1 of 17

BILL AS INTRODUCED S.137 2013 Page 1 of 17

1	5.137
2	Introduced by Senator White
3	Referred to Committee on
4	Date:
5	Subject: Mental health; judicial proceedings; commitment and involuntary
6	medication
7	Statement of purpose of bill as introduced: This bill proposes to reduce delays
8	in obtaining commitment and involuntary medication orders by limiting
9	continuations, establishing a time frame for court orders, and combining
10	commitment and involuntary medication hearings.
11	An act relating to commitment and involuntary medication hearings
12	It is hereby enacted by the General Assembly of the State of Vermont:
13	Sec. 1. 18 V.S.A. chapter 181 is amended to read:
14	CHAPTER 181. JUDICIAL PROCEEDINGS
15	§ 7611. INVOLUNTARY TREATMENT
16	(a) No \underline{A} person may \underline{not} be made subject to involuntary treatment unless
17	he or she is found to be a person in need of treatment or a patient in need of
18	further treatment.
19	(b) As used in this chapter, "involuntary treatment" means:
20	(1) an order of hospitalization pursuant to section 7619 of this title;

3/1/2013 8:38 AM

S.137 Page 2 of 17

1	(2) an order of nonhospitalization pursuant to section 7618 of this
2	title; or
3	(3) involuntary medication pursuant to the criteria set forth in section
4	7627 of this title.
5	§ 7612. APPLICATION FOR INVOLUNTARY TREATMENT
6	(a) An interested party may, by filing a written application, commence
7	proceedings for the involuntary treatment of an individual by judicial process.
8	(b) The application shall be filed in the eriminal division of the superior
9	court Family Division of the Superior Court of the proposed patient's residence
10	or, in the case of a nonresident, in any district court District Court.
11	(c) If the application is filed under section 7508 or 7620 of this title, it shall
12	be filed in the criminal division of the superior court Family Division of the
13	Superior Court in which the hospital is located.
14	(d) The application shall contain:
15	(1) The the name and address of the applicant; and
16	(2) A \underline{a} statement of the current and relevant facts upon which the
17	allegation of mental illness and need for treatment is based. The application
18	shall be signed by the applicant under penalty of perjury.
19	(e) The application shall be accompanied by:
20	(1) A \underline{a} certificate of a licensed physician, which shall be executed under
21	penalty of perjury stating that he or she has examined the proposed patient

S.137 Page 3 of 17

1	within five days of the date the petition is filed, and is of the opinion that the
2	proposed patient is a person in need of treatment, including the current and
3	relevant facts and circumstances upon which the physician's opinion is
4	based; or
5	(2) A \underline{a} written statement by the applicant that the proposed patient
6	refused to submit to an examination by a licensed physician.
7	(f) Before an examining physician completes the certificate of examination
8	he or she shall consider available alternative forms of care and treatment that
9	might be adequate to provide for the person's needs, without requiring
10	hospitalization.
11	(g) If the application includes a request for involuntary medication, it shall
12	include a certification from a licensed physician, executed under penalty of
13	perjury, that includes the licensed physician's professional opinion on the
14	following:
15	(1) the nature of the person's mental illness;
16	(2) the necessity for involuntary medication, including the person's
17	competency to decide to accept or refuse medication;
18	(3) any proposed medication, including the method, dosage range, and
19	length of administration for each specific medication;

S.137 Page 4 of 17

1	(4) a statement of the risks and benefits of the proposed medications,
2	including the likelihood and severity of adverse side effects and the proposed
3	medication's effect on:
4	(A) the person's prognosis; and
5	(B) the person's health and safety, including any pregnancy;
6	(5) the relevant facts and circumstances, including any history of
7	psychiatric treatment and medication, upon which the physician's opinion is
8	<u>based;</u>
9	(6) what alternate treatments have been proposed by the physician, the
10	patient, or others, and the reasons for ruling out those alternatives; and
11	(7) whether the person has executed an advance directive in accordance
12	with the provisions of 18 V.S.A. chapter 231, and the identity of the agent or
13	agents designated by the advance directive.
14	(h) A copy of the proposed patient's advance directive, if available, shall be
15	attached to an application that includes a request for involuntary medication.
16	* * *
17	§ 7615. HEARING
18	(a) Upon receipt of the application, the court Court shall set a date for the
19	hearing to be held within 10 days from the date of the receipt of the application
20	or 20 days from the date of the receipt of the application if a psychiatric

1

14

15

16

17

18

19

20

S.137 Page 5 of 17

2 the court Court. 3 (b) The court Court may grant either party an a one-time extension of time 4 of up to seven days for good cause. 5 (c) The hearing shall be conducted according to the rules of evidence 6 Rules of Evidence applicable in civil actions in the eriminal division of the 7 superior courts Family Division of the Superior Court of the state State, and to 8 an extent not inconsistent with this part, the rules of civil procedure Rules of 9 Civil Procedure of the state State shall be applicable. 10 (d) The applicant and the proposed patient shall have a right to appear at 11 the hearing to testify. The attorney for the state State and the proposed patient 12 shall have the right to subpoena, present and cross-examine witnesses, and 13 present oral arguments. The court Court may, at its discretion, receive the

examination is ordered under section 7614 unless the hearing is continued by

(e) The proposed patient may at his or her election attend the hearing, subject to reasonable rules of conduct, and the court Court may exclude all persons not necessary for the conduct of the hearing.

(f) The Court shall dismiss the application or issue an order within seven days of the hearing. If the order is not issued within seven days, the application for treatment shall be deemed approved until the order is issued.

21 ***

testimony of any other person.

S.137 Page 6 of 17

1 § 7617. FINDINGS; ORDER

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

- (a) If the court Court finds that the proposed patient was not a person in need of treatment at the time of admission or application or is not a patient in need of further treatment at the time of the hearing, the court Court shall enter a finding to that effect and shall dismiss the application.
- (b) If the proposed patient is found to have been a person in need of treatment at the time of admission or application and a patient in need of further treatment at the time of the hearing, the court Court may order the person:
- hospitalized in a designated hospital <u>and involuntarily medicated</u>
 when the latter has been applied for and approved;
- (2) hospitalized in any other public or private hospital if he or she and the hospital agree; or
 - (3) to undergo a program of treatment other than hospitalization.
- (c) Prior to ordering any course of treatment, the court Court shall determine whether there exists an available program of treatment for the person which is an appropriate alternative to hospitalization. The court Court shall not order hospitalization without a thorough consideration of available alternatives.
- (d) Before making its decision, the court Court shall order testimony by an appropriate representative of a hospital, a community mental health agency,

S.137 Page 7 of 17

1 public or private entity or agency, or a suitable person, who shall assess the 2 availability and appropriateness for the individual of treatment programs other 3 than hospitalization. 4 (e)(1) Prior to ordering the hospitalization of a person, the court Court shall 5 inquire into the adequacy and appropriateness of treatment to be provided to 6 the person by the hospital. Hospitalization shall not be ordered unless the 7 hospital in which the person is to be hospitalized can provide him or her with 8 treatment which that is adequate and appropriate to his or her condition. 9 (2) Prior to ordering involuntary medication for a person, the Court shall 10 inquire into the adequacy and appropriateness of the proposed medication to be 11 provided to the person by the treatment provider. Involuntary medication shall 12 not be ordered unless the treatment provider can provide the person with 13 treatment that is adequate and appropriate to his or her condition. 14 (f) Preference between available hospitals shall be given to the hospital 15 which is located nearest to the person's residence except when the person 16 requests otherwise or there are other compelling reasons for not following the 17 preference.

* * *

VT LEG #286717 v.1A

18

S.137 Page 8 of 17

1	§ 7624. PETITION FOR INVOLUNTARY MEDICATION
2	(a) The commissioner may commence an action for the involuntary
3	medication of a person who is refusing to accept psychiatric medication and
4	meets any one of the following three conditions:
5	(1) has been placed in the commissioner's care and custody pursuant to
6	section 7619 of this title or subsection 7621(b) of this title;
7	(2) has previously received treatment under an order of hospitalization
8	and is currently under an order of nonhospitalization, including a person on an
9	order of nonhospitalization who resides in a secure residential recovery
10	facility; or
11	(3) has been committed to the custody of the commissioner of
12	corrections as a convicted felon and is being held in a correctional facility
13	which is a designated facility pursuant to section 7628 of this title and for
14	whom the department of corrections and the department of mental health have
15	jointly determined that involuntary medication would be appropriate pursuant
16	to 28 V.S.A. § 907(4)(H).
17	(b) A petition for involuntary medication shall be filed in the family
18	division of the superior court in the county in which the person is receiving
19	treatment.
20	(c) The petition shall include a certification from the treating physician,
21	executed under penalty of perjury, that includes the following information:

S.137 Page 9 of 17

1	(1) the nature of the person's mental illness;
2	(2) the necessity for involuntary medication, including the person's
3	competency to decide to accept or refuse medication;
4	(3) any proposed medication, including the method, dosage range, and
5	length of administration for each specific medication;
6	(4) a statement of the risks and benefits of the proposed medications,
7	including the likelihood and severity of adverse side effects and its effect on:
8	(A) the person's prognosis with and without the proposed
9	medications; and
10	(B) the person's health and safety, including any pregnancy;
11	(5) the current relevant facts and circumstances, including any history of
12	psychiatric treatment and medication, upon which the physician's opinion is
13	based;
14	(6) what alternate treatments have been proposed by the doctor, the
15	patient or others, and the reasons for ruling out those alternatives; and
16	(7) whether the person has executed a durable power of attorney for
17	health care in accordance with the provisions of 18 V.S.A. chapter 111,
18	subchapter 2, and the identity of the health care agent designated by the
19	durable power of attorney.
20	(d) A copy of the durable power of attorney, if available, shall be attached
21	to the petition. [Repealed.]

S.137 Page 10 of 17

1	§ 7625. HEARING ON PETITION APPLICATION FOR INVOLUNTARY
2	MEDICATION; BURDEN OF PROOF
3	(a) A hearing on a petition for involuntary medication shall be held within
4	seven days of filing and shall be conducted in accordance with sections 7613,
5	7614, 7615(b)-(e), and 7616 of this title. [Deleted.]
6	(b) In a hearing conducted pursuant to this section, section 7626, or 7627 of
7	this title, the commissioner applicant has the burden of proof by clear and
8	convincing evidence.
9	(c) In determining whether or not the person is competent to make a
10	decision regarding the proposed treatment, the court Court shall consider
11	whether the person is able to make a decision and appreciate the consequences
12	of that decision.
13	§ 7626. DURABLE POWER OF ATTORNEY ADVANCE DIRECTIVE
14	(a) If a person who is the subject of a petition an application for treatment
15	that includes involuntary medication filed under section 7624 7612 of this title
16	has executed a durable power of attorney an advance directive in accordance
17	with the provisions of 18 V.S.A. chapter 111 231, subchapter 2 for health care,
18	the court Court shall suspend the hearing and enter an order pursuant to
19	subsection (b) of this section, if the court Court determines that:
20	(1) the person is refusing to accept psychiatric medication;

VT LEG #286717 v.1A

10 of 17 3/1/2013 8:38 AM

1

2

3

4

5

6

8

9

10

11

12

13

14

15

16

17

18

19

20

21

S.137 Page 11 of 17

(2) the person is not competent to make a decision regarding the proposed treatment; and

- (3) the decision regarding the proposed treatment is within the scope of the valid, duly executed durable power of attorney for health care advance directive.
- (b) An order entered under subsection (a) of this section shall authorize the commissioner Commissioner to administer treatment to the person, including involuntary medication in accordance with the direction set forth in the durable power of attorney advance directive or provided by the health care agent or agents acting within the scope of authority granted by the durable power of attorney advance directive. If hospitalization is necessary to effectuate the proposed treatment, the court Court may order the person to be hospitalized.
- (c) In the case of a person subject to an order entered pursuant to subsection (a) of this section, and upon the certification by the person's treating physician to the court that the person has received treatment or no treatment consistent with the durable power of attorney for health care for 45 days after the order under subsection (a) of this section has been entered, then the court shall reconvene the hearing on the petition.
- (1) If the court concludes that the person has experienced, and is likely to continue to experience, a significant clinical improvement in his or her mental state as a result of the treatment or nontreatment directed by the durable

S.137 Page 12 of 17

1 power of attorney for health care, or that the patient has regained competence, 2 then the court shall enter an order denying and dismissing the petition. 3 (2) If the court concludes that the person has not experienced a 4 significant clinical improvement in his or her mental state, and remains 5 incompetent then the court shall consider the remaining evidence under the 6 factors described in subdivisions 7627(c)(1)-(5) of this title and render a 7 decision on whether the person should receive medication. [Deleted.] 8 § 7627. COURT FINDINGS; ORDERS ORDER; INVOLUNTARY 9 MEDICATION 10 (a) The court shall issue an order regarding all possible findings pursuant to 11 this section, and for persons subject to a petition pursuant to subdivision 12 7624(a)(3) of this title the court shall first find that the person is a person in 13 need of treatment as defined by subdivision 7101(17) of this title. [Deleted.] 14 (b) If a person who is the subject of a petition an application for treatment 15 that includes involuntary medication filed under section 7625 7612 of this title 16 has not executed a durable power of attorney an advance directive, the court 17 <u>Court</u> shall follow the person's competently expressed written or oral 18 preferences regarding medication, if any, unless the commissioner applicant 19 demonstrates that the person's medication preferences have not led to a 20 significant clinical improvement in the person's mental state in the past within 21 an appropriate period of time.

S.137 Page 13 of 17

1	(c) If the court Court finds that there are no medication preferences or that
2	the person's medication preferences have not led to a significant clinical
3	improvement in the person's mental state in the past within an appropriate
4	period of time, the court Court shall consider at a minimum, in addition to the
5	person's expressed preferences, the following factors:
6	(1) The person's religious convictions and whether they contribute to
7	the person's refusal to accept medication.
8	(2) The impact of receiving medication or not receiving medication on
9	the person's relationship with his or her family or household members whose
10	opinion the court Court finds relevant and credible based on the nature of the
11	relationship.
12	(3) The likelihood and severity of possible adverse side-effects from the
13	proposed medication.
14	(4) The risks and benefits of the proposed medication and its effect on:
15	(A) the person's prognosis; and
16	(B) the person's health and safety, including any pregnancy.
17	(5) The various treatment alternatives available, which may or may not
18	include medication.
19	(d) If the court Court finds that the person is competent to make a decision
20	regarding the proposed treatment or that involuntary medication is not

S.137 Page 14 of 17

supported by the factors in subsection (c) of this section, the court Court shall enter a finding to that effect and deny the petition.

- (e) If the court <u>Court</u> finds that the person is incompetent to make a decision regarding the proposed treatment and that involuntary medication is supported by the factors in subsection (c) of this section, the <u>court Court</u> shall make specific findings stating the reasons for the involuntary medication by referencing those supporting factors.
- (f) If the court Court grants the petition application for involuntary medication, in whole or in part, the court Court shall enter an order authorizing the commissioner person's treatment provider to administer involuntary medication to the person. The order shall specify the types of medication, the dosage range, length of administration, and method of administration for each. The order for involuntary medication shall not include electric convulsive therapy, surgery, or experimental medications. The order shall require the person's treatment provider to conduct monthly reviews of the medication to assess the continued need for involuntary medication, the effectiveness of the medication, the existence of any side effects, and shall document this review in detail in the patient's chart.
- (g) For a person receiving treatment pursuant to an order of hospitalization, the commissioner treatment provider may administer involuntary medication as authorized by this section to the person for up to 90 days, unless the court

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

S.137 Page 15 of 17

Court finds that an order is necessary for a longer period of time. Such an
 order shall not be longer than the duration of the current order of
 hospitalization.

- (h) For a person who had received treatment under an order of hospitalization and is currently receiving treatment pursuant to an order of nonhospitalization, if the court Court finds that without an order for involuntary medication there is a substantial probability that the person would continue to refuse medication and as a result would pose a danger of harm to self or others, the court Court may order hospitalization of the person for up to 72 hours to administer involuntary medication as ordered under this section.
- (i) The court Court may authorize future 72-hour hospitalizations of a person subject to an order under subsection (h) of this section to administer involuntary medication for 90 days following the initial hospitalization, unless the court Court finds that an involuntary medication order is necessary for a longer period of time. Such an order shall not be longer than the duration of the current order of nonhospitalization.
- (j) A future administration of involuntary medication authorized by the court Court under subsection (i) of this section shall occur as follows:
- (1) The treating physician shall execute and file with the commissioner Commissioner a certification executed under penalty of perjury that states all the following:

4

5

6

8

9

10

11

12

13

14

15

16

17

18

19

20

21

S.137 Page 16 of 17

1 (A) The person has refused medication.

- 2 (B) The person is not competent to make a decision regarding medication and to appreciate the consequences.
 - (C) The proposed medications, the dosage range, length of administration, and method of administration.
 - (D) The substantial probability that in the near future the person will pose a danger of harm to self or others if not hospitalized and involuntarily medicated.
 - (2) Depending on the type of medication ordered, the commissioner

 Commissioner shall provide two to 14-days' notice, as set forth in the initial

 court Court order, to the court Court, the person, and the person's attorney.

 The notice shall be given within 24 hours of receipt by the commissioner

 Commissioner of the physician's certification and shall state that the person

 may request an immediate hearing to contest the order. The person may be

 hospitalized in a designated hospital on the date specified in the notice for up

 to 72 hours in order to administer involuntary medication.
 - (k) An order for involuntary medication issued under this section shall be effective concurrently with the current order of commitment issued pursuant to section 7623 of this title.
 - (1) The treating physician shall provide written notice to the <u>court Court</u> to terminate the order when involuntary medication is no longer necessary.

S.137 Page 17 of 17

- 1 (m) At any time, the person may petition the court Court for review of the order.
- 3 (n) As used in this section "household members" means persons living
- 4 together or sharing occupancy.
- 5 ***
- 6 Sec. 2. EFFECTIVE DATE
- This act shall take effect on July 1, 2013.