

S.287 Side by Side
As Introduced versus As Passed by the Senate Judiciary

Statute	As Introduced	As Passed Senate Judiciary
18 V.S.A. § 7510 (Preliminary Hearing)	Requires a mandatory preliminary hearing within 5 days of admission for emergency exam based on the application for the emergency examination (including physician's certificate) and application for involuntary treatment (if available)	[section deleted from bill; existing optional preliminary hearing still good law]
18 V.S.A. § 7612 (Application for Involuntary Hearing)	Establishes the option to file application for involuntary treatment and petition for involuntary medication jointly	Removes language allowing for joint filing; technical changes remain
18 V.S.A. § 7612a (Probable Cause Review)	[Not present in bill as introduced]	Requires the court to conduct a probable cause paper review within 3 days of the filing of an application for involuntary treatment; the review is based on the application for the emergency examination (including physician's certificate) and application for involuntary treatment
18 V.S.A. § 7615 (Hearing)	Allows expedited hearing on the application for involuntary treatment to be held between 5-10 days after filing for a showing of good cause (including a showing that the person is at significant risk of harm to self or others even while hospitalized)	Allows for the filing of a motion for expedited hearing on the application for involuntary treatment to be held between 7-10 days after order is granted. The court may grant the motion when: (1) person received involuntary medication during the past 2 years and experienced significant clinical improvement as a result; or (2)(a) person demonstrates a significant risk of causing the person or others serious bodily injury even when hospitalized; and (b) clinical interventions have failed to address the risk of harm to the person or others

<p>18 V.S.A. § 7624 (Petition for Involuntary Medication)</p>	<p>Contains language pertaining to the joint filing of the application for involuntary treatment and petition for involuntary medication</p>	<p>Removes language allowing for joint filing; adds language allowing the petition for involuntary medication to be filed any time after the application for involuntary treatment is filed. Allows the court to consolidate the application and petition, but requires a ruling on the application for involuntary treatment prior to the ruling on the petition for involuntary medication</p>
<p>18 V.S.A. § 7625 (Hearing on Petition for Involuntary Medication; Burden of Proof)</p>	<p>Contains language pertaining to the joint filing of the application for involuntary treatment and petition for involuntary medication</p>	<p>Removes language allowing for joint filing; adds language dictating that involuntary treatment hearing timeline governs when AIT and petition for involuntary medication are consolidated</p>
<p>18 V.S.A. § 7626 (Advance Directive)</p>	<p>Updates “durable power of attorney” to “advance directive” and removes language previously struck down by court</p>	<p>[No changes]</p>
<p>18 V.S.A. § 7627 (Court Findings; Orders)</p>	<p>Updates “durable power of attorney” to “advance directive”</p>	<p>[No changes]</p>
<p>Rule 12 of the VT Rules for Family Proceedings (Stays)</p>	<p>Removes involuntary medication orders from automatic stay provisions of family rules; as a result, such orders are not automatically stayed and go into effect as soon as they are issued, and remain in effect if an appeal of the order is taken</p>	<p>Same as introduced version, except adds a provision that permits the Family Division to stay an involuntary medication order while an appeal is pending</p>