AND 53-21-128, MCA; AND PROVIDING EFFECTIVE DATES: PROVIDING A PROCEDURE BY WHICH
10	MEDICATION MAY BE INVOLUNTARILY ADMINISTERED TO A PATIENT AT A MENTAL HEALTH FACILITY;
11	PROVIDING PROTECTIONS FOR THE PATIENT; PROVIDING FOR AN ANNUAL REPORT TO THE
12	GOVERNOR; AND AMENDING SECTIONS 53-21-104 AND 53-21-127, MCA."
13	
14	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:
15	(Refer to Introduced Bill)
16	Strike everything after the enacting clause and insert:
17	
18	Section 1. Section 53-21-104, MCA, is amended to read:
19	"53-21-104. Powers and duties of mental disabilities board of visitors. (1) The board is an
20	independent board of inquiry and review to assure that the treatment of all persons either voluntarily or
21	involuntarily admitted to a mental facility is humane and decent and meets the requirements set forth in this
22	part.
23	(2) The board shall review all plans for experimental research involving persons admitted to a
24	mental health facility to assure that the research project is humane and not unduly hazardous and that it
25	complies with the principles of the statement on the use of human subjects for research of the American
26	association on mental deficiency and with the principles for research involving human subjects required by
27	the United States department of health, education, and welfare. An experimental research project involving
28	persons admitted to a mental health facility affected by this part may not be commenced unless it is
29	approved by the mental disabilities board of visitors.
30	(3) The board shall at least annually inspect every mental health facility which is providing

1	treatment and evaluation to any person pursuant to this part. The board shall inspect the physical plant,
2	including residential, recreational, dining, and sanitary facilities. It shall visit all wards and treatment areas.
3	The board shall inquire concerning all treatment programs being implemented by the facility.

- (4) The board shall annually insure that a treatment plan exists and is being implemented for each patient admitted or committed to a mental health facility under this part. The board shall inquire concerning all use of restraints, isolation, or other extraordinary measures.
- (5) The board may assist any patient at a mental health facility in resolving any grievance the patient may have concerning the patient's commitment or course of treatment in the facility.
- (6) The board shall employ and be responsible for full-time legal counsel at the state hospital, whose responsibility is to act on behalf of all patients at the institution. The board shall insure that there is sufficient legal staff and facilities to insure availability to all patients and shall require that the appointed counsel periodically interview every patient and examine the patient's files and records. The board may employ additional legal counsel for representation of patients in a similar manner at any other mental health facility having inpatient capability.
- (7) If the board believes that any facility is failing to comply with the provisions of this part in regard to its physical facilities or its treatment of any patient, it shall report its findings at once to the professional person in charge of the facility and the director of the department, and if appropriate, after waiting a reasonable time for a response from the professional person, the board may notify the next of kin or guardian of any patient involved, the friend of respondent appointed by the court for any patient involved, and the district court which has jurisdiction over the facility.
  - (8) The board shall report annually to the governor concerning:
  - (a) the status of the mental health facilities and treatment programs which it has inspected; and
- (b) medications involuntarily administered to patients in mental health facilities and the effectiveness of the review procedure required by 53-21-127(2) in protecting patients from unnecessary or excessive medication."

Section 2. Section 53-21-127, MCA, is amended to read:

"53-21-127. (Temporary) Posttrial disposition. (1) If, upon trial, it is determined that the respondent is not mentally ill or seriously mentally ill within the meaning of this part, he shall the respondent must be discharged and the petition dismissed.



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- (2) (a) If it is determined in a proceeding under 53-21-121(1)(a) that the respondent is seriously mentally ill within the meaning of this part, the court shall hold a posttrial disposition hearing. The disposition hearing shall be held within 5 days (including Saturdays, Sundays, and holidays unless the fifth day falls on a Saturday, Sunday, or holiday), during which time the court may order further evaluation and treatment of the respondent. At the conclusion of the disposition hearing, the court shall:
  - (i) commit the respondent to a facility for a period of not more than 3 months;
- (ii) order the respondent to be placed in the care and custody of his a relative or guardian or some other appropriate place other than an institution;
  - (iii) order outpatient therapy; or
  - (iv) make some other appropriate order for treatment.
- (b) No treatment ordered pursuant to this subsection may affect the respondent's custody for a period of more than 3 months.
- (c) In determining which of the above alternatives to order, the court shall choose the least restrictive alternatives necessary to protect the respondent and the public and to permit effective treatment. The court shall consider and shall describe in its order what alternatives for treatment of the respondent are available, what alternatives were investigated, and why the investigated alternatives were not deemed suitable. The court may authorize the chief medical officer of a facility to administer appropriate medication involuntarily if the court finds that involuntary medication is necessary to protect the respondent and the public and to facilitate effective treatment. Medication may not be involuntarily administered to a patient unless the chief medical officer of the facility approves it prior to the beginning of the involuntary administration and unless, if possible, a medication review committee reviews it prior to the beginning of the involuntary administration or, if prior review is not possible, within 5 working days after the beginning of the involuntary administration. The medication review committee must include at least one person who is not an employee of the facility. The patient and the patient's attorney or advocate, if the patient has one, must receive adequate written notice of the date, time, and place of the review and must be allowed to appear and give testimony and evidence. The involuntary administration of medication must be again reviewed by the committee 14 days and 90 days after the beginning of the involuntary administration if medication is still being involuntarily administered. The mental disabilities board of visitors must be fully informed of the matter within 5 working days after the beginning of the involuntary administration. The court shall enter into the record a detailed statement of the facts upon which it found the respondent to

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be seriously mentally ill and, if the court authorized involuntary medication, of the facts upon which it found involuntary medication to be necessary.

- (3) If it is determined in a proceeding under 53-21-121(1)(b) that the respondent is mentally ill within the meaning of this part, the court shall order that he receive treatment for a period of no more than 30 days. The court shall choose the least restrictive course of treatment reasonably available to the respondent. The court must make a separate finding, setting forth the reason therefor if the order includes a requirement of inpatient treatment or involuntary medication. The court may not order inpatient treatment in the Montana state hospital at Warm Springs under this subsection (3). The respondent may not be required to pay for court-ordered treatment unless he is financially able.
- (4) Before ordering any treatment for a respondent found to be mentally ill under subsection (3), the court shall make findings of fact that treatment appropriate to the needs of the respondent is available. The court shall also indicate on the order the name of the facility that is to be responsible for the management and supervision of the respondent's treatment. No person may use physical force to administer medication. A court may use any legal means to enforce an order to take medication, including immediate detention not to exceed 72 hours, until the mentally ill person can be returned to the court. (Terminates July 1, 1997--sec. 1, Ch. 541, L. 1989.)
- 53-21-127. (Effective July 1, 1997) Posttrial disposition. (1) If, upon trial, it is determined that the respondent is not seriously mentally ill within the meaning of this part, he shall the respondent must be discharged and the petition dismissed.
- (2) (a) If it is determined that the respondent is seriously mentally ill within the meaning of this part, the court shall hold a posttrial disposition hearing. The disposition hearing shall be held within 5 days (including Saturdays, Sundays, and holidays unless the fifth day falls on a Saturday, Sunday, or holiday), during which time the court may order further evaluation and treatment of the respondent. At the conclusion of the disposition hearing, the court shall:
  - (i) commit the respondent to a facility for a period of not more than 3 months;
- (ii) order the respondent to be placed in the care and custody of his a relative or guardian or some other appropriate place other than an institution;
  - (iii) order outpatient therapy; or
  - (iv) make some other appropriate order for treatment.
- (b) No treatment ordered pursuant to this subsection may affect the respondent's custody for a



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period of more than 3 months.

(c) In determining which of the above alternatives to order, the court shall choose the least restrictive alternatives necessary to protect the respondent and the public and to permit effective treatment. The court shall consider and shall describe in its order what alternatives for treatment of the respondent are available, what alternatives were investigated, and why the investigated alternatives were not deemed suitable. The court may authorize the chief medical officer of a facility to administer appropriate medication involuntarily if the court finds that involuntary medication is necessary to protect the respondent and the public and to facilitate effective treatment. Medication may not be involuntarily administered to a patient unless the chief medical officer of the facility approves it prior to the beginning of the involuntary administration and unless, if possible, a medication review committee reviews it prior to the beginning of the involuntary administration or, if prior review is not possible, within 5 working days after the beginning of the involuntary administration. The medication review committee must include at least one person who is not an employee of the facility. The patient and the patient's attorney or advocate, if the patient has one, must receive adequate written notice of the date, time, and place of the review and must be allowed to appear and give testimony and evidence. The involuntary administration of medication must be again reviewed by the committee 14 days and 90 days after the beginning of the involuntary administration if medication is still being involuntarily administered. The mental disabilities board of visitors must be fully informed of the matter within 5 working days after the beginning of the involuntary administration. The court shall enter into the record a detailed statement of the facts upon which it found the respondent to be seriously mentally ill and, if the court authorized involuntary medication, of the facts upon which it found involuntary medication to be necessary."

22 -END-



1	HOUSE BILL NO. 41
2	INTRODUCED BY L. SMITH
3	BY REQUEST OF THE DEPARTMENT OF CORRECTIONS AND HUMAN SERVICES
4	
5	A BILL FOR AN ACT ENTITLED: "AN ACT REQUIRING A DETERMINATION OF INCAPACITY IN AN
6	INVOLUNTARY COMMITMENT PROCEEDING; REQUIRING THE APPOINTMENT OF A TREATMENT
7	GUARDIAN; ENUMERATING THE POWERS AND DUTIES OF A TREATMENT GUARDIAN; AMENDING
8	SECTIONS 41 5 523, 53 21 102, 53 21 106, 53 21 120, 53 21 121, 53 21 123, 53 21 126, 53 21 127,
9	AND 53-21-128, MCA; AND PROVIDING EFFECTIVE DATES. PROVIDING A PROCEDURE BY WHICH
10	MEDICATION MAY BE INVOLUNTARILY ADMINISTERED TO A PATIENT AT A MENTAL HEALTH FACILITY;
11	PROVIDING PROTECTIONS FOR THE PATIENT; PROVIDING FOR AN ANNUAL REPORT TO THE
12	GOVERNOR; AND AMENDING SECTIONS 53-21-104 AND 53-21-127, MCA."
13	
14	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

THERE ARE NO CHANGES IN THIS BILL AND IT WILL NOT BE REPRINTED. PLEASE REFER TO SECOND READING COPY (YELLOW) FOR COMPLETE TEXT.

## SENATE STANDING COMMITTEE REPORT

Page 1 of 1 March 7, 1995

#### MR. PRESIDENT:

We, your committee on Judiciary having had under consideration HB 41 (third reading copy -- blue), respectfully report that HB 41 be amended as follows and as so amended be concurred in.)

igned Senator Bruce Crippen, Chair

That such amendments read:

1. Page 3, line 28. Following: "visitors"

Insert: "and the director of the department of corrections and
 human services"

2. Page 3, line 29.

Following: "administration."

Insert: "The director shall report to the governor on an annual basis."

3. Page 4, line 4.

Strike: "he"

Insert: "the respondent"

4. Page 5, line 17. Following: "visitors"

Insert: "and the director of the department of corrections and human services"

5. Page 5, line 18.

Following: "administration."

Insert: "The director shall report to the governor on an annual basis."

-END-

HB 41

SENATE

Sec. of Senate

Senator Carrying Bill

531106SC.SRF

1	HOUSE BILL NO. 41
2	INTRODUCED BY L. SMITH
3	BY REQUEST OF THE DEPARTMENT OF CORRECTIONS AND HUMAN SERVICES
4	
5	A BILL FOR AN ACT ENTITLED: "AN ACT REQUIRING A DETERMINATION OF INCAPACITY IN AN
6	INVOLUNTARY COMMITMENT PROCEEDING; REQUIRING THE APPOINTMENT OF A TREATMENT
7	GUARDIAN; ENUMERATING THE POWERS AND DUTIES OF A TREATMENT GUARDIAN; AMENDING
8	SECTIONS 41 5 523, 53 21 102, 53 21 106, 53 21 120, 53 21 121, 53 21 123, 53 21 126, 53 21 127,
9	AND 53-21-128, MCA; AND PROVIDING EFFECTIVE DATES. PROVIDING A PROCEDURE BY WHICH
10	MEDICATION MAY BE INVOLUNTARILY ADMINISTERED TO A PATIENT AT A MENTAL HEALTH FACILITY;
11	PROVIDING PROTECTIONS FOR THE PATIENT; PROVIDING FOR AN ANNUAL REPORT TO THE
12	GOVERNOR; AND AMENDING SECTIONS 53-21-104 AND 53-21-127, MCA."
13	
14	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:
15	(Refer to Introduced Bill)
16	Strike everything after the enacting clause and insert:
17	
18	Section 1. Section 53-21-104, MCA, is amended to read:
19	"53-21-104. Powers and duties of mental disabilities board of visitors. (1) The board is an
20	independent board of inquiry and review to assure that the treatment of all persons either voluntarily or
21	involuntarily admitted to a mental facility is humane and decent and meets the requirements set forth in this
22	part.
23	(2) The board shall review all plans for experimental research involving persons admitted to a
24	mental health facility to assure that the research project is humane and not unduly hazardous and that it
25	complies with the principles of the statement on the use of human subjects for research of the American
26	association on mental deficiency and with the principles for research involving human subjects required by
27	the United States department of health, education, and welfare. An experimental research project involving
28	persons admitted to a mental health facility affected by this part may not be commenced unless it is
29	approved by the mental disabilities board of visitors.
30	(3) The board shall at least annually inspect every mental health facility which is providing



treatment and evaluation to any person pursuant to this part. The board shall inspect the physical plant,
including residential, recreational, dining, and sanitary facilities. It shall visit all wards and treatment areas.
The board shall inquire concerning all treatment programs being implemented by the facility.

- (4) The board shall annually insure that a treatment plan exists and is being implemented for each patient admitted or committed to a mental health facility under this part. The board shall inquire concerning all use of restraints, isolation, or other extraordinary measures.
- (5) The board may assist any patient at a mental health facility in resolving any grievance the patient may have concerning the patient's commitment or course of treatment in the facility.
- (6) The board shall employ and be responsible for full-time legal counsel at the state hospital, whose responsibility is to act on behalf of all patients at the institution. The board shall insure that there is sufficient legal staff and facilities to insure availability to all patients and shall require that the appointed counsel periodically interview every patient and examine the patient's files and records. The board may employ additional legal counsel for representation of patients in a similar manner at any other mental health facility having inpatient capability.
- (7) If the board believes that any facility is failing to comply with the provisions of this part in regard to its physical facilities or its treatment of any patient, it shall report its findings at once to the professional person in charge of the facility and the director of the department, and if appropriate, after waiting a reasonable time for a response from the professional person, the board may notify the next of kin or guardian of any patient involved, the friend of respondent appointed by the court for any patient involved, and the district court which has jurisdiction over the facility.
  - (8) The board shall report annually to the governor concerning:
  - (a) the status of the mental health facilities and treatment programs which it has inspected; and
- (b) medications involuntarily administered to patients in mental health facilities and the effectiveness of the review procedure required by 53-21-127(2) in protecting patients from unnecessary or excessive medication."

Section 2. Section 53-21-127, MCA, is amended to read:

"53-21-127. (Temporary) Posttrial disposition. (1) If, upon trial, it is determined that the respondent is not mentally ill or seriously mentally ill within the meaning of this part, he shall the respondent must be discharged and the petition dismissed.



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- (2) (a) If it is determined in a proceeding under 53-21-121(1)(a) that the respondent is seriously mentally ill within the meaning of this part, the court shall hold a posttrial disposition hearing. The disposition hearing shall be held within 5 days (including Saturdays, Sundays, and holidays unless the fifth day falls on a Saturday, Sunday, or holiday), during which time the court may order further evaluation and treatment of the respondent. At the conclusion of the disposition hearing, the court shall:
  - (i) commit the respondent to a facility for a period of not more than 3 months;
- (ii) order the respondent to be placed in the care and custody of his a relative or guardian or some other appropriate place other than an institution;
  - (iii) order outpatient therapy; or
  - (iv) make some other appropriate order for treatment.
- (b) No treatment ordered pursuant to this subsection may affect the respondent's custody for a period of more than 3 months.
- (c) In determining which of the above alternatives to order, the court shall choose the least restrictive alternatives necessary to protect the respondent and the public and to permit effective treatment. The court shall consider and shall describe in its order what alternatives for treatment of the respondent are available, what alternatives were investigated, and why the investigated alternatives were not deemed suitable. The court may authorize the chief medical officer of a facility to administer appropriate medication involuntarily if the court finds that involuntary medication is necessary to protect the respondent and the public and to facilitate effective treatment. Medication may not be involuntarily administered to a patient unless the chief medical officer of the facility approves it prior to the beginning of the involuntary administration and unless, if possible, a medication review committee reviews it prior to the beginning of the involuntary administration or, if prior review is not possible, within 5 working days after the beginning of the involuntary administration. The medication review committee must include at least one person who is not an employee of the facility. The patient and the patient's attorney or advocate, if the patient has one, must receive adequate written notice of the date, time, and place of the review and must be allowed to appear and give testimony and evidence. The involuntary administration of medication must be again reviewed by the committee 14 days and 90 days after the beginning of the involuntary administration if medication is still being involuntarily administered. The mental disabilities board of visitors AND THE DIRECTOR OF THE DEPARTMENT OF CORRECTIONS AND HUMAN SERVICES must be fully informed of the matter within 5 working days after the beginning of the involuntary administration. THE DIRECTOR

- SHALL REPORT TO THE GOVERNOR ON AN ANNUAL BASIS. The court shall enter into the record a detailed statement of the facts upon which it found the respondent to be seriously mentally ill and, if the court authorized involuntary medication, of the facts upon which it found involuntary medication to be necessary.
- (3) If it is determined in a proceeding under 53-21-121(1)(b) that the respondent is mentally ill within the meaning of this part, the court shall order that he <u>THE RESPONDENT</u> receive treatment for a period of no more than 30 days. The court shall choose the least restrictive course of treatment reasonably available to the respondent. The court must make a separate finding, setting forth the reason therefor if the order includes a requirement of inpatient treatment or involuntary medication. The court may not order inpatient treatment in the Montana state hospital at Warm Springs under this subsection (3). The respondent may not be required to pay for court-ordered treatment unless he <u>RESPONDENT</u> is financially able.
- (4) Before ordering any treatment for a respondent found to be mentally ill under subsection (3), the court shall make findings of fact that treatment appropriate to the needs of the respondent is available. The court shall also indicate on the order the name of the facility that is to be responsible for the management and supervision of the respondent's treatment. No person may use physical force to administer medication. A court may use any legal means to enforce an order to take medication, including immediate detention not to exceed 72 hours, until the mentally ill person can be returned to the court. (Terminates July 1, 1997--sec. 1, Ch. 541, L. 1989.)
- 53-21-127. (Effective July 1, 1997) Posttrial disposition. (1) If, upon trial, it is determined that the respondent is not seriously mentally ill within the meaning of this part, he shall the respondent must be discharged and the petition dismissed.
- (2) (a) If it is determined that the respondent is seriously mentally ill within the meaning of this part, the court shall hold a posttrial disposition hearing. The disposition hearing shall be held within 5 days (including Saturdays, Sundays, and holidays unless the fifth day falls on a Saturday, Sunday, or holiday), during which time the court may order further evaluation and treatment of the respondent. At the conclusion of the disposition hearing, the court shall:
  - (i) commit the respondent to a facility for a period of not more than 3 months;
- (ii) order the respondent to be placed in the care and custody of his a relative or guardian or some other appropriate place other than an institution;



54th Legislature

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- (iii) order outpatient therapy; or
- 2 (iv) make some other appropriate order for treatment.
  - (b) No treatment ordered pursuant to this subsection may affect the respondent's custody for a period of more than 3 months.
  - (c) In determining which of the above alternatives to order, the court shall choose the least restrictive alternatives necessary to protect the respondent and the public and to permit effective treatment. The court shall consider and shall describe in its order what alternatives for treatment of the respondent are available, what alternatives were investigated, and why the investigated alternatives were not deemed suitable. The court may authorize the chief medical officer of a facility to administer appropriate medication involuntarily if the court finds that involuntary medication is necessary to protect the respondent and the public and to facilitate effective treatment. Medication may not be involuntarily administered to a patient unless the chief medical officer of the facility approves it prior to the beginning of the involuntary administration and unless, if possible, a medication review committee reviews it prior to the beginning of the involuntary administration or, if prior review is not possible, within 5 working days after the beginning of the involuntary administration. The medication review committee must include at least one person who is not an employee of the facility. The patient and the patient's attorney or advocate, if the patient has one, must receive adequate written notice of the date, time, and place of the review and must be allowed to appear and give testimony and evidence. The involuntary administration of medication must be again reviewed by the committee 14 days and 90 days after the beginning of the involuntary administration if medication is still being involuntarily administered. The mental disabilities board of visitors AND THE DIRECTOR OF THE DEPARTMENT OF CORRECTIONS AND HUMAN SERVICES must be fully informed of the matter within 5 working days after the beginning of the involuntary administration. THE DIRECTOR SHALL REPORT TO THE GOVERNOR ON AN ANNUAL BASIS. The court shall enter into the record a detailed statement of the facts upon which it found the respondent to be seriously mentally ill and, if the court authorized involuntary medication, of the facts upon which it found involuntary medication to be necessary."

27 -END-

