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## INVOLUNTARY COMMITMENT AMENDMENTS

## 2024 GENERAL SESSION STATE OF UTAH

Chief Sponsor: Nelson T. Abbott

	Senate Sponsor: Stephanie Pitcher
2 3	LONG TITLE
4	General Description:
5	This bill amends the criteria for involuntary civil commitment.
6	Highlighted Provisions:
7	This bill:
8	in certain circumstances, provides for the court-ordered civil commitment of an
9	individual who:
10	<ul> <li>has been charged with a crime;</li> </ul>
11	<ul> <li>is incompetent to proceed;</li> </ul>
12	<ul> <li>has a mental illness; and</li> </ul>
13	<ul> <li>has a persistent unawareness of their mental illness or unreasonably refused to</li> </ul>
14	undergo mental health treatment;
15	<ul><li>provides a severability clause; and</li></ul>
16	<ul><li>makes technical and conforming changes.</li></ul>
17	Money Appropriated in this Bill:
18	None
19	Other Special Clauses:
20	This bill provides a coordination clause.
21	<b>Utah Code Sections Affected:</b>
22	AMENDS:
23	26B-5-332, as renumbered and amended by Laws of Utah 2023, Chapter 308
24	<b>Utah Code Sections affected by Coordination Clause:</b>
25	26B-5-332, as renumbered and amended by Laws of Utah 2023, Chapter 308
26	26B-5-351, as renumbered and amended by Laws of Utah 2023, Chapter 308

29	The following section is affected by a coordination clause at the end of this bill.
30	Section 1. Section 26B-5-332 is amended to read:
31	26B-5-332 . Involuntary commitment under court order Examination
32	Hearing Power of court Findings required Costs Severability.
33	(1) A responsible individual who has credible knowledge of an adult's mental illness and
34	the condition or circumstances that have led to the adult's need to be involuntarily
35	committed may initiate an involuntary commitment court proceeding by filing, in the
36	court in the county where the proposed patient resides or is found, a written application
37	that includes:
38	(a) unless the court finds that the information is not reasonably available, the proposed
39	patient's:
40	(i) name;
41	(ii) date of birth; and
42	(iii) social security number;
43	(b) (i) a certificate of a licensed physician or a designated examiner stating that
44	within the seven-day period immediately preceding the certification, the physician
45	or designated examiner examined the proposed patient and is of the opinion that
46	the proposed patient has a mental illness and should be involuntarily committed; or
47	(ii) a written statement by the applicant that:
48	(A) the proposed patient has been requested to, but has refused to, submit to an
49	examination of mental condition by a licensed physician or designated
50	examiner;
51	(B) is sworn to under oath; and
52	(C) states the facts upon which the application is based; and
53	(c) a statement whether the proposed patient has previously been under an assisted
54	outpatient treatment order, if known by the applicant.
55	(2) Before issuing a judicial order, the court:
56	(a) shall require the applicant to consult with the appropriate local mental health
57	authority at or before the hearing; and
58	(b) may direct a mental health professional from the local mental health authority to
59	interview the applicant and the proposed patient to determine the existing facts and
60	report the existing facts to the court.
61	(3) The court may issue an order, directed to a mental health officer or peace officer, to
62	immediately place a proposed patient in the custody of a local mental health authority or

in a temporary emergency facility, as described in Section 26B-5-334, to be detained for the purpose of examination if:

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- (a) the court finds from the application, any other statements under oath, or any reports from a mental health professional that there is a reasonable basis to believe that the proposed patient has a mental illness that poses a danger to self or others and requires involuntary commitment pending examination and hearing; or
- (b) the proposed patient refuses to submit to an interview with a mental health professional as directed by the court or to go to a treatment facility voluntarily.
- (4) (a) The court shall provide 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, to a proposed patient before, or upon, placement of the proposed patient in the custody of a local mental health authority or, with respect to any proposed patient 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.
- 78 (b) The place of detention shall maintain a copy of the order of detention.
- 79 (5) (a) The court shall provide notice of commencement of proceedings for involuntary 80 commitment as soon as practicable to the applicant, any legal guardian, any 81 immediate adult family members, legal counsel for the parties involved, the local 82 mental health authority or the local mental health authority's designee, and any other 83 persons whom the proposed patient or the court designates.
  - (b) Except as provided in Subsection (5)(c), the notice under Subsection (5)(a) shall advise the persons that a hearing may be held within the time provided by law.
  - (c) If the proposed patient refuses to permit release of information necessary for provisions of notice under this subsection, the court shall determine the extent of notice.
- 89 (6) Proceedings for commitment of an individual under 18 years old to a local mental health 90 authority may be commenced in accordance with Part 4, Commitment of Persons Under 91 Age 18.
- 92 (7) (a) The court may, in the court's discretion, transfer the case to any other district 93 court within this state, if the transfer will not be adverse to the interest of the 94 proposed patient.
  - (b) If a case is transferred under Subsection (7)(a), the parties to the case may be transferred and the local mental health authority may be substituted in accordance

97	with Utah Rules of Civil Procedure, Rule 25.
98	(8) Within 24 hours, excluding Saturdays, Sundays, and legal holidays, of the issuance of a
99	judicial order, or after commitment of a proposed patient to a local mental health
100	authority or the local mental health authority's designee under court order for detention
101	or examination, the court shall appoint two designated examiners:
102	(a) who did not sign the civil commitment application nor the civil commitment
103	certification under Subsection (1);
104	(b) one of whom is a licensed physician; and
105	(c) one of whom may be designated by the proposed patient or the proposed patient's
106	counsel, if that designated examiner is reasonably available.
107	(9) The court shall schedule a hearing to be held within 10 calendar days after the day on
108	which the designated examiners are appointed.
109	(10) (a) The designated examiners shall:
110	(i) conduct the examinations separately;
111	(ii) conduct the examinations at the home of the proposed patient, at a hospital or
112	other medical facility, or at any other suitable place, including through telehealth,
113	that is not likely to have a harmful effect on the proposed patient's health;
114	(iii) inform the proposed patient, if not represented by an attorney:
115	(A) that the proposed patient does not have to say anything;
116	(B) of the nature and reasons for the examination;
117	(C) that the examination was ordered by the court;
118	(D) that any information volunteered could form part of the basis for the proposed
119	patient's involuntary commitment;
120	(E) that findings resulting from the examination will be made available to the
121	court; and
122	(F) that the designated examiner may, under court order, obtain the proposed
123	patient's mental health records; and
124	(iv) within 24 hours of examining the proposed patient, report to the court, orally or
125	in writing, whether the proposed patient is mentally ill, has agreed to voluntary
126	commitment, as described in Section 26B-5-360, or has acceptable programs
127	available to the proposed patient without court proceedings.
128	(b) If a designated examiner reports or ally under Subsection (10)(a), the designated
129	examiner shall immediately send a written report to the clerk of the court.
130	(11) If a designated examiner is unable to complete an examination on the first attempt

131 because the proposed patient refuses to submit to the examination, the court shall fix a 132 reasonable compensation to be paid to the examiner. 133 (12) If the local mental health authority, the local mental health authority's designee, or a 134 medical examiner determines before the court hearing that the conditions justifying the 135 findings leading to a commitment hearing no longer exist, the local mental health authority, the local mental health authority's designee, or the medical examiner shall 136 137 immediately report the determination to the court. 138 (13) The court may terminate the proceedings and dismiss the application at any time, 139 including before the hearing, if the designated examiners or the local mental health 140 authority or the local mental health authority's designee informs the court that the 141 proposed patient: 142 (a) does not meet the criteria in Subsection (16); 143 (b) has agreed to voluntary commitment, as described in Section 26B-5-360; 144 (c) has acceptable options for treatment programs that are available without court 145 proceedings; or 146 (d) meets the criteria for assisted outpatient treatment described in Section 26B-5-351. 147 (14) (a) Before the hearing, the court shall provide the proposed patient an opportunity 148 to be represented by counsel, and if neither the proposed patient nor others provide 149 counsel, the court shall appoint counsel and allow counsel sufficient time to consult 150 with the proposed patient before the hearing. 151 (b) In the case of an indigent proposed patient, the county in which the proposed patient 152 resides or is found shall make payment of reasonable attorney fees for counsel, as 153 determined by the court. 154 (15) (a) (i) The court shall afford the proposed patient, the applicant, and any other 155 person to whom notice is required to be given an opportunity to appear at the 156 hearing, to testify, and to present and cross-examine witnesses. 157 (ii) The court may, in the court's discretion, receive the testimony of any other person. 158 (iii) The court may allow a waiver of the proposed patient's right to appear for good 159 cause, which cause shall be set forth in the record, or an informed waiver by the 160 patient, which shall be included in the record. 161 (b) The court is authorized to exclude any person not necessary for the conduct of the 162 proceedings and may, upon motion of counsel, require the testimony of each 163 designated examiner to be given out of the presence of any other designated

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examiners.

165	(c) The court shall conduct the hearing in as informal a manner as may be consistent
166	with orderly procedure, and in a physical setting that is not likely to have a harmful
167	effect on the mental health of the proposed patient, while preserving the due process
168	rights of the proposed patient.
169	(d) The court shall consider any relevant historical and material information that is
170	offered, subject to the rules of evidence, including reliable hearsay under Utah Rules
171	of Evidence, Rule 1102.
172	(e) (i) A local mental health authority or the local mental health authority's designee
173	or the physician in charge of the proposed patient's care shall, at the time of the
174	hearing, provide the court with the following information:
175	(A) the detention order;
176	(B) admission notes;
177	(C) the diagnosis;
178	(D) any doctors' orders;
179	(E) progress notes;
180	(F) nursing notes;
181	(G) medication records pertaining to the current commitment; and
182	(H) whether the proposed patient has previously been civilly committed or under
183	an order for assisted outpatient treatment.
184	(ii) The information described in Subsection (15)(e)(i) shall also be supplied to the
185	proposed patient's counsel at the time of the hearing, and at any time prior to the
186	hearing upon request.
187	(16) (a) The court shall order commitment of an adult proposed patient to a local mental
188	health authority if, upon completion of the hearing and consideration of the
189	information presented, the court finds by clear and convincing evidence that:
190	(i) (A) the proposed patient has a mental illness;
191	[(ii)] (B) because of the proposed patient's mental illness the proposed patient
192	poses a substantial danger to self or others;
193	[(iii)] (C) the proposed patient lacks the ability to engage in a rational
194	decision-making process regarding the acceptance of mental treatment as
195	demonstrated by evidence of inability to weigh the possible risks of accepting
196	or rejecting treatment;
197	[(iv)] (D) there is no appropriate less-restrictive alternative to a court order of
198	commitment; and

199	[(v)] (E) the local mental health authority can provide the proposed patient with
200	treatment that is adequate and appropriate to the proposed patient's conditions
201	and needs[-] ; or
202	(ii) (A) the proposed patient has been charged with a criminal offense;
203	(B) with respect to the charged offense, the proposed patient is found incompetent
204	to proceed as a result of a mental illness;
205	(C) the proposed patient has a mental illness;
206	(D) the proposed patient has a persistent unawareness of their mental illness and
207	the negative consequences of that illness, or within the preceding six months
208	has been requested or ordered to undergo mental health treatment but has
209	unreasonably refused to undergo that treatment;
210	(E) there is no appropriate less-restrictive alternative to a court order of
211	commitment; and
212	(F) the local mental health authority can provide the proposed patient with
213	treatment that is adequate and appropriate to the proposed patient's conditions
214	and needs.
215	(b) (i) If, at the hearing, the court determines that the proposed patient has a mental
216	illness but does not meet the other criteria described in Subsection (16)(a), the
217	court may consider whether the proposed patient meets the criteria for assisted
218	outpatient treatment under Section 26B-5-351.
219	(ii) The court may order the proposed patient to receive assisted outpatient treatment
220	in accordance with Section 26B-5-351 if, at the hearing, the court finds the
221	proposed patient meets the criteria for assisted outpatient treatment under Section
222	26B-5-351.
223	(iii) If the court determines that neither the criteria for commitment under Subsection
224	(16)(a) nor the criteria for assisted outpatient treatment under Section 26B-5-351
225	are met, the court shall dismiss the proceedings after the hearing.
226	(17) (a) (i) The order of commitment shall designate the period for which the patient
227	shall be treated.
228	(ii) If the patient is not under an order of commitment at the time of the hearing, the
229	patient's treatment period may not exceed six months without a review hearing.
230	(iii) Upon a review hearing, to be commenced before the expiration of the previous
231	order of commitment, an order for commitment may be for an indeterminate
232	period, if the court finds by clear and convincing evidence that the criteria

233 described in Subsection (16) will last for an indeterminate period. 234 (b) (i) The court shall maintain a current list of all patients under the court's order of 235 commitment and review the list to determine those patients who have been under 236 an order of commitment for the court designated period. 237 (ii) At least two weeks before the expiration of the designated period of any order of 238 commitment still in effect, the court that entered the original order of commitment 239 shall inform the appropriate local mental health authority or the local mental 240 health authority's designee of the expiration. 241 (iii) Upon receipt of the information described in Subsection (17)(b)(ii), the local 242 mental health authority or the local mental health authority's designee shall 243 immediately reexamine the reasons upon which the order of commitment was 244 based. 245 (iv) If, after reexamination under Subsection (17)(b)(iii), the local mental health 246 authority or the local mental health authority's designee determines that the 247 conditions justifying commitment no longer exist, the local mental health 248 authority or the local mental health authority's designee shall discharge the patient 249 from involuntary commitment and immediately report the discharge to the court. 250 (v) If, after reexamination under Subsection (17)(b)(iii), the local mental health 251 authority or the local mental health authority's designee determines that the 252 conditions justifying commitment continue to exist, the court shall immediately 253 appoint two designated examiners and proceed under Subsections (8) through (14). 254 (c) (i) The local mental health authority or the local mental health authority's 255 designee responsible for the care of a patient under an order of commitment for an 256 indeterminate period shall, at six-month intervals, reexamine the reasons upon 257 which the order of indeterminate commitment was based. 258 (ii) If the local mental health authority or the local mental health authority's designee 259 determines that the conditions justifying commitment no longer exist, the local 260 mental health authority or the local mental health authority's designee shall 261 discharge the patient from the local mental health authority's or the local mental 262 health authority designee's custody and immediately report the discharge to the 263 court. 264 (iii) If the local mental health authority or the local mental health authority's designee determines that the conditions justifying commitment continue to exist, the local 265

mental health authority or the local mental health authority's designee shall send a

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267	written report of the findings to the court.
268	(iv) A patient and the patient's counsel of record shall be notified in writing that the
269	involuntary commitment will be continued under Subsection (17)(c)(iii), the
270	reasons for the decision to continue, and that the patient has the right to a review
271	hearing by making a request to the court.
272	(v) Upon receiving a request under Subsection (17)(c)(iv), the court shall
273	immediately appoint two designated examiners and proceed under Subsections (8)
274	through (14).
275	(18) (a) Any patient committed as a result of an original hearing or a patient's legally
276	designated representative who is aggrieved by the findings, conclusions, and order of
277	the court entered in the original hearing has the right to a new hearing upon a petition
278	filed with the court within 30 days after the day on which the court order is entered.
279	(b) The petition shall allege error or mistake in the findings, in which case the court shall
280	appoint three impartial designated examiners previously unrelated to the case to
281	conduct an additional examination of the patient.
282	(c) Except as provided in Subsection (18)(b), the court shall, in all other respects,
283	conduct the new hearing in the manner otherwise permitted.
284	(19) The county in which the proposed patient resides or is found shall pay the costs of all
285	proceedings under this section.
286	(20) If any provision of Subsection (16)(a)(ii) or the application of any provision of
287	Subsection (16)(a)(ii) to any person or circumstance is held invalid by a court with
288	jurisdiction, the remainder of Subsection (16)(a)(ii) shall be given effect without the
289	invalid provision or application. The provisions of Subsection (16)(a)(ii) are severable.
290	Section 2. Effective date.
291	This bill takes effect on May 1, 2024.
292	Section 3. Coordinating H.B. 203 with H.B. 299.
293	If H.B. 203, Involuntary Commitment Amendments, and H.B. 299, Court-ordered
294	Treatment Modifications, both pass and become law, the Legislature intends that, on
295	May 1, 2024:
296	(1) this coordination clause supersedes the coordination clause in H.B. 299, which
297	coordinates H.B. 299 with H.B. 203;
298	(2) the changes to Subsection 26B-5-332(16) in H.B. 299 not be made; and
299	(3) the changes to Section 26B-5-351 in H.B. 299 not be made.