## HOUSE BILL ANALYSIS HB 1999

Title: An act relating to the involuntary commitment of mentally ill persons.

**Brief Description:** Revising provisions relating to the involuntary commitment of mentally ill persons.

Sponsors: Representatives Skinner, Cooke, Carrell, Ballasiotes and Dyer.

## HOUSE COMMITTEE ON CHILDREN & FAMILY SERVICES

Meeting Date: February 28, 1997.

Bill Analysis Prepared by: Doug Ruth (786-7134).

<u>Background:</u> Under current law, a person may be taken into custody for an involuntary 72-hour evaluation and treatment period for a mental disorder. The person may be detained if he or she presents a likelihood of serious harm to self or others, to the property of others, or if he or she is gravely disabled. There must be a probable cause hearing within 72 hours.

The detention can be extended for an additional 14 days of involuntary intensive treatment, or 90 days of less restrictive treatment.

Upon expiration of the 14-day period, and after a full court hearing, the person may be committed for up to 90 days, or up to 180 days if criminal charges were involved.

Upon expiration of the 90 or 180-day period, a new hearing can be held for commitment of up to 180 days.

At each of these stages, further commitment can occur only if there is probable cause to believe that the person presents a likelihood of serious harm— to himself or herself or others, to the property of others, or if the person is gravely disabled. The standard for ''likelihood of serious harm'' has been interpreted to require evidence of recent, overt acts.

When a person has been in involuntary treatment and then conditionally released, the person can be rehospitalized if there is a substantial deterioration in the person's functioning.—

<u>Summary of Bill:</u> For the purposes of continued commitment after the 14-day period, ''likelihood of serious harm'' does not require evidence of recent, overt acts, but does require evidence of danger of serious physical harm or probable harmful consequences from failure to receive essential care. Evidence of failure to receive essential care can be shown by decompensation and discontinuation of treatment resulting in repeated hospitalizations, or interventions by law enforcement officers.

Persons who are conditionally released from involuntary treatment can be rehospitalized for a new commitment hearing when "medically necessary." Medically necessary is defined to mean when the outpatient treatment has failed to produce improvement, when a patient is decompensated, or when immediate supervision is needed to reestablish safety.

The definitions in the civil commitment statute are alphabetized. References to risk of damage to property— are included throughout the bill to reflect that this criteria is currently part of the definition of ''likelihood of serious harm.''

The Joint Legislative Audit and Review Committee is directed to perform an evaluation of the effect of this bill.

**Appropriation:** None.

Fiscal Note: None requested.

Effective Date: Ninety days after adjournment of session in which bill is passed.