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	CIVIL COMMITMENT AMENDMENTS
	2012 GENERAL SESSION
	STATE OF UTAH
	Chief Sponsor: Bradley M. Daw
	Senate Sponsor: Margaret Dayton
LONG	TITLE
Genera	al Description:
ئام داد مان	This bill amends Title 62A, Chapter 15, Substance Abuse and Mental Health Act, by
	ng harmful sexual conduct as grounds for a civil commitment.
Higniiş	ghted Provisions:
	This bill:
	► defines the term "harmful sexual conduct";
	► amends the definition of "substantial danger";
	amends the process for civil commitment; and
	makes technical changes.
Money	Appropriated in this Bill:
	None
Other	Special Clauses:
	None
Utah C	Code Sections Affected:
AMEN	DS:
	62A-15-602 , as last amended by Laws of Utah 2003, Chapters 22 and 303
	62A-15-631 , as last amended by Laws of Utah 2011, Chapter 366
Be it en	nacted by the Legislature of the state of Utah:
	Section 1. Section 62A-15-602 is amended to read:
	62A-15-602. Definitions.
	As used in this part, Part 7, Commitment of Persons Under Age 18 to Division of

30 Substance Abuse and Mental Health, Part 8, Interstate Compact on Mental Health, Part 9, Utah 31 Forensic Mental Health Facility, and Part 10, Declaration for Mental Health Treatment: (1) "Adult" means a person 18 years of age or older. 32 33 (2) "Commitment to the custody of a local mental health authority" means that an adult 34 is committed to the custody of the local mental health authority that governs the mental health 35 catchment area in which the proposed patient resides or is found. 36 (3) "Designated examiner" means a licensed physician familiar with severe mental illness, preferably a psychiatrist, designated by the division as specially qualified by training or 37 38 experience in the diagnosis of mental or related illness or another licensed mental health 39 professional designated by the division as specially qualified by training and at least five years' 40 continual experience in the treatment of mental or related illness. At least one designated 41 examiner in any case shall be a licensed physician. No person who is the applicant, or who 42 signs the certification, under Section 62A-15-631 may be a designated examiner in the same 43 case. 44 (4) "Designee" means a physician who has responsibility for medical functions 45 including admission and discharge, an employee of a local mental health authority, or an employee of an agency that has contracted with a local mental health authority to provide 46 47 mental health services under Section 17-43-304. (5) "Harmful sexual conduct" means any of the following conduct upon an individual 48 49 without the individual's consent, or upon an individual who cannot legally consent to the 50 conduct including under the circumstances described in Subsections 76-5-406(1) through (12): 51 (a) sexual intercourse: 52 (b) penetration, however slight, of the genital or anal opening of the individual; 53 (c) any sexual act involving the genitals or anus of the actor or the individual and the 54 mouth or anus of either individual, regardless of the gender of either participant; or 55 (d) any sexual act causing substantial emotional injury or bodily pain.

[(5)] (6) "Institution" means a hospital, or a health facility licensed under the

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provisions of Section 26-21-9.

58	[(6)] (7) "Licensed physician" means an individual licensed under the laws of this state
59	to practice medicine, or a medical officer of the United States government while in this state in
60	the performance of official duties.
61	[(7)] (8) "Local comprehensive community mental health center" means an agency or
62	organization that provides treatment and services to residents of a designated geographic area,
63	operated by or under contract with a local mental health authority, in compliance with state
64	standards for local comprehensive community mental health centers.
65	(9) "Mental health facility" means the Utah State Hospital or other facility that
66	provides mental health services under contract with the division, a local mental health
67	authority, or organization that contracts with a local mental health authority.
68	(10) "Mental health officer" means an individual who is designated by a local mental
69	health authority as qualified by training and experience in the recognition and identification of
70	mental illness, to interact with and transport persons to any mental health facility.
71	[(8)] (11) "Mental illness" means a psychiatric disorder as defined by the current
72	edition of the Diagnostic and Statistical Manual of Mental Disorders published by the
73	American Psychiatric Association which substantially impairs a person's mental, emotional,
74	behavioral, or related functioning.
75	$[\frac{(11)}{2}]$ "Patient" means an individual under commitment to the custody or to the
76	treatment services of a local mental health authority.
77	[(12)] (13) "Serious bodily injury" means bodily injury which involves a substantial
78	risk of death, unconsciousness, extreme physical pain, protracted and obvious disfigurement, or
79	protracted loss or impairment of the function of a bodily member, organ, or mental faculty.
80	$[\frac{(13)}{(14)}]$ "Substantial danger" means the person, by his or her behavior, due to
81	mental illness:
82	(a) is at serious risk to:
83	(i) commit suicide[,];
84	(ii) inflict serious bodily injury on himself or herself; or
85	(iii) because of his or her actions or inaction, suffer serious bodily injury because he or

86 she is incapable of providing the basic necessities of life, such as food, clothing, and shelter; or 87 (b) is at serious risk to cause or attempt to cause serious bodily injury[; or] or engage in 88 harmful sexual conduct. 89 [(c) has inflicted or attempted to inflict serious bodily injury on another.] [(14)] (15) "Treatment" means psychotherapy, medication, including the administration 90 91 of psychotropic medication, and other medical treatments that are generally accepted medical 92 and psychosocial interventions for the purpose of restoring the patient to an optimal level of 93 functioning in the least restrictive environment. 94 Section 2. Section **62A-15-631** is amended to read: 95 62A-15-631. Involuntary commitment under court order -- Examination --96 Hearing -- Power of court -- Findings required -- Costs. 97 (1) Proceedings for involuntary commitment of an individual who is 18 years of age or older may be commenced by filing a written application with the district court of the county in 98 99 which the proposed patient resides or is found, by a responsible person who has reason to know 100 of the condition or circumstances of the proposed patient which lead to the belief that the 101 individual has a mental illness and should be involuntarily committed. That application shall 102 be accompanied by: 103 (a) a certificate of a licensed physician or a designated examiner stating that within a seven-day period immediately preceding the certification the physician or designated examiner 104 105 has examined the individual, and that the physician or designated examiner is of the opinion 106 that the individual is mentally ill and should be involuntarily committed; or 107 (b) a written statement by the applicant that: 108 (i) the individual has been requested to, but has refused to, submit to an examination of 109 mental condition by a licensed physician or designated examiner; 110 (ii) is sworn to under oath; and

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(2) Before issuing a judicial order, the court may require the applicant to consult with

the appropriate local mental health authority, or may direct a mental health professional from

(iii) states the facts upon which the application is based.

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that local mental health authority to interview the applicant and the proposed patient to determine the existing facts and report them to the court.

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- (3) If the court finds from the application, from any other statements under oath, or from any reports from a mental health professional that there is a reasonable basis to believe that the proposed patient has a mental illness which poses a substantial danger, as defined in Section 62A-15-602, to self[-] or others[-, or property] requiring involuntary commitment pending examination and hearing; or, if the proposed patient has refused to submit to an interview with a mental health professional as directed by the court or to go to a treatment facility voluntarily, the court may issue an order, directed to a mental health officer or peace officer, to immediately place the proposed patient in the custody of a local mental health authority or in a temporary emergency facility as provided in Section 62A-15-634 to be detained for the purpose of examination. Within 24 hours of the issuance of the order for examination, a local mental health authority or its designee shall report to the court, orally or in writing, whether the patient is, in the opinion of the examiners, mentally ill, whether the patient has agreed to become a voluntary patient under Section 62A-15-625, and whether treatment programs are available and acceptable without court proceedings. Based on that information, the court may, without taking any further action, terminate the proceedings and dismiss the application. In any event, if the examiner reports orally, the examiner shall immediately send the report in writing to the clerk of the court.
- (4) Notice of commencement of proceedings for involuntary commitment, setting forth the allegations of the application and any reported facts, together with a copy of any official order of detention, shall be provided by the court to a proposed patient before, or upon, placement in the custody of a local mental health authority or, with respect to any individual presently in the custody of a local mental health authority whose status is being changed from voluntary to involuntary, upon the filing of an application for that purpose with the court. A copy of that order of detention shall be maintained at the place of detention.
- (5) Notice of commencement of those proceedings shall be provided by the court as soon as practicable to the applicant, any legal guardian, any immediate adult family members,

legal counsel for the parties involved, and any other persons whom the proposed patient or the court shall designate. That notice shall advise those persons that a hearing may be held within the time provided by law. If the patient has refused to permit release of information necessary for provisions of notice under this subsection, the extent of notice shall be determined by the court.

- (6) Proceedings for commitment of an individual under the age of 18 years to the division may be commenced by filing a written application with the juvenile court in accordance with the provisions of Part 7, Commitment of Persons Under Age 18 to Division of Substance Abuse and Mental Health.
- (7) The district court may, in its discretion, transfer the case to any other district court within this state, provided that the transfer will not be adverse to the interest of the proposed patient.
- (8) (a) Within 24 hours, excluding Saturdays, Sundays, and legal holidays, of the issuance of a judicial order, or after commitment of a proposed patient to a local mental health authority under court order for detention or examination, the court shall appoint two designated examiners to examine the proposed patient. If requested by the proposed patient's counsel, the court shall appoint, as one of the examiners, a reasonably available qualified person designated by counsel. The examinations, to be conducted separately, shall be held at the home of the proposed patient, a hospital or other medical facility, or at any other suitable place that is not likely to have a harmful effect on the patient's health.
- (b) The examiner shall inform the patient if not represented by an attorney that, if desired, the patient does not have to say anything, the nature and reasons for the examination, that it was ordered by the court, that any information volunteered could form part of the basis for his or her involuntary commitment, and that findings resulting from the examination will be made available to the court.
- (c) A time shall be set for a hearing to be held within 10 calendar days of the appointment of the designated examiners, unless those examiners or a local mental health authority or its designee informs the court prior to that hearing date that the patient is not

mentally ill, that the patient has agreed to become a voluntary patient under Section 62A-15-625, or that treatment programs are available and acceptable without court proceedings, in which event the court may, without taking any further action, terminate the proceedings and dismiss the application.

- (9) (a) Before the hearing, an opportunity to be represented by counsel shall be afforded to every proposed patient, and if neither the patient nor others provide counsel, the court shall appoint counsel and allow counsel sufficient time to consult with the patient before the hearing. In the case of an indigent patient, the payment of reasonable attorney fees for counsel, as determined by the court, shall be made by the county in which the patient resides or was found.
- (b) The proposed patient, the applicant, and all other persons to whom notice is required to be given shall be afforded an opportunity to appear at the hearing, to testify, and to present and cross-examine witnesses. The court may, in its discretion, receive the testimony of any other person. The court may allow a waiver of the patient's right to appear only for good cause shown, and that cause shall be made a matter of court record.
- (c) The court is authorized to exclude all persons not necessary for the conduct of the proceedings and may, upon motion of counsel, require the testimony of each examiner to be given out of the presence of any other examiners.
- (d) The hearing shall be conducted in as informal a manner as may be consistent with orderly procedure, and in a physical setting that is not likely to have a harmful effect on the mental health of the proposed patient.
- (e) The court shall consider all relevant historical and material information which is offered, subject to the rules of evidence, including reliable hearsay under Rule 1102, Utah Rules of Evidence.
- (f) (i) A local mental health authority or its designee, or the physician in charge of the patient's care shall, at the time of the hearing, provide the court with the following information:
 - (A) the detention order;
- 197 (B) admission notes;

198	(C) the diagnosis;
199	(D) any doctors' orders;
200	(E) progress notes;
201	(F) nursing notes; and
202	(G) medication records pertaining to the current commitment.
203	(ii) That information shall also be supplied to the patient's counsel at the time of the
204	hearing, and at any time prior to the hearing upon request.
205	(10) The court shall order commitment of an individual who is 18 years of age or older
206	to a local mental health authority if, upon completion of the hearing and consideration of the
207	information presented in accordance with Subsection (9)(e), the court finds by clear and
208	convincing evidence that:
209	(a) the proposed patient has a mental illness;
210	(b) because of the proposed patient's mental illness the proposed patient poses a
211	substantial danger, as defined in Section 62A-15-602, [of physical injury] to self or others,
212	which may include the inability to provide the basic necessities of life such as food, clothing,
213	and shelter, if allowed to remain at liberty;
214	(c) the patient lacks the ability to engage in a rational decision-making process
215	regarding the acceptance of mental treatment as demonstrated by evidence of inability to weigh
216	the possible risks of accepting or rejecting treatment;
217	(d) there is no appropriate less-restrictive alternative to a court order of commitment;
218	and
219	(e) the local mental health authority can provide the individual with treatment that is
220	adequate and appropriate to the individual's conditions and needs. In the absence of the
221	required findings of the court after the hearing, the court shall forthwith dismiss the
222	proceedings.
223	(11) (a) The order of commitment shall designate the period for which the individual

shall be treated. When the individual is not under an order of commitment at the time of the

hearing, that period may not exceed six months without benefit of a review hearing. Upon

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such a review hearing, to be commenced prior to the expiration of the previous order, an order for commitment may be for an indeterminate period, if the court finds by clear and convincing evidence that the required conditions in Subsection (10) will last for an indeterminate period.

- (b) The court shall maintain a current list of all patients under its order of commitment. That list shall be reviewed to determine those patients who have been under an order of commitment for the designated period. At least two weeks prior to the expiration of the designated period of any order of commitment still in effect, the court that entered the original order shall inform the appropriate local mental health authority or its designee. The local mental health authority or its designee shall immediately reexamine the reasons upon which the order of commitment was based. If the local mental health authority or its designee determines that the conditions justifying that commitment no longer exist, it shall discharge the patient from involuntary commitment and immediately report that to the court. Otherwise, the court shall immediately appoint two designated examiners and proceed under Subsections (8) through (10).
- (c) The local mental health authority or its designee responsible for the care of a patient under an order of commitment for an indeterminate period, shall at six-month intervals reexamine the reasons upon which the order of indeterminate commitment was based. If the local mental health authority or its designee determines that the conditions justifying that commitment no longer exist, that local mental health authority or its designee shall discharge the patient from its custody and immediately report the discharge to the court. If the local mental health authority or its designee determines that the conditions justifying that commitment continue to exist, the local mental health authority or its designee shall send a written report of those findings to the court. The patient and his counsel of record shall be notified in writing that the involuntary commitment will be continued, the reasons for that decision, and that the patient has the right to a review hearing by making a request to the court. Upon receiving the request, the court shall immediately appoint two designated examiners and proceed under Subsections (8) through (10).
 - (12) In the event that the designated examiners are unable, because a proposed patient

refuses to submit to an examination, to complete that examination on the first attempt, the court shall fix a reasonable compensation to be paid to those designated examiners for their services.

- (13) Any person committed as a result of an original hearing or a person's legally designated representative who is aggrieved by the findings, conclusions, and order of the court entered in the original hearing has the right to a new hearing upon a petition filed with the court within 30 days of the entry of the court order. The petition must allege error or mistake in the findings, in which case the court shall appoint three impartial designated examiners previously unrelated to the case to conduct an additional examination of the patient. The new hearing shall, in all other respects, be conducted in the manner otherwise permitted.
- (14) Costs of all proceedings under this section shall be paid by the county in which the proposed patient resides or is found.