

Nelson T. Abbott proposes the following substitute bill:

**Commitment Revisions**

2025 GENERAL SESSION

STATE OF UTAH

**Chief Sponsor: Nelson T. Abbott**

Senate Sponsor: Evan J. Vickers

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**LONG TITLE**

**General Description:**

This bill addresses the commitment of individuals in relation to civil, criminal, and juvenile proceedings.

**Highlighted Provisions:**

This bill:

- defines terms;
- amends the definitions of "intellectual disability" and "intermediate care facility for people with an intellectual disability" as used in the Utah Code;
- amends provisions relating to the rights and privileges to which an individual is entitled when under commitment to the custody or to the treatment services of a local mental health authority;
- provides that if a right of a patient of a local mental health authority is limited or denied, including for the welfare of the patient or caretakers, the nature, extent, and reason for that limitation or denial shall be entered in the patient's treatment record;
- requires a designated examiner to conduct an examination of a proposed patient by telehealth except in certain circumstances;
- requires a court to hold a hearing on an application for involuntary commitment remotely unless the court finds good cause not to hold the hearing remotely;
- amends standards and processes related to the involuntary civil commitment of an individual with an intellectual disability or related condition;
- provides that a court may only order the Department of Health and Human Services (department) to provide an initial evaluation and progress toward competency evaluation for a defendant or minor if the defendant or minor is located within the state;
- requires a court to dismiss a petition for involuntary civil commitment if both designated examiners determine that the proposed patient does not meet the criteria for involuntary

commitment;

- provides that when there is a conflict in the opinions of forensic evaluators, if a party seeks an additional competency evaluation then the party is responsible for selecting the evaluator and paying the cost of the evaluator;

- amends provisions regarding the release of a defendant determined to be incompetent to proceed from a secured setting;

- addresses when the department is required to provide an updated juvenile competency evaluation after an extended attainment period; and

- makes technical and conforming changes.

**Money Appropriated in this Bill:**

None

**Other Special Clauses:**

None

**Utah Code Sections Affected:**

**AMENDS:**

**26B-2-121**, as renumbered and amended by Laws of Utah 2023, Chapter 305

**26B-2-122**, as last amended by Laws of Utah 2024, Chapter 240

**26B-5-301**, as renumbered and amended by Laws of Utah 2023, Chapter 308

**26B-5-310**, as renumbered and amended by Laws of Utah 2023, Chapter 308

**26B-5-322**, as last amended by Laws of Utah 2023, Chapter 184 and renumbered and amended by Laws of Utah 2023, Chapter 308

**26B-5-332**, as last amended by Laws of Utah 2024, Chapters 287, 299 and 314

**26B-5-362**, as renumbered and amended by Laws of Utah 2023, Chapter 308

**26B-5-371**, as last amended by Laws of Utah 2023, Chapter 184 and renumbered and amended by Laws of Utah 2023, Chapter 308

**26B-6-401**, as last amended by Laws of Utah 2024, Chapter 240

**26B-6-606**, as renumbered and amended by Laws of Utah 2023, Chapter 308

**26B-6-607**, as last amended by Laws of Utah 2024, Chapter 299

**26B-6-608**, as last amended by Laws of Utah 2024, Chapter 299

**26B-6-613**, as renumbered and amended by Laws of Utah 2023, Chapter 308

**68-3-12.5**, as last amended by Laws of Utah 2024, Chapter 438

**77-15-2**, as last amended by Laws of Utah 2023, Chapter 171

**77-15-5**, as last amended by Laws of Utah 2023, Chapters 171, 417 and last amended by Coordination Clause, Laws of Utah 2023, Chapter 417

77-15-6, as last amended by Laws of Utah 2024, Chapter 174

77-19-203, as enacted by Laws of Utah 2004, Chapter 137

77-29-3, as enacted by Laws of Utah 1980, Chapter 15

80-6-402, as last amended by Laws of Utah 2023, Chapter 330

80-6-403, as last amended by Laws of Utah 2023, Chapter 330

*Be it enacted by the Legislature of the state of Utah:*

Section 1. Section **26B-2-121** is amended to read:

**26B-2-121 . Access to abuse and neglect information.**

(1) As used in this section:

(a) "Direct service worker" means the same as that term is defined in Section 26B-6-401.

(b) "Personal care attendant" means the same as that term is defined in Section [ ~~26B-6-401~~] 26B-6-101.

(2) With respect to a licensee, a direct service worker, or a personal care attendant, the department may access only the Licensing Information System of the Division of Child and Family Services created by Section 80-2-1002 and juvenile court records under Subsection 80-3-404(4), for the purpose of:

(a)(i) determining whether a person associated with a licensee, with direct access to children:

(A) is listed in the Licensing Information System; or

(B) has a substantiated finding by a juvenile court of a severe type of child abuse or neglect under Subsections 80-3-404(1) and (2); and

(ii) informing a licensee that a person associated with the licensee:

(A) is listed in the Licensing Information System; or

(B) has a substantiated finding by a juvenile court of a severe type of child abuse or neglect under Subsections 80-3-404(1) and (2);

(b)(i) determining whether a direct service worker:

(A) is listed in the Licensing Information System; or

(B) has a substantiated finding by a juvenile court of a severe type of child abuse or neglect under Subsections 80-3-404(1) and (2); and

(ii) informing a direct service worker or the direct service worker's employer that the direct service worker:

(A) is listed in the Licensing Information System; or

(B) has a substantiated finding by a juvenile court of a severe type of child abuse

- or neglect under Subsections 80-3-404(1) and (2); or
- (c)(i) determining whether a personal care attendant:
- (A) is listed in the Licensing Information System; or
- (B) has a substantiated finding by a juvenile court of a severe type of child abuse or neglect under Subsections 80-3-404(1) and (2); and
- (ii) informing a person described in Subsections 26B-6-101(9)(a)(i) through (iv) that a personal care attendant:
- (A) is listed in the Licensing Information System; or
- (B) has a substantiated finding by a juvenile court of a severe type of child abuse or neglect under Subsections 80-3-404(1) and (2).

(3) Notwithstanding Subsection (2), the department may access the Division of Child and Family Services' Management Information System under Section 80-2-1001:

- (a) for the purpose of licensing and monitoring foster parents;
- (b) for the purposes described in Subsection 80-2-1001(5)(b)(iii); and
- (c) for the purpose described in Section 26B-1-211.

(4) The department shall receive and process personal identifying information under Subsection 26B-2-120(1) for the purposes described in Subsection (2).

(5) The department shall adopt rules under Title 63G, Chapter 3, Utah Administrative Rulemaking Act, consistent with this part, defining the circumstances under which a person may have direct access or provide services to children when:

- (a) the person is listed in the Licensing Information System of the Division of Child and Family Services created by Section 80-2-1002; or
- (b) juvenile court records show that a court made a substantiated finding under Section 80-3-404, that the person committed a severe type of child abuse or neglect.

Section 2. Section **26B-2-122** is amended to read:

**26B-2-122 . Access to vulnerable adult abuse and neglect information.**

(1) For purposes of this section:

- (a) "Direct service worker" means the same as that term is defined in Section 26B-6-401.
- (b) "Personal care attendant" means the same as that term is defined in Section [ ~~26B-6-401~~ ] 26B-6-101.

(2) With respect to a licensee, a direct service worker, or a personal care attendant, the department may access the database created by Section 26B-6-210 for the purpose of:

- (a)(i) determining whether a person associated with a licensee, with direct access to vulnerable adults, has a supported or substantiated finding of:

- 131 (A) abuse;  
132 (B) neglect; or  
133 (C) exploitation; and  
134 (ii) informing a licensee that a person associated with the licensee has a supported or  
135 substantiated finding of:  
136 (A) abuse;  
137 (B) neglect; or  
138 (C) exploitation;  
139 (b)(i) determining whether a direct service worker has a supported or substantiated  
140 finding of:  
141 (A) abuse;  
142 (B) neglect; or  
143 (C) exploitation; and  
144 (ii) informing a direct service worker or the direct service worker's employer that the  
145 direct service worker has a supported or substantiated finding of:  
146 (A) abuse;  
147 (B) neglect; or  
148 (C) exploitation; or  
149 (c)(i) determining whether a personal care attendant has a supported or substantiated  
150 finding of:  
151 (A) abuse;  
152 (B) neglect; or  
153 (C) exploitation; and  
154 (ii) informing a person described in Subsections 26B-6-401(9)(a)(i) through (iv) that  
155 a personal care attendant has a supported or substantiated finding of:  
156 (A) abuse;  
157 (B) neglect; or  
158 (C) exploitation.  
159 (3) The department shall receive and process personal identifying information under  
160 Subsection 26B-2-120(2) for the purposes described in Subsection (2).  
161 (4) The department shall adopt rules under Title 63G, Chapter 3, Utah Administrative  
162 Rulemaking Act, consistent with this part and Chapter 6, Part 2, Abuse, Neglect, or  
163 Exploitation of a Vulnerable Adult, defining the circumstances under which a person  
164 may have direct access or provide services to vulnerable adults when the person is listed

in the statewide database of the Division of Aging and Adult Services created by Section 26B-6-210 as having a supported or substantiated finding of abuse, neglect, or exploitation.

Section 3. Section **26B-5-301** is amended to read:

**26B-5-301 . Definitions.**

As used in this part, Part 4, Commitment of Persons Under Age 18, and Part 5, Essential Treatment and Intervention:

- (1) "Adult" means an individual 18 years old or older.
- (2) "Approved treatment facility or program" means a mental health or substance use treatment provider that meets the goals and measurements described in Subsection 26B-5-102(2)(j).
- (3) "Assisted outpatient treatment" means involuntary outpatient mental health treatment ordered under Section 26B-5-351.
- (4) "Attending physician" means a physician licensed to practice medicine in this state who has primary responsibility for the care and treatment of the declarant.
- (5) "Attorney-in-fact" means an adult properly appointed under this part to make mental health treatment decisions for a declarant under a declaration for mental health treatment.
- (6) "Commitment to the custody of a local mental health authority" means that an adult is committed to the custody of the local mental health authority that governs the mental health catchment area where the adult resides or is found.
- (7) "Community mental health center" means an entity that provides treatment and services to a resident of a designated geographical area, that operates by or under contract with a local mental health authority, and that complies with state standards for community mental health centers.
- (8) "Designated examiner" means:
  - (a) a licensed physician, preferably a psychiatrist, who is designated by the division as specially qualified by training or experience in the diagnosis of mental or related illness; or
  - (b) a licensed mental health professional designated by the division as specially qualified by training and who has at least five years' continual experience in the treatment of mental illness.
- (9) "Designee" means a physician who has responsibility for medical functions including admission and discharge, an employee of a local mental health authority, or an employee of a person that has contracted with a local mental health authority to provide mental

health services under Section 17-43-304.

(10) "Essential treatment" and "essential treatment and intervention" mean court-ordered treatment at a local substance abuse authority or an approved treatment facility or program for the treatment of an adult's substance use disorder.

(11) "Harmful sexual conduct" means the following conduct upon an individual without the individual's consent, including the nonconsensual circumstances described in Subsections 76-5-406(2)(a) through (l):

(a) sexual intercourse;

(b) penetration, however slight, of the genital or anal opening of the individual;

(c) any sexual act involving the genitals or anus of the actor or the individual and the mouth or anus of either individual, regardless of the gender of either participant; or

(d) any sexual act causing substantial emotional injury or bodily pain.

(12) "Informed waiver" means the patient was informed of a right and, after being informed of that right and the patient's right to waive the right, expressly communicated his or her intention to waive that right.

(13) "Incapable" means that, in the opinion of the court in a guardianship proceeding under Title 75, Utah Uniform Probate Code, or in the opinion of two physicians, a person's ability to receive and evaluate information effectively or communicate decisions is impaired to such an extent that the person currently lacks the capacity to make mental health treatment decisions.

(14) "Institution" means a hospital or a health facility licensed under Section 26B-2-206.

(15) "Lay person" means an individual identified and authorized by a patient to participate in activities related to the patient's commitment, including court appearances, discharge planning, and grievances, except that a patient may revoke a lay person's authorization at any time.

~~(16)~~ "Local substance abuse authority" means the same as that term is defined in Section 26B-5-101 and described in Section 17-43-201.

~~[(16)]~~ (17) "Mental health facility" means the Utah State Hospital or other facility that provides mental health services under contract with the division, a local mental health authority, a person that contracts with a local mental health authority, or a person that provides acute inpatient psychiatric services to a patient.

~~[(17)]~~ (18) "Mental health officer" means an individual who is designated by a local mental health authority as qualified by training and experience in the recognition and identification of mental illness, to:

- 233 (a) apply for and provide certification for a temporary commitment; or
- 234 (b) assist in the arrangement of transportation to a designated mental health facility.
- 235 ~~[(18)]~~ (19) "Mental illness" means:
- 236 (a) a psychiatric disorder that substantially impairs an individual's mental, emotional,
- 237 behavioral, or related functioning; or
- 238 (b) the same as that term is defined in:
- 239 (i) the current edition of the Diagnostic and Statistical Manual of Mental Disorders
- 240 published by the American Psychiatric Association; or
- 241 (ii) the current edition of the International Statistical Classification of Diseases and
- 242 Related Health Problems.
- 243 ~~[(19)]~~ (20) "Mental health treatment" means convulsive treatment, treatment with
- 244 psychoactive medication, or admission to and retention in a facility for a period not to
- 245 exceed 17 days.
- 246 ~~[(20)]~~ (21) "Patient" means an individual who is:
- 247 (a) under commitment to the custody or to the treatment services of a local mental health
- 248 authority; or
- 249 (b) undergoing essential treatment and intervention.
- 250 ~~[(21)]~~ (22) "Physician" means an individual who is:
- 251 (a) licensed as a physician under Title 58, Chapter 67, Utah Medical Practice Act; or
- 252 (b) licensed as a physician under Title 58, Chapter 68, Utah Osteopathic Medical
- 253 Practice Act.
- 254 ~~[(22)]~~ (23) "Serious bodily injury" means bodily injury that involves a substantial risk of
- 255 death, unconsciousness, extreme physical pain, protracted and obvious disfigurement, or
- 256 protracted loss or impairment of the function of a bodily member, organ, or mental
- 257 faculty.
- 258 ~~[(23)]~~ (24) "State hospital" means the Utah State Hospital established in Section 26B-5-302.
- 259 ~~[(24)]~~ (25) "Substantial danger" means that due to mental illness, an individual is at serious
- 260 risk of:
- 261 (a) suicide;
- 262 (b) serious bodily self-injury;
- 263 (c) serious bodily injury because the individual is incapable of providing the basic
- 264 necessities of life, including food, clothing, or shelter;
- 265 (d) causing or attempting to cause serious bodily injury to another individual;
- 266 (e) engaging in harmful sexual conduct; or



(f) if not treated, suffering severe and abnormal mental, emotional, or physical distress that:

(i) is associated with significant impairment of judgment, reason, or behavior; and

(ii) causes a substantial deterioration of the individual's previous ability to function independently.

[<25>] (26) "Treatment" means psychotherapy, medication, including the administration of psychotropic medication, or other medical treatments that are generally accepted medical or psychosocial interventions for the purpose of restoring the patient to an optimal level of functioning in the least restrictive environment.

Section 4. Section **26B-5-310** is amended to read:

**26B-5-310 . Restrictions and limitations -- Rights and privileges.**

(1) Subject to the general rules of the division, subject to the requirement in Subsection (2) that the reason, nature, and extent of any limitation or denial of a patient's right shall be entered in the patient's treatment record, and except to the extent that the director or [his] the director's designee determines that it is necessary for the welfare of the patient or the patient's caretakers to impose restrictions, every patient is entitled to:

(a)(i) communicate, by sealed mail or otherwise, with persons, including official agencies, inside or outside the [facility] responsible mental health authority, local substance abuse authority, or approved treatment facility or program;

(ii) be provided with letter-writing materials, including postage; and

(iii) have staff of the responsible mental health authority, local substance abuse authority, or approved treatment facility or program assist the patient if the patient is unable to write, prepare, or mail correspondence;

(b) have frequent and consistent opportunities to receive visitors[; and] at reasonable times that do not interfere with clinical activities;

(c) speak or visit with the patient's attorney or clergy member within a reasonable period of time;

(d) exercise all civil rights, including the right to dispose of property, execute instruments, make purchases, enter contractual relationships, and vote, unless the patient has been adjudicated to be incompetent and has not been restored to legal capacity[-] ;

(e) while in an inpatient facility, have access to adequate water and food and have the patient's nutritional needs met in a manner that is consistent with recognized dietary practices;

- (f) be treated fairly, with respect and recognition of the patient's dignity and individuality;
- (g) not be discriminated against on the basis of a characteristic identified in Subsection 57-21-5(1);
- (h) within 72 business hours after the patient's request, see and receive the services of a patient representative, including a peer specialist or patient advocate, who is not involved in the direct clinical care of the patient;
- (i) have the patient's behavioral health orders for scope of treatment, declaration for mental health treatment, or other psychiatric advance directive reviewed and considered as the preferred treatment option for involuntary administration of medications by the responsible local mental health authority, local substance abuse authority, or approved treatment facility or program, unless by clear and convincing evidence the patient's directive does not qualify as effective participation in behavioral health decision-making;
- (j) with the patient's consent, have the patient's information or records disclosed to an adult family member, the patient's lay person, or, in accordance with state and federal law, to a protection and advocacy system designated pursuant to 42 U.S.C. Sec. 10801 et seq.;
- (k)(i) access to a telephone to make and receive private calls, unless determined a clinical or safety risk; and
- (ii) staff assistance to be able to communicate with others, if the patient does not have a contact list;
- (l) wear the patient's own clothes, keep and use the patient's own possessions, and keep and be allowed to spend a reasonable amount of the patient's own money, unless deemed a clinical or safety risk; and
- (m) be told:
- (i) the reason for the patient's detainment and the limitation of the patient's detainment, including a description of the patient's right to refuse medication unless the patient requires emergency medications; and
- (ii) that the patient's commitment does not mean all treatment during commitment is mandatory.
- (2)(a) When any right of a patient is limited or denied, the nature, extent, and reason for that limitation or denial shall be entered in the patient's treatment record.
- (b) Information pertaining to a denial of any right of a patient shall be made available,

upon request, to the patient, the patient's attorney, and the patient's lay person.

(c) Any continuing denial or limitation of any right of a patient shall be reviewed every 30 days and shall also be entered in ~~[that]~~ the patient's treatment record.

(d) Notice of ~~[that]~~ a continuing denial of any right of a patient in excess of 30 days shall be sent to the division, the ~~[appropriate]~~ responsible local mental health authority, the appropriate local substance abuse authority, or an approved treatment facility or program~~[-, whichever is most applicable to the patient].~~

~~[(3) Notwithstanding any limitations authorized under this section on the right of communication, each patient is entitled to communicate by sealed mail with the appropriate local mental health authority, the appropriate local substance abuse authority, an approved treatment facility or program, the division, the patient's attorney, and the court, if any, that ordered the patient's commitment or essential treatment. In no case may the patient be denied a visit with the legal counsel or clergy of the patient's choice.]~~

~~[(4)]~~ (3) Local mental health authorities, local substance abuse authorities, and approved treatment facilities or programs shall provide reasonable means and arrangements for informing involuntary patients of their right to release as provided in this chapter, and for assisting them in making and presenting requests for release.

~~[(5)]~~ (4) ~~[Mental]~~ Local mental health facilities, local substance abuse authorities, and approved treatment facilities or programs shall post a statement, created by the division, describing a patient's rights under Utah law.

~~[(6)]~~ (5) A local mental health authority, local substance abuse authority, or approved treatment facility or program may not intentionally retaliate or discriminate against a detained patient or employee for contacting or providing information to any official or to an employee of any state protection and advocacy agency or for initiating, participating in, or testifying in a grievance procedure or in an action for any remedy authorized pursuant to this section.

(6) Notwithstanding Section 53B-17-303, an individual committed under this chapter has the right to determine the final disposition of that individual's body after death.

Section 5. Section **26B-5-322** is amended to read:

**26B-5-322 . Criminal's escape -- Penalty.**

Any person committed to the state hospital under the provisions of ~~[Title 77, Chapter 15, Inquiry into Sanity of Defendant]~~ Title 77, Chapter 15, Defendant's Competency to Proceed, or Chapter 16a, Commitment and Treatment of Individuals with a Mental Condition, who escapes or leaves the state hospital without proper legal authority is guilty of a class A misdemeanor.

Section 6. Section **26B-5-332** is amended to read:

**26B-5-332 . Involuntary commitment under court order -- Examination --  
Hearing -- Power of court -- Findings required -- Costs.**

(1) A responsible individual who has credible knowledge of an adult's mental illness and the condition or circumstances that have led to the adult's need to be involuntarily committed may initiate an involuntary commitment court proceeding by filing, in the court in the county where the proposed patient resides or is found, a written application that includes:

(a) unless the court finds that the information is not reasonably available, the proposed patient's:

(i) name;

(ii) date of birth; and

(iii) social security number;

(b)(i) a certificate of a licensed physician or a designated examiner stating that within the seven-day period immediately preceding the certification, the physician or designated examiner examined the proposed patient and is of the opinion that the proposed patient has a mental illness and should be involuntarily committed; or

(ii) a written statement by the applicant that:

(A) the proposed patient has been requested to, but has refused to, submit to an examination of mental condition by a licensed physician or designated examiner;

(B) is sworn to under oath; and

(C) states the facts upon which the application is based; and

(c) a statement whether the proposed patient has previously been under an assisted outpatient treatment order, if known by the applicant.

(2) Before issuing a judicial order, the court:

(a) shall require the applicant to consult with the appropriate local mental health authority at or before the hearing; and

(b) may direct a mental health professional from the local mental health authority to interview the applicant and the proposed patient to determine the existing facts and report the existing facts to the court.

(3) The court may issue an order, directed to a mental health officer or peace officer, to 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:

(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.

(b) The place of detention shall maintain a copy of the order of detention.

(5)(a) The court shall provide notice of commencement of proceedings for involuntary commitment as soon as practicable to the applicant, any legal guardian, any immediate adult family members, legal counsel for the parties involved, the local mental health authority or the local mental health authority's designee, and any other 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.

(6) Proceedings for commitment of an individual under 18 years old to a local mental health authority may be commenced in accordance with Part 4, Commitment of Persons Under Age 18.

(7)(a) The court may, in the court's discretion, transfer the case to any other district court within this state, if the transfer will not be adverse to the interest of the 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 with Utah Rules of Civil Procedure, Rule 25.

- (8) 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 or the local mental health authority's designee under court order for detention or examination, the court shall appoint two designated examiners:
- (a) who did not sign the civil commitment application nor the civil commitment certification under Subsection (1);
  - (b) one of whom is:
    - (i) a licensed physician; or
    - (ii) a psychiatric mental health nurse practitioner or a psychiatric mental health clinical nurse specialist who:
      - (A) is nationally certified;
      - (B) is doctorally trained; and
      - (C) has at least two years of inpatient mental health experience, regardless of the license the individual held at the time of that experience; and
  - (c) one of whom may be designated by the proposed patient or the proposed patient's counsel, if that designated examiner is reasonably available.
- (9) The court shall schedule a hearing to be held within 10 calendar days after the day on which the designated examiners are appointed.
- (10)(a) The designated examiners shall[:]
- ~~[(i)]~~ conduct the examinations separately[;] .
  - ~~[(ii)]~~ ~~(b) [conduct the examinations at the home of the proposed patient, at a hospital or other medical facility, or at any other suitable place, including] The designated examiners shall conduct the examinations:~~
    - ~~(i) through telehealth[;] unless the designated examiner determines that:~~
      - ~~(A) a telehealth examination would not be sufficient to properly assess the proposed patient;~~
      - ~~(B) a telehealth examination would have a harmful effect on the proposed patient's health; or~~
      - ~~(C) an in-person examination can be conducted as effectively, conveniently, and timely as an examination through telehealth; and~~
    - ~~(ii) if the designated examiner determines, pursuant to Subsection (10)(b)(i), that the examination should be conducted in person, at the home of the proposed patient, at a hospital or other medical facility, or at any other suitable place that is not likely to have a harmful effect on the proposed patient's health[;] .~~

467 ~~[(iii)]~~ (c) The designated examiners shall inform the proposed patient, if not represented  
468 by an attorney:

469 ~~[(A)]~~ (i) that the proposed patient does not have to say anything;

470 ~~[(B)]~~ (ii) of the nature and reasons for the examination;

471 ~~[(C)]~~ (iii) that the examination was ordered by the court;

472 ~~[(D)]~~ (iv) that any information volunteered could form part of the basis for the  
473 proposed patient's involuntary commitment;

474 ~~[(E)]~~ (v) that findings resulting from the examination will be made available to the  
475 court; and

476 ~~[(F)]~~ (vi) that the designated examiner may, under court order, obtain the proposed  
477 patient's mental health records~~[-and]~~ .

478 ~~[(iv)]~~ (d) ~~[within]~~ Within 24 hours of examining the proposed patient, a designated  
479 examiner shall report to the court, orally or in writing, whether the proposed patient  
480 is mentally ill, has agreed to voluntary commitment, as described in Section  
481 26B-5-360, or has acceptable programs available to the proposed patient without  
482 court proceedings.

483 ~~[(b)]~~ (e) If a designated examiner reports orally under Subsection ~~[(10)(a)]~~ (10)(d), the  
484 designated examiner shall immediately send a written report to the clerk of the court.

485 (11) If a designated examiner is unable to complete an examination on the first attempt  
486 because the proposed patient refuses to submit to the examination, the court shall fix a  
487 reasonable compensation to be paid to the examiner.

488 (12) If the local mental health authority, the local mental health authority's designee, or a  
489 medical examiner determines before the court hearing that the conditions justifying the  
490 findings leading to a commitment hearing no longer exist, the local mental health  
491 authority, the local mental health authority's designee, or the medical examiner shall  
492 immediately report the determination to the court.

493 (13)(a) The court shall terminate the proceedings and dismiss the application before the  
494 hearing if both designated examiners inform the court that the proposed patient does  
495 not meet the criteria in Subsection (16).

496 (b) The court may terminate the proceedings and dismiss the application at any time,  
497 including before the hearing, if the designated examiners or the local mental health  
498 authority or the local mental health authority's designee informs the court that the  
499 proposed patient:

500 ~~[(a) does not meet the criteria in Subsection (16);]~~

~~[(b)]~~ (i) has agreed to voluntary commitment, as described in Section 26B-5-360;  
~~[(e)]~~ (ii) has acceptable options for treatment programs that are available without  
court proceedings; or  
~~[(d)]~~ (iii) meets the criteria for assisted outpatient treatment described in Section  
26B-5-351.

(14)(a) Before the hearing, the court shall provide the proposed patient an opportunity to  
be represented by counsel, and if neither the proposed patient nor others provide  
counsel, the court shall appoint counsel and allow counsel sufficient time to consult  
with the proposed patient before the hearing.

(b) In the case of an indigent proposed patient, the county in which the proposed patient  
resides or is found shall make payment of reasonable attorney fees for counsel, as  
determined by the court.

(15)(a)(i) The court shall afford the proposed patient, the applicant, and any other  
person to whom notice is required to be given an opportunity to appear at the  
hearing, to testify, and to present and cross-examine witnesses.

(ii) The court may, in the court's discretion, receive the testimony of any other person.

(iii) The court may allow a waiver of the proposed patient's right to appear for good  
cause, which cause shall be set forth in the record, or an informed waiver by the  
patient, which shall be included in the record.

(b) The court is authorized to exclude any person not necessary for the conduct of the  
proceedings and may, upon motion of counsel, require the testimony of each  
designated examiner to be given out of the presence of any other designated  
examiners.

(c) The court shall:

(i) conduct the hearing in as informal a manner as may be consistent with orderly  
procedure~~[-and]~~ ; and

(ii) while preserving the due process rights of the proposed patient:

(A) conduct the hearing remotely, in accordance with Utah Rules of Civil  
Procedure, Rule 87, unless the court finds good cause under Rule 87 not to  
conduct the hearing remotely; or

(B) if the court finds good cause under Rule 87 not to conduct the hearing  
remotely, conduct the hearing in a physical setting that is not likely to have a  
harmful effect on the mental health of the proposed patient~~[-while preserving  
the due process rights of the proposed patient].~~



(d) The court shall consider any relevant historical and material information that is offered, subject to the rules of evidence, including reliable hearsay under Utah Rules of Evidence, Rule 1102.

(e)(i) A local mental health authority or the local mental health authority's designee or the physician in charge of the proposed patient's care shall, at the time of the hearing, provide the court with the following information:

(A) the detention order;

(B) admission notes;

(C) the diagnosis;

(D) any doctors' orders;

(E) progress notes;

(F) nursing notes;

(G) medication records pertaining to the current commitment; and

(H) whether the proposed patient has previously been civilly committed or under an order for assisted outpatient treatment.

(ii) The local mental health authority or the local mental health authority's designee or the physician in charge of the proposed patient's care shall also supply the information described in Subsection (15)(e)(i) [shall also be supplied] to the proposed patient's counsel at the time of the hearing, and at any time prior to the hearing upon request by the proposed patient's counsel.

(16)(a) The court shall order commitment of an adult proposed patient to a local mental health authority if, upon completion of the hearing and consideration of the information presented, the court finds by clear and convincing evidence that:

(i)(A) the proposed patient has a mental illness;

(B) because of the proposed patient's mental illness the proposed patient poses a substantial danger to self or others;

(C) the proposed patient lacks the ability to engage in a rational decision-making process regarding the acceptance of mental treatment as demonstrated by evidence of inability to weigh the possible risks of accepting or rejecting treatment;

(D) there is no appropriate less-restrictive alternative to a court order of commitment; and

(E) the local mental health authority can provide the proposed patient with treatment that is adequate and appropriate to the proposed patient's conditions

- 569 and needs; or
- 570 (ii)(A) the proposed patient has been charged with a criminal offense;
- 571 (B) with respect to the charged offense, the proposed patient is found incompetent
- 572 to proceed as a result of a mental illness;
- 573 (C) the proposed patient has a mental illness;
- 574 (D) the proposed patient has a persistent unawareness of their mental illness and
- 575 the negative consequences of that illness, or within the preceding six months
- 576 has been requested or ordered to undergo mental health treatment but has
- 577 unreasonably refused to undergo that treatment;
- 578 (E) there is no appropriate less-restrictive alternative to a court order of
- 579 commitment; and
- 580 (F) the local mental health authority can provide the proposed patient with
- 581 treatment that is adequate and appropriate to the proposed patient's conditions
- 582 and needs.
- 583 (b)(i) If, at the hearing, the court determines that the proposed patient has a mental
- 584 illness but does not meet the other criteria described in Subsection (16)(a), the
- 585 court may consider whether the proposed patient meets the criteria for assisted
- 586 outpatient treatment under Section 26B-5-351.
- 587 (ii) The court may order the proposed patient to receive assisted outpatient treatment
- 588 in accordance with Section 26B-5-351 if, at the hearing, the court finds the
- 589 proposed patient meets the criteria for assisted outpatient treatment under Section
- 590 26B-5-351.
- 591 (iii) If the court determines that neither the criteria for commitment under Subsection
- 592 (16)(a) nor the criteria for assisted outpatient treatment under Section 26B-5-351
- 593 are met, the court shall dismiss the proceedings after the hearing.
- 594 (17)(a)(i) The order of commitment shall designate the period for which the patient
- 595 shall be treated.
- 596 (ii) If the patient is not under an order of commitment at the time of the hearing, the
- 597 patient's treatment period may not exceed six months without a review hearing.
- 598 (iii) Upon a review hearing, to be commenced before the expiration of the previous
- 599 order of commitment, an order for commitment may be for an indeterminate
- 600 period, if the court finds by clear and convincing evidence that the criteria
- 601 described in Subsection (16) will last for an indeterminate period.
- 602 (b)(i) The court shall maintain a current list of all patients under the court's order of

commitment and review the list to determine those patients who have been under an order of commitment for the court designated period.

(ii) At least two weeks before the expiration of the designated period of any order of commitment still in effect, the court that entered the original order of commitment shall inform the appropriate local mental health authority or the local mental health authority's designee of the expiration.

(iii) Upon receipt of the information described in Subsection (17)(b)(ii), the local mental health authority or the local mental health authority's designee shall immediately reexamine the reasons upon which the order of commitment was based.

(iv) If, after reexamination under Subsection (17)(b)(iii), the local mental health authority or the local mental health authority's designee determines that the conditions justifying commitment no longer exist, the local mental health authority or the local mental health authority's designee shall discharge the patient from involuntary commitment and immediately report the discharge to the court.

(v) If, after reexamination under Subsection (17)(b)(iii), the local mental health authority or the local mental health authority's designee determines that the conditions justifying commitment continue to exist, the court shall immediately appoint two designated examiners and proceed under Subsections (8) through (14).

(c)(i) The local mental health authority or the local mental health authority's 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.

(ii) If the local mental health authority or the local mental health authority's designee determines that the conditions justifying commitment no longer exist, the local mental health authority or the local mental health authority's designee shall discharge the patient from the local mental health authority's or the local mental health authority designee's custody and immediately report the discharge to the court.

(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 mental health authority or the local mental health authority's designee shall send a written report of the findings to the court.

(iv) [A] The local mental health authority or the local mental health authority's

- 637 designee shall notify the patient and the patient's counsel of record [~~shall be~~  
638 ~~notified~~] in writing that the involuntary commitment will be continued under  
639 Subsection (17)(c)(iii), the reasons for the decision to continue, and that the  
640 patient has the right to a review hearing by making a request to the court.
- 641 (v) Upon receiving a request under Subsection (17)(c)(iv), the court shall  
642 immediately appoint two designated examiners and proceed under Subsections (8)  
643 through (14).
- 644 (18)(a) Any patient committed as a result of an original hearing or a patient's legally  
645 designated representative who is aggrieved by the findings, conclusions, and order of  
646 the court entered in the original hearing has the right to a new hearing upon filing a  
647 petition [~~filed~~] with the court within 30 days after the day on which the court entered  
648 the order [~~is entered~~].
- 649 (b) The petition shall allege error or mistake in the findings, in which case the court shall  
650 appoint three impartial designated examiners previously unrelated to the case to  
651 conduct an additional examination of the patient.
- 652 (c) Except as provided in Subsection (18)(b), the court shall, in all other respects,  
653 conduct the new hearing in the manner otherwise permitted.
- 654 (19) The county in which the proposed patient resides or is found shall pay the costs of all  
655 proceedings under this section.
- 656 (20)(a) A local mental health authority shall provide discharge instructions to each  
657 individual committed under this section at or before the time the individual is  
658 discharged from the local mental health authority's custody, regardless of the  
659 circumstances under which the individual is discharged.
- 660 (b) Discharge instructions provided under Subsection (20)(a) shall include:
- 661 (i) a summary of why the individual was committed to the local mental health  
662 authority;
- 663 (ii) detailed information about why the individual is being discharged from the local  
664 mental health authority's custody;
- 665 (iii) a safety plan for the individual based on the individual's mental illness or mental  
666 or emotional state;
- 667 (iv) notification to the individual's primary care provider, if applicable;
- 668 (v) if the individual is discharged without food, housing, or economic security, a  
669 referral to appropriate services, if such services exist in the individual's  
670 community;

- (vi) the phone number to call or text for a crisis services hotline, and information about the availability of peer support services;
- (vii) a copy of any psychiatric advance directive presented to the local mental health authority, if applicable;
- (viii) information about how to establish a psychiatric advance directive if one was not presented to the local mental health authority;
- (ix) as applicable, information about medications that were changed or discontinued during the commitment;
- (x) a list of any screening or diagnostic tests conducted during the commitment;
- (xi) a summary of therapeutic treatments provided during the commitment;
- (xii) any laboratory work, including blood samples or imaging, that was completed or attempted during the commitment; and
- (xiii) information about how to contact the local mental health authority if needed.
- (c) If an individual's medications were changed, or if an individual was prescribed new medications while committed under this section, discharge instructions provided under Subsection (20)(a) shall include a clinically appropriate supply of medications, as determined by a licensed health care provider, to allow the individual time to access another health care provider or follow-up appointment.
- (d) If an individual refuses to accept discharge instructions, the local mental health authority shall document the refusal in the individual's medical record.
- (e) If an individual's discharge instructions include referrals to services under Subsection (20)(b)(v), the local mental health authority shall document those referrals in the individual's medical record.
- (f) The local mental health authority shall attempt to follow up with a discharged individual at least 48 hours after discharge, and may use peer support professionals when performing follow-up care or developing a continuing care plan.
- (21) If any provision of Subsection (16)(a)(ii) or the application of any provision of Subsection (16)(a)(ii) to any person or circumstance is held invalid by a court with jurisdiction, the remainder of Subsection (16)(a)(ii) shall be given effect without the invalid provision or application. The provisions of Subsection (16)(a)(ii) are severable.
- Section 7. Section **26B-5-362** is amended to read:
- 26B-5-362 . Commitment and care of criminally insane.**
- Nothing contained in this part may be construed to alter or change the method presently employed for the commitment and care of the criminally insane as provided in [Title 77,

~~Chapter 15, Inquiry into Sanity of Defendant]~~ Title 77, Chapter 15, Defendant's Competency to Proceed.

Section 8. Section **26B-5-371** is amended to read:

**26B-5-371 . Utah Forensic Mental Health Facility -- Design and operation -- Security.**

(1) The forensic mental health facility is a secure treatment facility.

(2)(a) The forensic mental health facility accommodates the following populations:

(i) prison inmates displaying mental illness necessitating treatment in a secure mental health facility;

(ii) criminally adjudicated persons found guilty with a mental illness or guilty with a mental condition at the time of the offense undergoing evaluation for a mental condition under Title 77, Chapter 16a, Commitment and Treatment of Individuals with a Mental Condition;

(iii) criminally adjudicated persons undergoing evaluation for competency or found guilty with a mental condition or guilty with a mental condition at the time of the offense under Title 77, Chapter 16a, Commitment and Treatment of Individuals with a Mental Condition, who also have an intellectual disability;

(iv) persons undergoing evaluation for competency or found by a court to be incompetent to proceed in accordance with ~~[Title 77, Chapter 15, Inquiry into Sanity of Defendant]~~ Title 77, Chapter 15, Defendant's Competency to Proceed, or not guilty by reason of insanity under Title 77, Chapter 14, Defenses;

(v) persons who are civilly committed to the custody of a local mental health authority in accordance with this part, and who may not be properly supervised by the Utah State Hospital because of a lack of necessary security, as determined by the superintendent or the superintendent's designee; and

(vi) persons ordered to commit themselves to the custody of the division for treatment at the Utah State Hospital as a condition of probation or stay of sentence pursuant to Title 77, Chapter 18, The Judgment.

(b) Placement of an offender in the forensic mental health facility under any category described in Subsection (2)(a)(ii), (iii), (iv), or (vi) shall be made on the basis of the offender's status as established by the court at the time of adjudication.

(c) In accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, the department shall make rules providing for the allocation of beds to the categories described in Subsection (2)(a).

(3) The department shall:

- (a) own and operate the forensic mental health facility;
- (b) provide and supervise administrative and clinical staff; and
- (c) provide security staff who are trained as psychiatric technicians.

(4) Pursuant to Subsection 26B-5-303(3) the executive director shall designate individuals to perform security functions for the state hospital.

Section 9. Section **26B-6-401** is amended to read:

**26B-6-401 . Definitions.**

As used in this part:

(1) "Approved provider" means a person approved by the division to provide home-and community-based services.

(2) "Board" means the Utah State Developmental Center Board created under Section 26B-1-429.

(3)(a) "Brain injury" means an acquired injury to the brain that is neurological in nature, including a cerebral vascular accident.

(b) "Brain injury" does not include a deteriorating disease.

(4) "Designated intellectual disability professional" means:

(a) a psychologist licensed under Title 58, Chapter 61, Psychologist Licensing Act, who:

(i)(A) has at least one year of specialized training in working with persons with an intellectual disability; or

(B) has at least one year of clinical experience with persons with an intellectual disability; and

(ii) is designated by the division as specially qualified, by training and experience, in the treatment of an intellectual disability; or

(b) a clinical social worker, certified social worker, marriage and family therapist, or professional counselor, licensed under Title 58, Chapter 60, Mental Health Professional Practice Act, who:

(i) has at least two years of clinical experience with persons with an intellectual disability; and

(ii) is designated by the division as specially qualified, by training and experience, in the treatment of an intellectual disability.

(5) "Deteriorating disease" includes:

- (a) multiple sclerosis;
- (b) muscular dystrophy;

- 773 (c) Huntington's chorea;  
774 (d) Alzheimer's disease;  
775 (e) ataxia; or  
776 (f) cancer.
- 777 (6) "Developmental center" means the Utah State Developmental Center, established in  
778 accordance with Part 5, Utah State Developmental Center.
- 779 (7) "Director" means the director of the Division of Services for People with Disabilities.
- 780 (8) "Direct service worker" means a person who provides services to a person with a  
781 disability:
- 782 (a) when the services are rendered in:
- 783 (i) the physical presence of the person with a disability; or  
784 (ii) a location where the person rendering the services has access to the physical  
785 presence of the person with a disability; and
- 786 (b)(i) under a contract with the division;  
787 (ii) under a grant agreement with the division; or  
788 (iii) as an employee of the division.
- 789 (9)(a) "Disability" means a severe, chronic disability that:
- 790 (i) is attributable to:
- 791 (A) an intellectual disability;  
792 (B) a condition that qualifies a person as a person with a related condition, as  
793 defined in 42 C.F.R. Sec. 435.1010;  
794 (C) a physical disability; or  
795 (D) a brain injury;
- 796 (ii) is likely to continue indefinitely;
- 797 (iii)(A) for a condition described in Subsection (9)(a)(i)(A), (B), or (C), results in  
798 a substantial functional limitation in three or more of the following areas of  
799 major life activity:
- 800 (I) self-care;  
801 (II) receptive and expressive language;  
802 (III) learning;  
803 (IV) mobility;  
804 (V) self-direction;  
805 (VI) capacity for independent living; or  
806 (VII) economic self-sufficiency; or



- 807 (B) for a condition described in Subsection (9)(a)(i)(D), results in a substantial  
808 limitation in three or more of the following areas:
- 809 (I) memory or cognition;  
810 (II) activities of daily life;  
811 (III) judgment and self-protection;  
812 (IV) control of emotions;  
813 (V) communication;  
814 (VI) physical health; or  
815 (VII) employment; and
- 816 (iv) requires a combination or sequence of special interdisciplinary or generic care,  
817 treatment, or other services that:
- 818 (A) may continue throughout life; and  
819 (B) must be individually planned and coordinated.
- 820 (b) "Disability" does not include a condition due solely to:
- 821 (i) mental illness;  
822 (ii) personality disorder;  
823 (iii) deafness or being hard of hearing;  
824 (iv) visual impairment;  
825 (v) learning disability;  
826 (vi) behavior disorder;  
827 (vii) substance abuse; or  
828 (viii) the aging process.
- 829 (10) "Division" means the Division of Services for People with Disabilities.
- 830 (11) "Eligible to receive division services" or "eligibility" means qualification, based on  
831 criteria established by the division, to receive services that are administered by the  
832 division.
- 833 (12) "Endorsed program" means a facility or program that:
- 834 (a) is operated:
- 835 (i) by the division; or  
836 (ii) under contract with the division; or
- 837 (b) provides services to a person committed to the division under Part 6, Admission to  
838 an Intermediate Care Facility for People with an Intellectual Disability.
- 839 (13) "Licensed physician" means:
- 840 (a) an individual licensed to practice medicine under:

- 841 (i) Title 58, Chapter 67, Utah Medical Practice Act; or  
842 (ii) Title 58, Chapter 68, Utah Osteopathic Medical Practice Act; or  
843 (b) a medical officer of the United States Government while in this state in the  
844 performance of official duties.
- 845 (14) "Limited support services" means services that are administered by the division to  
846 individuals with a disability:
- 847 (a) under a waiver authorized under 42 U.S.C. Sec. 1396n(c) by the Centers for  
848 Medicare and Medicaid Services that permits the division to limit services to an  
849 individual who is eligible to receive division services; and  
850 (b) through a program that:
- 851 (i) was not operated by the division on or before January 1, 2020; and  
852 (ii)(A) limits the kinds of services that an individual may receive; or  
853 (B) sets a maximum total dollar amount for program services provided to each  
854 individual.
- 855 (15) "Physical disability" means a medically determinable physical impairment that has  
856 resulted in the functional loss of two or more of a person's limbs.
- 857 (16) "Public funds" means state or federal funds that are disbursed by the division.
- 858 (17)(a) "Related condition" means a severe, chronic condition that:
- 859 (i) manifests before the day on which an individual turns 22 years old;  
860 (ii) is likely to continue indefinitely;  
861 (iii) results in substantial functional limitations;  
862 (iv) is closely related to an intellectual disability because the condition results in the  
863 impairment of:
- 864 (A) general intellectual functioning, similar to that of an individual with an  
865 intellectual disability; or  
866 (B) adaptive behavior, similar to that of an individual with an intellectual  
867 disability; and
- 868 (v) requires treatment or services similar to the treatment or services required for an  
869 individual with an intellectual disability.
- 870 (b) "Related condition" does not include mental illness, as that term is defined in Section  
871 26B-5-301.
- 872 [(17)] (18) "Resident" means an individual under observation, care, or treatment in an  
873 intermediate care facility for people with an intellectual disability.
- 874 (19) "Substantial danger" means that because of an intellectual disability or related

condition, an individual is at risk of:

(a) suicide;

(b) serious bodily self-injury;

(c) serious bodily injury because the individual lacks capacity to provide the basic necessities of life, such as food, clothing, or shelter;

(d) causing or attempting to cause serious bodily injury or serious emotional harm to another individual;

(e) engaging in harmful sexual conduct, as that term is defined in Section 26B-5-301; or

(f) suffering serious physical harm or serious emotional harm as a result of being exploited, abused, or neglected.

[(18)] (20) "Sustainability fund" means the Utah State Developmental Center Long-Term Sustainability Fund created in Section 26B-1-331.

Section 10. Section **26B-6-606** is amended to read:

**26B-6-606 . Involuntary commitment.**

An individual with an intellectual disability or related condition may not be involuntarily committed to ~~[an intermediate care facility for people with an intellectual disability]~~ the division except in accordance with Sections 26B-6-607 and 26B-6-608.

Section 11. Section **26B-6-607** is amended to read:

**26B-6-607 . Temporary emergency commitment -- Observation and evaluation.**

(1) ~~[The director of the division or his designee may temporarily commit an individual to the division and therefore, as a matter of course, to an intermediate care facility for people with an intellectual disability for observation and evaluation]~~ An individual with an intellectual disability or related condition may be committed to the division on an emergency basis upon[:]

~~[(a) written application by a responsible person who has reason to know that the individual is in need of commitment, stating:]~~

~~[(i) a belief that the individual has an intellectual disability and is likely to cause serious injury to self or others if not immediately committed;]~~

~~[(ii) personal knowledge of the individual's condition; and]~~

~~[(iii) the circumstances supporting that belief; or]~~

~~[(b)]~~ certification by a [licensed physician or] designated intellectual disability professional stating that the [physician or] designated intellectual disability professional:

~~[(i)]~~ (a) has examined the individual within a three-day period, excluding Saturdays,

Sundays, and state holidays, immediately preceding the certification; and  
[(ii)] (b) is of the opinion that the individual has an intellectual disability or related  
condition, and that because of the individual's intellectual disability ~~[is likely to injure]~~  
or related condition is a substantial danger to self or others~~[if not immediately~~  
~~committed]~~.

(2) If the individual in need of commitment is not placed in the custody of the director or  
the director's designee by the person submitting the ~~[application, the director's]~~  
certification, the director or the director's designee may certify, either in writing or orally  
that the individual is in need of immediate commitment to prevent ~~[injury]~~ posing  
substantial danger to self or others.

(3) Upon receipt of the ~~[application]~~ certification required by Subsection ~~[(1)(a) and the~~  
~~certifications required by Subsections (1)(b) and (2)]~~ (2), a peace officer ~~[may take the~~  
~~individual named in the application and certificates into custody, and ]~~may transport the  
individual to a ~~[designated intermediate care facility for people with an intellectual~~  
~~disability]~~ placement designated by the division.

(4)(a) An individual committed under this section may be held for a maximum of ~~[72~~  
~~hours, excluding Saturdays, Sundays, and legal holidays. At the expiration of that~~  
~~time,]~~ 10 days, after which the individual shall be released unless proceedings for  
involuntary commitment have been commenced under Section 26B-6-608.

(b) ~~[After]~~ If proceedings for involuntary commitment have been commenced~~[ the~~  
~~individual shall be released unless an order of detention is issued in accordance with~~  
~~Section 26B-6-608]~~ , an emergency order under this section remains in effect until:

(i) the division determines that the conditions justifying commitment no longer exist;

or

(ii) a court order is issued pursuant to Section 26B-6-608.

(5)(a) If an individual is committed to the division under this section~~[ on the application~~  
~~of any person other than the individual's legal guardian, spouse, parent, or next of kin],~~  
the director or ~~[his]~~ the director's designee shall immediately give notice of the  
commitment to the individual's legal guardian~~[- spouse, parent, or next of kin],~~ if  
known.

(b)(i) Immediately after an individual is committed to the division under this section,  
the division shall inform the individual, orally and in writing, of the individual's  
right to communicate with an attorney.

(ii) If the individual desires to communicate with an attorney, the division shall take

943                   immediate steps to assist the individual in contacting and communicating with an  
944                   attorney.

945   (6)(a) The division [~~or an intermediate care facility~~] shall provide discharge instructions  
946       to each individual committed under this section at or before the time the individual is  
947       discharged from the custody of the division [~~or intermediate care facility~~],  
948       regardless of whether the individual is discharged by being released or under other  
949       circumstances.

950   (b) Discharge instructions provided under Subsection (6)(a) shall include:

- 951       (i) a summary of why the individual was committed;
- 952       (ii) detailed information about why the individual is being discharged;
- 953       (iii) a safety plan for the individual based on the individual's intellectual disability  
954           and condition;
- 955       (iv) notification to the individual's primary care provider, if applicable;
- 956       (v) if the individual is discharged without food, housing, or economic security, a  
957           referral to appropriate services, if such services exist in the individual's  
958           community;
- 959       (vi) the phone number to call or text for a crisis services hotline, and information  
960           about the availability of peer support services;
- 961       (vii) a copy of any advance directive presented to the local mental health authority, if  
962           applicable;
- 963       (viii) information about how to establish an advance directive if one was not  
964           presented to the division [~~or intermediate care facility~~];
- 965       (ix) as applicable, information about medications that were changed or discontinued  
966           during the commitment;
- 967       (x) a list of any screening or diagnostic tests conducted during the commitment;
- 968       (xi) a summary of therapeutic treatments provided during the commitment;
- 969       (xii) any laboratory work, including blood samples or imaging, that was completed or  
970           attempted during the commitment; and
- 971       (xiii) information about how to contact the division [~~or intermediate care facility~~] if  
972           needed.

973   (c) If an individual's medications were changed, or if an individual was prescribed new  
974       medications while committed under this section, discharge instructions provided  
975       under Subsection (6)(a) shall include a clinically appropriate supply of medications,  
976       as determined by a licensed health care provider, to allow the individual time to

access another health care provider or follow-up appointment.

(d) If an individual refuses to accept discharge instructions, the division~~[-or intermediate care facility]~~ shall document the refusal in the individual's medical record.

(e) If an individual's discharge instructions include referrals to services under Subsection (6)(b)(v), the division~~[-or intermediate care facility]~~ shall document those referrals in the individual's medical record.

(f) The division shall attempt to follow up with a discharged individual at least 48 hours after discharge, and may use peer support professionals when performing follow-up care or developing a continuing care plan.

Section 12. Section **26B-6-608** is amended to read:

**26B-6-608 . Involuntary commitment -- Procedures -- Necessary findings -- Periodic review.**

~~[(1) Any responsible person who has reason to know that an individual is in need of commitment, who has a belief that the individual has an intellectual disability, and who has personal knowledge of the conditions and circumstances supporting that belief, may commence proceedings for involuntary commitment by filing a written petition with the district court, or if the subject of the petition is less than 18 years old with the juvenile court, of the county in which the individual to be committed is physically located at the time the petition is filed. The application shall be accompanied by:]~~

~~[(a) a certificate of a licensed physician or a designated intellectual disability professional, stating that within a seven-day period immediately preceding the certification, the physician or designated intellectual disability professional examined the individual and believes that the individual has an intellectual disability and is in need of involuntary commitment; or]~~

~~[(b) a written statement by the petitioner that:]~~

~~[(i) states that the individual was requested to, but refused to, submit to an examination for an intellectual disability by a licensed physician or designated intellectual disability professional, and that the individual refuses to voluntarily go to the division or an intermediate care facility for people with an intellectual disability recommended by the division for treatment;]~~

~~[(ii) is under oath; and]~~

~~[(iii) sets forth the facts on which the statement is based.]~~

~~[(2) Before issuing a detention order, the court may require the petitioner to consult with personnel at the division or at an intermediate care facility for people with an intellectual~~

1011 disability and may direct a designated intellectual disability professional to interview the  
1012 petitioner and the individual to be committed, to determine the existing facts, and to  
1013 report them to the court.]

1014 [(3) The court may issue a detention order and may direct a peace officer to immediately  
1015 take the individual to an intermediate care facility for people with an intellectual  
1016 disability to be detained for purposes of an examination if the court finds from the  
1017 petition, from other statements under oath, or from reports of physicians or designated  
1018 intellectual disability professionals that there is a reasonable basis to believe that the  
1019 individual to be committed:]

1020 [(a) poses an immediate danger of physical injury to self or others;]  
1021 [(b) requires involuntary commitment pending examination and hearing;]  
1022 [(c) the individual was requested but refused to submit to an examination by a licensed  
1023 physician or designated intellectual disability professional; or]  
1024 [(d) the individual refused to voluntarily go to the division or to an intermediate care  
1025 facility for people with an intellectual disability recommended by the division.]

1026 [(4)(a) If the court issues a detention order based on an application that did not include  
1027 a certification by a designated intellectual disability professional or physician in  
1028 accordance with Subsection (1)(a), the director or his designee shall within 24 hours  
1029 after issuance of the detention order, excluding Saturdays, Sundays, and legal  
1030 holidays, examine the individual, report the results of the examination to the court  
1031 and inform the court:]

1032 [(i) whether the director or his designee believes that the individual has an intellectual  
1033 disability; and]  
1034 [(ii) whether appropriate treatment programs are available and will be used by the  
1035 individual without court proceedings.]

1036 [(b) If the report of the director or his designee is based on an oral report of the  
1037 examiner, the examiner shall immediately send the results of the examination in  
1038 writing to the clerk of the court.]

1039 [(5) Immediately after an individual is involuntarily committed under a detention order or  
1040 under Section 26B-6-607, the director or his designee shall inform the individual, orally  
1041 and in writing, of his right to communicate with an attorney. If an individual desires to  
1042 communicate with an attorney, the director or his designee shall take immediate steps to  
1043 assist the individual in contacting and communicating with an attorney.]

1044 (1)(a) Any responsible person who has reason to know that an individual is in need of

commitment, who has a belief that the individual has an intellectual disability or related condition, and who has personal knowledge of the conditions and circumstances supporting that belief, may make a referral to the division to conduct an assessment to determine if the individual meets the criteria for involuntary commitment under this section.

(b)(i) To conduct an assessment of an individual who may be in need of commitment under this section, the division shall have two designated intellectual disability professionals examine the individual.

(ii) The examinations described in Subsection (1)(b)(i) shall be conducted separately and at a suitable location not likely to have a harmful effect on the individual being examined.

(c) If the designated intellectual disability professionals who conduct the examinations described in Subsection (1)(b)(i) both believe the examined individual meets the criteria for involuntary commitment under this section, the division may file a written petition to commence involuntary commitment proceedings with the district court, or with the juvenile court if the subject of the petition is less than 18 years old, of the county in which the subject of the petition is physically located at the time the petition is filed.

(d)(i) The division shall include with a petition described in Subsection (1)(c) a certification from each of the designated intellectual disability professionals who examined the subject of the petition.

(ii) A designated intellectual disability professional's certification shall state that:

(A) within a seven-day period immediately preceding the filing of the petition, the designated intellectual disability professional examined the subject of the petition separate from the other designated intellectual disability professional; and

(B) it is the designated intellectual disability professional's belief that the subject of the petition has an intellectual disability or related condition and meets the criteria for involuntary commitment under this section.

(2)(a) If, pursuant to Title 77, Chapter 15, Defendant's Competency to Proceed, or Title 80, Chapter 6, Part 4, Competency, a prosecutor informs a court that commitment proceedings will be initiated, the prosecutor shall make a referral to the division pursuant to Subsection (1).

(b) If a prosecutor makes a referral to the division pursuant to Subsection (1), the



1079 division shall complete an assessment as described in Subsection (1)(b) within seven  
 1080 days after the day on which the prosecutor makes the referral unless the court  
 1081 enlarges the time for good cause shown.

1082 (c) Upon completion of the assessment described in Subsection (2)(b), if the designated  
 1083 intellectual disability professionals who examine the individual who is the subject of  
 1084 the referral both certify that they believe the individual meets the criteria for  
 1085 involuntary commitment under this section, the division may file a petition to  
 1086 commence involuntary commitment proceedings in accordance with Subsections  
 1087 (1)(c) and (d).

1088 ~~[(6)]~~ (3)(a) Immediately after ~~[commencement of proceedings]~~ the division files a petition  
 1089 for involuntary commitment under this section, the court shall:

1090 (i) schedule a hearing on the petition for no later than 10 days after the day on which  
 1091 the division filed the petition; and

1092 (ii) give notice of commencement of the proceedings to:

1093 ~~[(i)]~~ (A) the individual to be committed;

1094 ~~[(ii)]~~ (B) the ~~[applicant]~~ referent under Subsection (1)(a) or (2)(a), if applicable;

1095 ~~[(iii)]~~ (C) any legal guardian of the individual;

1096 ~~[(iv)]~~ (D) adult members of the individual's immediate family;

1097 ~~[(v)]~~ (E) legal counsel of the individual to be committed, if any;

1098 ~~[(vi)]~~ (F) the division; and

1099 ~~[(vii)]~~ (G) any other person to whom the individual requests, or the court  
 1100 designates, notice to be given.

1101 (b) If an individual cannot or refuses to disclose the identity of persons to be notified,  
 1102 the extent of notice shall be determined by the court.

1103 ~~[(7)]~~ (4) ~~[That notice]~~ The notice described in Subsection (3) shall:

1104 (a) set forth the allegations of the petition and all supporting facts;

1105 (b) be accompanied by a copy of ~~[any detention]~~ an emergency order issued under [  
 1106 Subsection (3)] Section 26B-6-607, if applicable; and

1107 (c) state that a hearing will be held within the time provided by law, and give the time  
 1108 and place for that hearing.

1109 ~~[(8)]~~ (5) The court may transfer the case and the custody of the individual to be committed  
 1110 to any other district court within the state~~[-if:]~~ if the individual resides in another  
 1111 jurisdiction within the state.

1112 ~~[(a) there are no appropriate facilities for persons with an intellectual disability within~~

1113 the judicial district; and]

1114 [(b) the transfer will not be adverse to the interests of the individual:]

1115 [(9)(a) Within 24 hours, excluding Saturdays, Sundays, and legal holidays, after any

1116 order or commitment under a detention order, the court shall appoint two designated

1117 intellectual disability professionals to examine the individual. If requested by the

1118 individual's counsel, the court shall appoint a reasonably available, qualified person

1119 designated by counsel to be one of the examining designated intellectual disability

1120 professionals. The examinations shall be conducted:]

1121 [(i) separately;]

1122 [(ii) at the home of the individual to be committed, a hospital, an intermediate care

1123 facility for people with an intellectual disability, or any other suitable place not

1124 likely to have a harmful effect on the individual; and]

1125 [(iii) within a reasonable period of time after appointment of the examiners by the

1126 court.]

1127 [(b) The court shall set a time for a hearing to be held within 10 court days of the

1128 appointment of the examiners. However, the court may immediately terminate the

1129 proceedings and dismiss the application if, prior to the hearing date, the examiners,

1130 the director, or his designee informs the court that:]

1131 [(i) the individual does not have an intellectual disability; or]

1132 [(ii) treatment programs are available and will be used by the individual without court

1133 proceedings.]

1134 [(10)] (6)(a)(i) Each individual has the right to be represented by counsel at the

1135 commitment hearing and in all preliminary proceedings.

1136 (ii) If neither the individual nor others provide counsel, [-]the court shall appoint

1137 counsel and allow sufficient time for counsel to consult with the individual prior

1138 to any hearing.

1139 (b) If the individual is indigent, the county in which the individual was physically

1140 located when taken into custody shall pay reasonable attorney fees as determined by

1141 the court.

1142 [(11)] (7) [The division or a designated intellectual disability professional in charge of the

1143 individual's care] Upon order of the court, the division or the division's designee shall

1144 provide all [documented information on] relevant documentation on the individual to be

1145 committed [and -]to the court [at the time of the hearing. The] and the individual's

1146 attorney[- shall have access to all documented information on the individual at the time

1147 ~~of and prior to the hearing~~].

1148 [(12)] (8)(a) The court shall provide an opportunity to the individual, the petitioner, and  
1149 all other persons to whom notice is required to be given to appear at the hearing, to  
1150 testify, and to present and cross-examine witnesses.

1151 (b) The court may, in its discretion:

1152 (i) receive the testimony of any other person;

1153 (ii) allow a waiver of the right to appear only for good cause shown;

1154 (iii) exclude from the hearing all persons not necessary to conduct the proceedings;  
1155 and

1156 (iv) upon motion of counsel, require the testimony of each examiner to be given out  
1157 of the presence of any other examiner.

1158 (c)(i) The hearing shall be conducted in as informal a manner as may be consistent  
1159 with orderly procedure, and in a physical setting that is not likely to have a  
1160 harmful effect on the individual.

1161 (ii) The Utah Rules of Evidence apply, and the hearing shall be a matter of court  
1162 record.

1163 (iii) A verbatim record of the proceedings shall be maintained.

1164 [(13)] (9) The court may order commitment if, upon completion of the hearing and  
1165 consideration of the record, [it] the court finds by clear and convincing evidence that all  
1166 of the following conditions are met:

1167 (a) the individual to be committed has an intellectual disability or a related condition;

1168 (b) because of the individual's intellectual disability or related condition, one or more of  
1169 the following conditions exist:

1170 (i) the individual poses [~~an immediate danger of physical injury~~] substantial danger to  
1171 self or others;

1172 (ii) the individual lacks the capacity to provide the basic necessities of life, such as  
1173 food, clothing, or shelter; [~~or~~]

1174 (iii) the individual is in immediate need of habilitation, rehabilitation, care, or  
1175 treatment to minimize the effects of the condition which poses a [~~threat of serious~~  
1176 ~~physical or psychological injury to the individual, and~~] risk of substantial danger to  
1177 self or others; or

1178 (iv) the individual lacks the capacity to engage in a rational decision-making process  
1179 concerning the need for habilitation, rehabilitation, care, or treatment, as  
1180 evidenced by an inability to weigh the possible costs and benefits of the care or

1181 treatment and the alternatives to it;

1182 (c) there is no appropriate, less restrictive alternative reasonably available; and

1183 (d) the division ~~[or the intermediate care facility for people with an intellectual disability~~  
1184 ~~recommended by the division in which the individual is to be committed]~~ can provide  
1185 the individual with treatment, care, habilitation, or rehabilitation that is adequate and  
1186 appropriate to the individual's condition and needs.

1187 ~~[(14)]~~ (10) In the absence of any of the required findings by the court, described in  
1188 Subsection ~~[(13)]~~ (9), the court shall dismiss the proceedings.

1189 ~~[(15)]~~ (11)(a) The order of commitment shall designate the period for which the  
1190 individual will be committed.

1191 ~~(b)~~ An initial commitment may not exceed six months. ~~[-Before the end of the initial~~  
1192 ~~commitment period, the administrator of the intermediate care facility for people with~~  
1193 ~~an intellectual disability shall commence a review hearing on behalf of the individual.]~~

1194 ~~[(b) At the conclusion of the review hearing, the court may issue an order of~~  
1195 ~~commitment for up to a one-year period.]~~

1196 ~~[(16)]~~ (12)(a) An individual committed under this part has the right to a rehearing ~~[-upon~~  
1197 ~~filing a petition with the court within 30 days after entry of the court's order. If the~~  
1198 ~~petition for rehearing alleges error or mistake in the court's findings, the]~~ if, within 15  
1199 days after the court enters the order of commitment, the individual files a petition  
1200 with the court alleging error or mistake in the court's findings.

1201 ~~(b)~~ Upon a request for rehearing filed in accordance with Subsection (12)(a), the court  
1202 shall:

1203 (i) appoint ~~[-one impartial licensed physician and]~~ two impartial designated  
1204 intellectual disability professionals who have not previously been involved in the  
1205 case to examine the individual[-] ; and

1206 (ii) schedule a rehearing to be held within 30 days after the court entered the order of  
1207 commitment.

1208 ~~(c)~~ [The] In all other respects, the rehearing shall ~~[-in all other respects,]~~ be conducted in  
1209 accordance with this part.

1210 ~~[(17)]~~ (13)(a)(i) The court shall maintain a current list of all individuals under its  
1211 orders of commitment.

1212 ~~(ii) [That list shall be reviewed in order]~~ The court shall review the list described in  
1213 Subsection (13)(a)(i) to determine those patients who have been under an order of  
1214 commitment for the designated period.

- 1215 (b) At least two weeks prior to the expiration of the designated period of any  
1216 commitment order still in effect, the court that entered the original order shall ~~[inform~~  
1217 ~~the director of the division of the impending expiration of the designated~~  
1218 ~~commitment period]~~ commence and send notice to all parties of a review hearing for  
1219 the committed individual.
- 1220 (c) Prior to the review hearing, a division-designated intellectual disability professional  
1221 shall reexamine the basis for the order of commitment and provide a report of that  
1222 reexamination to the court.
- 1223 (d) At the conclusion of a review hearing, the court may:  
1224 (i) issue an order of commitment for up to a one-year period; or  
1225 (ii) discharge the individual from involuntary commitment if the conditions justifying  
1226 commitment no longer exist.
- 1227 ~~[(e) The staff of the division shall immediately:]~~  
1228 ~~[(i) reexamine the reasons upon which the order of commitment was based and report~~  
1229 ~~the results of the examination to the court;]~~  
1230 ~~[(ii) discharge the resident from involuntary commitment if the conditions justifying~~  
1231 ~~commitment no longer exist; and]~~  
1232 ~~[(iii) immediately inform the court of any discharge.]~~
- 1233 ~~[(d)] (e) [If the director of the division reports to the court that the conditions justifying~~  
1234 ~~commitment no longer exist, and the administrator of the intermediate care facility~~  
1235 ~~for people with an intellectual disability does not discharge the individual at the end~~  
1236 ~~of the designated period, the court shall order the immediate discharge of the~~  
1237 ~~individual, unless involuntary commitment proceedings are again commenced in~~  
1238 ~~accordance with this section] If at any time during the commitment period the director~~  
1239 ~~or the director's designee determines that the conditions justifying commitment no~~  
1240 ~~longer exist, the division shall immediately discharge the individual from the~~  
1241 ~~commitment and notify the court.~~
- 1242 (f) If the division does not discharge an individual at the end of the designated period of  
1243 a commitment order, the court shall order the immediate discharge of the individual  
1244 unless involuntary commitment proceedings are commenced again in accordance  
1245 with this section.
- 1246 ~~[(e) If the director of the division, or the director's designee reports to the court that the~~  
1247 ~~conditions designated in Subsection (13) still exist, the court may extend the~~  
1248 ~~commitment order for up to one year. At the end of any extension, the individual~~

1249 must be reexamined in accordance with this section, or discharged.]

1250 [(18)] (14) When a resident is discharged under this [subsection] section, the division shall [

1251 ~~provide any further support services available and~~] continue to provide division services

1252 for which the individual is eligible and as required to meet the resident's needs.

1253 [(19)] (15)(a) The division[~~or an intermediate care facility~~] shall provide discharge

1254 instructions to each individual committed under this section at or before the time the

1255 individual is discharged from the custody of the division[~~or intermediate care facility~~],

1256 regardless of whether the individual is discharged by being released or under other

1257 circumstances.

1258 (b) Discharge instructions provided under Subsection [(19)(a)] (15)(a) shall include:

1259 (i) a summary of why the individual was committed;

1260 (ii) detailed information about why the individual is being discharged;

1261 (iii) a safety plan for the individual based on the individual's intellectual disability

1262 and condition;

1263 (iv) notification to the individual's primary care provider, if applicable;

1264 (v) if the individual is discharged without food, housing, or economic security, a

1265 referral to appropriate services, if such services exist in the individual's

1266 community;

1267 (vi) the phone number to call or text for a crisis services hotline, and information

1268 about the availability of peer support services;

1269 (vii) a copy of any advance directive presented to the local mental health authority, if

1270 applicable;

1271 (viii) information about how to establish an advance directive if one was not

1272 presented to the division[~~or intermediate care facility~~];

1273 (ix) as applicable, information about medications that were changed or discontinued

1274 during the commitment;

1275 (x) a list of any screening or diagnostic tests conducted during the commitment;

1276 (xi) a summary of therapeutic treatments provided during the commitment;

1277 (xii) any laboratory work, including blood samples or imaging, that was completed or

1278 attempted during the commitment; and

1279 (xiii) information about how to contact the division[~~or intermediate care facility~~] if

1280 needed.

1281 (c) If an individual's medications were changed, or if an individual was prescribed new

1282 medications while committed under this section, discharge instructions provided

under Subsection [(19)(a)] (15)(a) shall include a clinically appropriate supply of medications, as determined by a licensed health care provider, to allow the individual time to access another health care provider or follow-up appointment.

(d) If an individual refuses to accept discharge instructions, the division[~~-or intermediate care facility~~] shall document the refusal in the individual's medical record.

(e) If an individual's discharge instructions include referrals to services under Subsection [(19)(b)(v)] (15)(b)(v), the division[~~-or intermediate care facility~~] shall document those referrals in the individual's medical record.

(f) The division shall attempt to follow up with a discharged individual at least 48 hours after discharge, and may use peer support professionals when performing follow-up care or developing a continuing care plan.

Section 13. Section **26B-6-613** is amended to read:

**26B-6-613 . Involuntary treatment with medication -- Committee -- Findings.**

(1) If, after commitment, a resident elects to refuse treatment with medication, the director, the administrator of the intermediate care facility for people with an intellectual disability, or a designee, shall submit documentation regarding the resident's proposed treatment to a committee composed of:

(a) a licensed physician experienced in treating persons with an intellectual disability, who is not directly involved in the resident's treatment or diagnosis, and who is not biased toward any one facility;

(b) a psychologist who is a designated intellectual disability professional who is not directly involved in the resident's treatment or diagnosis; and

(c) another designated intellectual disability professional of the facility for persons with an intellectual disability, or a designee.

(2) Based upon the court's finding, under Subsection [26B-6-608(13)] 26B-6-608(9), that the resident lacks the ability to engage in a rational decision-making process regarding the need for habilitation, rehabilitation, care, or treatment, as demonstrated by evidence of inability to weigh the possible costs and benefits of treatment, the committee may authorize involuntary treatment with medication if it determines that:

(a) the proposed treatment is in the medical best interest of the resident, taking into account the possible side effects as well as the potential benefits of the medication; and

(b) the proposed treatment is in accordance with prevailing standards of accepted medical practice.

(3) In making the determination described in Subsection (2), the committee shall consider the resident's general history and present condition, the specific need for medication and its possible side effects, and any previous reaction to the same or comparable medication.

(4) Any authorization of involuntary treatment under this section shall be periodically reviewed in accordance with rules promulgated by the division.

Section 14. Section **68-3-12.5** is amended to read:

**68-3-12.5 . Definitions for Utah Code.**

(1) The definitions listed in this section apply to the Utah Code, unless:

(a) the definition is inconsistent with the manifest intent of the Legislature or repugnant to the context of the statute; or

(b) a different definition is expressly provided for the respective title, chapter, part, section, or subsection.

(2) "Adjudicative proceeding" means:

(a) an action by a board, commission, department, officer, or other administrative unit of the state that determines the legal rights, duties, privileges, immunities, or other legal interests of one or more identifiable persons, including an action to grant, deny, revoke, suspend, modify, annul, withdraw, or amend an authority, right, or license; and

(b) judicial review of an action described in Subsection (2)(a).

(3) "Administrator" includes "executor" when the subject matter justifies the use.

(4) "Advisory board," "advisory commission," and "advisory council" mean a board, commission, committee, or council that:

(a) is created by, and whose duties are provided by, statute or executive order;

(b) performs its duties only under the supervision of another person as provided by statute; and

(c) provides advice and makes recommendations to another person that makes policy for the benefit of the general public.

(5) "Armed forces" means the United States Army, Navy, Air Force, Marine Corps, Space Force, and Coast Guard.

(6) "County executive" means:

(a) the county commission, in the county commission or expanded county commission form of government established under Title 17, Chapter 52a, Changing Forms of County Government;

(b) the county executive, in the county executive-council optional form of government



- 1351 authorized by Section 17-52a-203; or
- 1352 (c) the county manager, in the council-manager optional form of government authorized
- 1353 by Section 17-52a-204.
- 1354 (7) "County legislative body" means:
- 1355 (a) the county commission, in the county commission or expanded county commission
- 1356 form of government established under Title 17, Chapter 52a, Changing Forms of
- 1357 County Government;
- 1358 (b) the county council, in the county executive-council optional form of government
- 1359 authorized by Section 17-52a-203; and
- 1360 (c) the county council, in the council-manager optional form of government authorized
- 1361 by Section 17-52a-204.
- 1362 (8) "Depose" means to make a written statement made under oath or affirmation.
- 1363 (9)(a) "Equal" means, with respect to biological sex, of the same value.
- 1364 (b) "Equal" does not mean, with respect to biological sex:
- 1365 (i) a characteristic of being the same or identical; or
- 1366 (ii) a requirement that biological sexes be ignored or co-mingled in every
- 1367 circumstance.
- 1368 (10) "Executor" includes "administrator" when the subject matter justifies the use.
- 1369 (11) "Father" means a parent who is of the male sex.
- 1370 (12) "Female" means the characteristic of an individual whose biological reproductive
- 1371 system is of the general type that functions in a way that could produce ova.
- 1372 (13) "Guardian" includes a person who:
- 1373 (a) qualifies as a guardian of a minor or incapacitated person pursuant to testamentary or
- 1374 court appointment; or
- 1375 (b) is appointed by a court to manage the estate of a minor or incapacitated person.
- 1376 (14) "Highway" includes:
- 1377 (a) a public bridge;
- 1378 (b) a county way;
- 1379 (c) a county road;
- 1380 (d) a common road; and
- 1381 (e) a state road.
- 1382 (15) "Intellectual disability" ~~[means a significant, subaverage general intellectual~~
- 1383 ~~functioning that:]~~ means the same as that term is defined in the most recent edition of the
- 1384 Diagnostic and Statistical Manual of Mental Disorders published by the American

- 1385        Psychiatric Association.
- 1386        [~~(a) exists concurrently with deficits in adaptive behavior; and]~~
- 1387        [~~(b) is manifested during the developmental period as defined in the current edition of~~
- 1388            ~~the Diagnostic and Statistical Manual of Mental Disorders, published by the~~
- 1389            ~~American Psychiatric Association.]~~
- 1390        (16) "Intermediate care facility for people with an intellectual disability" means an [
- 1391            ~~intermediate care facility for the mentally retarded, as defined in Title XIX of the Social~~
- 1392            ~~Security Act]~~ institution or distinct part thereof for people with an intellectual disability
- 1393            or related conditions, if the institution or distinct part thereof meets the requirements
- 1394            described in 42 U.S.C. Secs. 1396d(d)(1) through (3).
- 1395        (17) "Land" includes:
- 1396            (a) land;
- 1397            (b) a tenement;
- 1398            (c) a hereditament;
- 1399            (d) a water right;
- 1400            (e) a possessory right; and
- 1401            (f) a claim.
- 1402        (18) "Male" means the characteristic of an individual whose biological reproductive system
- 1403            is of the general type that functions to fertilize the ova of a female.
- 1404        (19) "Man" means an adult human male.
- 1405        (20) "Month" means a calendar month, unless otherwise expressed.
- 1406        (21) "Mother" means a parent who is of the female sex.
- 1407        (22) "Oath" includes "affirmation."
- 1408        (23) "Person" means:
- 1409            (a) an individual;
- 1410            (b) an association;
- 1411            (c) an institution;
- 1412            (d) a corporation;
- 1413            (e) a company;
- 1414            (f) a trust;
- 1415            (g) a limited liability company;
- 1416            (h) a partnership;
- 1417            (i) a political subdivision;
- 1418            (j) a government office, department, division, bureau, or other body of government; and

- 1419 (k) any other organization or entity.
- 1420 (24) "Personal property" includes:
- 1421 (a) money;
- 1422 (b) goods;
- 1423 (c) chattels;
- 1424 (d) effects;
- 1425 (e) evidences of a right in action;
- 1426 (f) a written instrument by which a pecuniary obligation, right, or title to property is
- 1427 created, acknowledged, transferred, increased, defeated, discharged, or diminished;
- 1428 and
- 1429 (g) a right or interest in an item described in Subsections (24)(a) through (f).
- 1430 (25) "Personal representative," "executor," and "administrator" include:
- 1431 (a) an executor;
- 1432 (b) an administrator;
- 1433 (c) a successor personal representative;
- 1434 (d) a special administrator; and
- 1435 (e) a person who performs substantially the same function as a person described in
- 1436 Subsections (25)(a) through (d) under the law governing the person's status.
- 1437 (26) "Policy board," "policy commission," or "policy council" means a board, commission,
- 1438 or council that:
- 1439 (a) is authorized to make policy for the benefit of the general public;
- 1440 (b) is created by, and whose duties are provided by, the constitution or statute; and
- 1441 (c) performs its duties according to its own rules without supervision other than under
- 1442 the general control of another person as provided by statute.
- 1443 (27) "Population" is shown by the most recent state or national census, unless expressly
- 1444 provided otherwise.
- 1445 (28) "Process" means a writ or summons issued in the course of a judicial proceeding.
- 1446 (29) "Property" includes both real and personal property.
- 1447 (30) "Real estate" or "real property" includes:
- 1448 (a) land;
- 1449 (b) a tenement;
- 1450 (c) a hereditament;
- 1451 (d) a water right;
- 1452 (e) a possessory right; and

- 1453 (f) a claim.
- 1454 (31) "Review board," "review commission," and "review council" mean a board,  
1455 commission, committee, or council that:
- 1456 (a) is authorized to approve policy made for the benefit of the general public by another  
1457 body or person;
- 1458 (b) is created by, and whose duties are provided by, statute; and
- 1459 (c) performs its duties according to its own rules without supervision other than under  
1460 the general control of another person as provided by statute.
- 1461 (32) "Road" includes:
- 1462 (a) a public bridge;
- 1463 (b) a county way;
- 1464 (c) a county road;
- 1465 (d) a common road; and
- 1466 (e) a state road.
- 1467 (33) "Sex" means, in relation to an individual, the individual's biological sex, either male or  
1468 female, at birth, according to distinct reproductive roles as manifested by:
- 1469 (a) sex and reproductive organ anatomy;
- 1470 (b) chromosomal makeup; and
- 1471 (c) endogenous hormone profiles.
- 1472 (34) "Signature" includes a name, mark, or sign written with the intent to authenticate an  
1473 instrument or writing.
- 1474 (35) "State," when applied to the different parts of the United States, includes a state,  
1475 district, or territory of the United States.
- 1476 (36) "Swear" includes "affirm."
- 1477 (37) "Testify" means to make an oral statement under oath or affirmation.
- 1478 (38) "Uniformed services" means:
- 1479 (a) the armed forces;
- 1480 (b) the commissioned corps of the National Oceanic and Atmospheric Administration;  
1481 and
- 1482 (c) the commissioned corps of the United States Public Health Service.
- 1483 (39) "United States" includes each state, district, and territory of the United States of  
1484 America.
- 1485 (40) "Utah Code" means the 1953 recodification of the Utah Code, as amended, unless the  
1486 text expressly references a portion of the 1953 recodification of the Utah Code as it

1487       existed:

1488       (a) on the day on which the 1953 recodification of the Utah Code was enacted; or

1489       (b)(i) after the day described in Subsection (40)(a); and

1490           (ii) before the most recent amendment to the referenced portion of the 1953

1491           recodification of the Utah Code.

1492   (41) "Vessel," when used with reference to shipping, includes a steamboat, canal boat, and

1493       every structure adapted to be navigated from place to place.

1494   (42)(a) "Veteran" means an individual who:

1495       (i) has served in the United States Armed Forces for at least 180 days:

1496           (A) on active duty; or

1497           (B) in a reserve component, to include the National Guard; or

1498       (ii) has incurred an actual service-related injury or disability while in the United

1499       States Armed Forces regardless of whether the individual completed 180 days; and

1500       (iii) was separated or retired under conditions characterized as honorable or general.

1501       (b) This definition is not intended to confer eligibility for benefits.

1502   (43) "Will" includes a codicil.

1503   (44) "Woman" means an adult human female.

1504   (45) "Writ" means an order or precept in writing, issued in the name of:

1505       (a) the state;

1506       (b) a court; or

1507       (c) a judicial officer.

1508   (46) "Writing" includes:

1509       (a) printing;

1510       (b) handwriting; and

1511       (c) information stored in an electronic or other medium if the information is retrievable

1512       in a perceivable format.

1513       Section 15. Section **77-15-2** is amended to read:

1514       **77-15-2 . Definitions.**

1515       As used in this chapter:

1516   (1) "Competency evaluation" means an evaluation conducted by a forensic evaluator to

1517       determine if an individual is competent to stand trial.

1518   (2) "Competent to stand trial" means that a defendant has:

1519       (a) a rational and factual understanding of the criminal proceedings against the

1520       defendant and of the punishment specified for the offense charged; and

- 1521 (b) the ability to consult with the defendant's legal counsel with a reasonable degree of  
1522 rational understanding in order to assist in the defense.
- 1523 (3) "Department" means the Department of Health and Human Services.
- 1524 (4) "Forensic evaluator" means a licensed mental health professional who:
- 1525 (a) is not involved in the defendant's treatment;
- 1526 (b) is trained and qualified by the department to conduct a competency evaluation, a  
1527 restoration screening, and a progress toward competency evaluation, based on  
1528 knowledge, experience, or education relating to:
- 1529 (i) intellectual functioning or psychopathology; and
- 1530 (ii) the legal system and the rights of a defendant in a criminal trial; and
- 1531 (c) if under contract with the department, demonstrates ongoing education and training  
1532 relating to forensic mental health in accordance with rules established by the  
1533 department in accordance with Title 63G, Chapter 3, Utah Administrative  
1534 Rulemaking Act.
- 1535 (5) "Incompetent to proceed" means that a defendant is not competent to stand trial as a  
1536 result of:
- 1537 (a) mental illness; or
- 1538 (b) intellectual disability.
- 1539 ~~[(6) "Intellectual disability" means an intellectual disability as defined in the current edition~~  
1540 ~~of the Diagnostic and Statistical Manual of Mental Disorders published by the American~~  
1541 ~~Psychiatric Association.]~~
- 1542 ~~[(7)]~~ (6) "Mental illness" means the same as that term is defined in Section 26B-5-301.
- 1543 ~~[(8)]~~ (7) "Petition" means a petition to request a court to determine whether a defendant is  
1544 competent to stand trial.
- 1545 ~~[(9)]~~ (8) "Progress toward competency evaluation" means an evaluation to determine  
1546 whether an individual who is receiving restoration treatment is:
- 1547 (a) competent to stand trial;
- 1548 (b) incompetent to proceed but has a substantial probability of becoming competent to  
1549 stand trial in the foreseeable future; or
- 1550 (c) incompetent to proceed and does not have a substantial probability of becoming  
1551 competent to stand trial in the foreseeable future.
- 1552 ~~[(10)]~~ (9) "Restoration treatment" means training and treatment that is:
- 1553 (a) provided to an individual who is incompetent to proceed;
- 1554 (b) tailored to the individual's particular impairment to competency; and

(c) limited to the purpose of restoring the individual to competency.

Section 16. Section **77-15-5** is amended to read:

**CHAPTER 15. DEFENDANT'S COMPETENCY TO PROCEED**

**77-15-5 . Order for hearing -- Stay of other proceedings -- Examinations of defendant -- Scope of examination and report.**

(1) A court in which criminal proceedings are pending shall stay all criminal proceedings, if:

(a) a petition is filed under Section 77-15-3 or 77-15-3.5; or

(b) the court raises the issue of the defendant's competency under Section 77-15-4.

(2) The court in which the petition described in Subsection (1)(a) is filed:

(a) shall inform the court in which criminal proceedings are pending of the petition, if the petition is not filed in the court in which criminal proceedings are pending;

(b) shall review the allegations of incompetency;

(c) may hold a limited hearing solely for the purpose of determining the sufficiency of the petition, if the court finds the petition is not clearly sufficient on its face;

(d) shall hold a hearing, if the petition is opposed by either party; and

(e) may not order an examination of the defendant or order a hearing on the mental condition of the defendant unless the court finds that the allegations in the petition raise a bona fide doubt as to the defendant's competency to stand trial.

(3)(a) If the court finds that there is a bona fide doubt as to the defendant's competency to stand trial, the court shall order the department to have one or two forensic evaluators complete a competency evaluation for the defendant in accordance with Subsection (3)(b) and provide a report to the court regarding the competency of the defendant to stand trial.

(b) The court shall order the department to have the defendant evaluated by one forensic evaluator unless:

(i) the defendant is charged with a capital felony; or

(ii) the defendant is charged with a felony that is not a capital felony, and the court determines, based on the allegations in the petition, that good cause exists to order two competency evaluations.

(c)(i) This section does not prohibit a party from seeking an additional forensic evaluator to conduct a competency evaluation of the defendant.

(ii) If a party seeks an additional competency evaluation under this Subsection (3)(c), the party shall:

(A) select the additional forensic evaluator; and

- 1589 (B) pay the costs of the additional forensic evaluator.
- 1590 (d) The stipulation by parties to a bona fide doubt as to the defendant's competency to  
1591 stand trial alone may not take the place of a competency evaluation ordered under  
1592 this Subsection (3).
- 1593 (e) In accordance with state licensing laws, the court may only order the department to  
1594 provide an initial evaluation and progress toward competency evaluation for a  
1595 defendant who is located within the state.
- 1596 (4)(a) If the petition or other information sufficiently raises concerns that the defendant  
1597 may have an intellectual disability, at least one forensic evaluator who is experienced  
1598 in assessments of intellectual disabilities shall conduct a competency evaluation.
- 1599 (b) The petitioner or other party, as directed by the court or requested by the department,  
1600 shall provide to the forensic evaluator nonmedical information and materials relevant  
1601 to a determination of the defendant's competency, including the charging document,  
1602 arrest or incident reports pertaining to the charged offense, known criminal history  
1603 information, and known prior mental health evaluations and treatments.
- 1604 (c) For purposes of a competency evaluation, a custodian of mental health records  
1605 pertaining to the defendant, including the defendant's prior mental health evaluations  
1606 or records relating to the defendant's substance use disorder, may provide the records  
1607 to:
- 1608 (i) with the defendant's consent, a forensic evaluator or the department on the  
1609 department's request; or
- 1610 (ii) a forensic evaluator by court order.
- 1611 (d) A court order under Subsection (4)(c) shall include a protective order that expires  
1612 180 days after the day on which:
- 1613 (i) the defendant is found guilty;
- 1614 (ii) the defendant enters a guilty plea;
- 1615 (iii) the court sentences the defendant; or
- 1616 (iv) if the case is appealed, the day on which the final appeal is resolved.
- 1617 (e)(i) Except as otherwise provided by law and in Subsections (4)(e)(ii) and (4)(f),  
1618 the court shall order the forensic evaluator to destroy all records subject to the  
1619 protective order within the 180 day period described in Subsection (4)(d).
- 1620 (ii) A forensic evaluator is not required to destroy the records subject to the  
1621 protective order if destroying the records is a violation of ethical standards to  
1622 which the forensic evaluator is subject for occupational licensing.



- (f) The court may extend the protective order described in Subsection (4)(d) if:
- (i) the court finds the defendant incompetent to proceed without a substantial probability that the defendant will become competent in the foreseeable future;
  - (ii) the prosecutor or another individual indicates to the court that the prosecutor or other individual will seek civil commitment of the defendant under Section 77-15-6; and
  - (iii) the court orders the records be maintained and used only for the purposes of examining the defendant in connection with the petition for civil commitment.
- (g) An order for a competency evaluation may not contain an order for any other inquiry into the mental state of the defendant that is not described in this Subsection (4).
- (5) Pending a competency evaluation, unless the court or the department directs otherwise, the defendant shall be retained in the same custody or status that the defendant was in at the time the examination was ordered.
- (6) In the conduct of a competency evaluation and in a report to the court, a forensic evaluator shall consider and address, in addition to any other factors determined to be relevant by the forensic evaluator:
- (a) ~~(f)~~ the impact of the defendant's mental illness or intellectual disability on the defendant's present ability to:
    - ~~[(A)]~~ (i) rationally and factually understand the criminal proceedings against the defendant; and
    - ~~[(B)]~~ (ii) consult with the defendant's legal counsel with a reasonable degree of rational understanding in order to assist in the defense;
  - (b) in making the determinations described in Subsection (6)(a), the forensic evaluator shall consider, as applicable~~[-]~~
    - ~~[(f)]~~ the defendant's present ability to:
      - ~~[(A)]~~ (i) understand the charges or allegations against the defendant;
      - ~~[(B)]~~ (ii) communicate facts, events, and states of mind;
      - ~~[(C)]~~ (iii) understand the range of possible penalties associated with the charges or allegations against the defendant;
      - ~~[(D)]~~ (iv) engage in reasoned choice of legal strategies and options;
      - ~~[(E)]~~ (v) understand the adversarial nature of the proceedings against the defendant;
      - ~~[(F)]~~ (vi) manifest behavior sufficient to allow the court to proceed; and
      - ~~[(G)]~~ (vii) testify relevantly, if applicable; and
  - (c) whether the defendant is exhibiting false or exaggerated physical or psychological

- 1657 symptoms relevant to the defendant's capacity to stand trial.
- 1658 (7) Upon a determination that the defendant is incompetent to proceed, the forensic  
1659 evaluator shall indicate in the report to the court:
- 1660 (a) the factors that contribute to the defendant's incompetency, including the nature of  
1661 the defendant's mental illness or intellectual disability, if any, and its relationship to  
1662 the factors contributing to the defendant's incompetency;
- 1663 (b) whether there is a substantial probability that:
- 1664 (i) restoration treatment may bring the defendant to competency to stand trial in the  
1665 foreseeable future; or
- 1666 (ii) the defendant cannot become competent to stand trial in the foreseeable future;
- 1667 (c) whether the defendant would benefit from restoration treatment; and
- 1668 (d) if the forensic evaluator makes the determination under Subsection (7)(b)(i) or (7)(c),  
1669 an explanation of the reason for the determination and a summary of the treatment  
1670 provided to the defendant in the past.
- 1671 (8)(a) A forensic evaluator shall provide an initial report to the court and the prosecuting  
1672 and defense attorneys within 30 days of the receipt of the court's order. The report  
1673 shall inform the court of the examiner's opinion concerning the competency of the  
1674 defendant to stand trial.
- 1675 (b)(i) If the forensic evaluator is unable to complete the report in the time specified in  
1676 Subsection (8)(a), the forensic evaluator shall give written notice to the court.
- 1677 (ii) A forensic evaluator who provides the notice described in Subsection (8)(b)(i)  
1678 shall receive a 15-day extension, giving the forensic evaluator a total of 45 days  
1679 after the day on which the forensic evaluator received the court's order to conduct  
1680 a competency evaluation and file a report.
- 1681 (iii) The court may further extend the deadline for completion of the evaluation and  
1682 report if the court determines that there is good cause for the extension.
- 1683 (iv) Upon receipt of an extension described in Subsection (8)(b)(iii), the forensic  
1684 evaluator shall file the report as soon as reasonably possible.
- 1685 (9) Any written report submitted by a forensic evaluator shall:
- 1686 (a) identify the case ordered for evaluation by the case number;
- 1687 (b) describe the procedures, techniques, and tests used in the examination and the  
1688 purpose or purposes for each, the time spent by the forensic evaluator with the  
1689 defendant for purposes of the examination, and the compensation to be paid to the  
1690 evaluator for the report;

- 1691 (c) state the forensic evaluator's clinical observations, findings, and opinions on each  
1692 factor described in Subsection (6); and
- 1693 (d) identify the sources of information used by the forensic evaluator and present the  
1694 basis for the forensic evaluator's clinical findings and opinions.
- 1695 (10)(a) Any statement made by the defendant in the course of any competency  
1696 examination, whether the examination is with or without the consent of the  
1697 defendant, any testimony by a forensic evaluator based upon the statement, and any  
1698 other fruits of the statement may not be admitted in evidence against the defendant in  
1699 any criminal proceeding except on an issue respecting mental condition on which the  
1700 defendant has introduced evidence, unless the evidence is relevant to a determination  
1701 of the defendant's competency.
- 1702 (b) Before examining the defendant, the forensic evaluator shall specifically advise the  
1703 defendant of the limits of confidentiality as provided under Subsection (10)(a).
- 1704 (11)(a) Upon receipt of the forensic evaluators' reports, the court shall set a date for a  
1705 competency hearing. The hearing shall be held not less than five and not more than  
1706 15 days after the day on which the court received the forensic evaluators' reports,  
1707 unless for good cause the court sets a later date.
- 1708 (b) Any person directed by the department to conduct the competency evaluation may be  
1709 subpoenaed to testify at the hearing.
- 1710 (c) The court may call any forensic evaluator to testify at the hearing who is not called  
1711 by the parties. [-]If the court calls a forensic evaluator, counsel for the parties may  
1712 cross-examine the forensic evaluator.
- 1713 (d)(i) If the forensic evaluators are in conflict as to the competency of the defendant,  
1714 all forensic evaluators should be called to testify at the hearing if reasonably  
1715 available.
- 1716 (ii) A conflict in the opinions of the forensic evaluators does not require the  
1717 appointment of an additional forensic evaluator unless the court finds good cause  
1718 for the appointment.
- 1719 (iii) If a party seeks an additional competency evaluation under this Subsection (11),  
1720 that party shall:
- 1721 (A) select the additional forensic evaluator; and  
1722 (B) pay the costs of the additional forensic evaluator.
- 1723 (12)(a)(i) A defendant shall be presumed competent to stand trial unless the court, by  
1724 a preponderance of the evidence, finds the defendant incompetent to proceed.

- 1725 (ii) The burden of proof is upon the proponent of incompetency at the hearing.
- 1726 (b) An adjudication of incompetent to proceed does not operate as an adjudication of
- 1727 incompetency to give informed consent for medical treatment or for any other
- 1728 purpose, unless specifically set forth in the court order.
- 1729 (13) In determining the defendant's competency to stand trial, the court shall consider the
- 1730 totality of the circumstances, including:
- 1731 (a) the petition;
- 1732 (b) the defendant's criminal and arrest history;
- 1733 (c) prior mental health evaluations and treatments provided to the court by the defendant;
- 1734 (d) subject to Subsection (15), whether the defendant was found incompetent to proceed
- 1735 in a criminal action unrelated to the charged offense for which the petition is filed;
- 1736 (e) the testimony of lay witnesses, if any;
- 1737 (f) the forensic evaluator's testimony and report;
- 1738 (g) the materials on which the forensic evaluator's report is based; and
- 1739 (h) any other relevant evidence or consideration bearing on the competency of the
- 1740 defendant.
- 1741 (14) If the court finds the defendant incompetent to proceed:
- 1742 (a) the court shall issue the order described in Subsection 77-15-6(1), which shall:
- 1743 (i) include findings addressing each of the factors in Subsection (6)(a);
- 1744 (ii) include a transportation order, if necessary;
- 1745 (iii) be accompanied by the forensic evaluators' reports, any psychiatric,
- 1746 psychological, or social work reports submitted to the court relative to the mental
- 1747 condition of the defendant, and any other documents made available to the court
- 1748 by either the defense or the prosecution, pertaining to the defendant's current or
- 1749 past mental condition; and
- 1750 (iv) be sent by the court to the department; and
- 1751 (b) the prosecuting attorney shall provide to the department:
- 1752 (i) the charging document and probable cause statement, if any;
- 1753 (ii) arrest or incident reports prepared by law enforcement and pertaining to the
- 1754 charged offense; and
- 1755 (iii) additional supporting documents.
- 1756 (15) The court may not find the defendant incompetent to proceed based solely on a court
- 1757 having ordered the release of the defendant under Section 77-15-3.5 or Section 77-15-6
- 1758 in an unrelated criminal action if the court in the unrelated criminal action ordered the

1759 release more than one year before the day on which the petition described in Subsection  
1760 (13)(a) is filed.

1761 (16) The court may make any reasonable order to ensure compliance with this section.

1762 (17) Failure to comply with this section does not result in the dismissal of criminal charges.

1763 Section 17. Section **77-15-6** is amended to read:

1764 **77-15-6 . Commitment on finding of incompetency to stand trial -- Subsequent**  
1765 **hearings -- Notice to prosecuting attorneys.**

1766 (1)(a) Except as provided in Subsection (5), if after a hearing a court finds a defendant to  
1767 be incompetent to proceed, the court shall order the defendant committed to the  
1768 department for restoration treatment.

1769 (b)(i) Except as provided in Subsection (1)(b)(ii), the court may recommend but may  
1770 not order placement of a defendant who is found incompetent to proceed.

1771 (ii) The court may order that the defendant be placed in a secure setting rather than a  
1772 nonsecure setting.

1773 (c) Following restoration screening, the department's designee shall designate and  
1774 inform the court of the specific placement and restoration treatment program for the  
1775 defendant.

1776 (d) Restoration treatment shall be of sufficient scope and duration to:

1777 (i) restore the defendant to competency; or

1778 (ii) determine whether the defendant can be restored to competency in the foreseeable  
1779 future.

1780 (e) A defendant who a court determines is incompetent to proceed may not be held for  
1781 restoration treatment longer than:

1782 (i) the time reasonably necessary to determine that the defendant cannot become  
1783 competent to stand trial in the foreseeable future; and

1784 (ii) the maximum period of incarceration that the defendant could receive if the  
1785 defendant were convicted of the most severe offense of the offenses charged.

1786 (2)(a) A defendant who is receiving restoration treatment shall receive a progress toward  
1787 competency evaluation, by:

1788 (i) a forensic evaluator, designated by the department; and

1789 (ii) an additional forensic evaluator, if requested by a party and paid for by the  
1790 requesting party.

1791 (b) A forensic evaluator shall complete a progress toward competency evaluation and  
1792 submit a report within 90 days after the day on which the forensic evaluator receives

1793 the commitment order from the department.

1794 (c) The report shall:

- 1795 (i) assess whether the defendant is exhibiting false or exaggerated physical or  
1796 psychological symptoms;
- 1797 (ii) describe any diagnostic instruments, methods, and observations used by the  
1798 evaluator to make the determination;
- 1799 (iii) describe the defendant's current mental illness or intellectual disability, if any;
- 1800 (iv) state the forensic evaluator's opinion as to the effect of any false or exaggerated  
1801 symptoms on the defendant's competency to stand trial;
- 1802 (v) assess the facility's or program's capacity to provide appropriate restoration  
1803 treatment for the defendant;
- 1804 (vi) assess the nature of restoration treatment provided to the defendant;
- 1805 (vii) assess what progress the defendant has made toward competency restoration,  
1806 with respect to the factors identified by the court in its initial order;
- 1807 (viii) assess whether the defendant can reasonably be restored to competency in the  
1808 foreseeable future given the restoration treatment currently being provided and the  
1809 facility's or program's capacity to provide appropriate restoration treatment for the  
1810 defendant;
- 1811 (ix) assess the likelihood of restoration to competency, the amount of time estimated  
1812 to achieve competency, or the amount of time estimated to determine whether  
1813 restoration to competency may be achieved; and
- 1814 (x) include a statement by the facility's treating physician regarding:
- 1815 (A) whether the defendant is taking any antipsychotic medication as prescribed;
- 1816 (B) whether ongoing administration of antipsychotic medication is necessary to  
1817 maintain the defendant's competency to stand trial;
- 1818 (C) whether antipsychotic medication is substantially likely to maintain the  
1819 defendant's competency to stand trial;
- 1820 (D) whether antipsychotic medication is substantially unlikely to produce side  
1821 effects which would significantly interfere with the defendant's ability to assist  
1822 in the defendant's defense;
- 1823 (E) that no less intrusive means are available, and whether any of those means  
1824 have been attempted to render the defendant competent; and
- 1825 (F) whether antipsychotic medication is medically appropriate and in the  
1826 defendant's best medical interest in light of the defendant's medical condition.

- 1827 (3)(a) The court on its own motion or upon motion by either party or the department  
1828 may appoint an additional forensic evaluator to conduct a progress toward  
1829 competency evaluation.
- 1830 (b) If the court appoints an additional forensic evaluator upon motion of a party, that  
1831 party shall pay the costs of the additional forensic evaluator.
- 1832 (4)(a) Within 15 days after the day on which the court receives the forensic evaluator's  
1833 report of the progress toward competency evaluation, the court shall hold a hearing to  
1834 review the defendant's competency.
- 1835 (b) At the hearing, the burden of proving that the defendant is competent to stand trial is  
1836 on the proponent of competency.
- 1837 (c) Following the hearing, the court shall determine by a preponderance of evidence  
1838 whether the defendant:
- 1839 (i) is competent to stand trial;
- 1840 (ii) is competent, but requires the ongoing administration of antipsychotic medication  
1841 in order to maintain the defendant's competency to stand trial;
- 1842 (iii) is incompetent to proceed, with a substantial probability that the defendant may  
1843 become competent in the foreseeable future; or
- 1844 (iv) is incompetent to proceed, without a substantial probability that the defendant  
1845 may become competent in the foreseeable future.
- 1846 (5)(a) If at any time the court determines that the defendant is competent to stand trial,  
1847 the court shall:
- 1848 (i) proceed with the trial or other procedures as may be necessary to adjudicate the  
1849 charges;
- 1850 (ii) order that the defendant be returned to the placement and status that the defendant  
1851 was in at the time when the petition for the adjudication of competency was filed  
1852 or raised by the court, unless the court determines that placement of the defendant  
1853 in a less restrictive environment is more appropriate;
- 1854 (iii) order the ongoing administration of antipsychotic medication to the defendant for  
1855 the purpose of maintaining the defendant's competency to stand trial, if the court  
1856 finds that the administration of antipsychotic medication is necessary to maintain  
1857 the defendant's competency to stand trial under Subsection (4)(c)(ii); and
- 1858 (iv) require the agency, jail, or prison with custody over the defendant to report to the  
1859 court any noncompliance with the court's orders under this Subsection (5) within  
1860 48 hours of the noncompliance.

- (b) If the court determines that the defendant is incompetent to proceed with a substantial probability that the defendant may become competent in the foreseeable future, the court may order that the defendant remain committed to the department or the department's designee for the purpose of restoration treatment.
- (c)(i) If the court determines that the defendant is incompetent to proceed without a substantial probability that the defendant may become competent in the foreseeable future, the court shall order the defendant released from commitment to the department, unless the prosecutor or another individual informs the court that civil commitment proceedings pursuant to Title 26B, Chapter 5, Health Care - Substance Use and Mental Health, or Title 26B, Chapter 6, Part 4, Division of Services for People with Disabilities, will be initiated.
- (ii) The commitment proceedings must be initiated by a petition filed within seven days after the day on which the court makes the determination described in Subsection (4)(c)(iv), unless the court finds that there is good cause to delay the initiation of the civil commitment proceedings.
- (iii) The court may order the defendant to remain committed to the department until the civil commitment proceedings conclude.
- (iv) If the defendant is civilly committed and admitted to a secure setting, the department shall provide notice to the court that adjudicated the defendant incompetent to proceed and to the prosecution agency that prosecuted the case at least [60] 15 days before any proposed release of the committed individual from the secure setting.
- (v) If the prosecution agency that prosecuted the case intends to refile charges against the committed individual:
- (A) the prosecution agency shall provide written notice of that intent to the department within 15 days after the department provides the notice described in Subsection (5)(c)(iv); and
- (B) the department shall postpone release of the committed individual for at least 30 days after the day on which the department receives the written notice of intent from the prosecution agency.
- (vi) If the prosecution agency that prosecuted the case refiles charges against the committed individual and the individual's competency is raised, the department shall postpone release of the individual until the competency proceedings conclude.



- 1895 (6)(a) At any time following the court's order under Subsection (5)(a)(iii), the defendant,  
1896 the prosecuting attorney, the department, the treating physician, or the agency, jail, or  
1897 prison with custody over the defendant, may notify the court of the need to review  
1898 the medication order under Subsection (5)(a)(iii) for continued appropriateness and  
1899 feasibility.
- 1900 (b) The court shall set the matter for a hearing if the notification under Subsection (6)(a)  
1901 establishes good cause to review the matter.
- 1902 (7) If a court, under Subsection (5)(b), extends a defendant's commitment, the court shall  
1903 schedule a competency review hearing for the earlier of:
- 1904 (a) the department's best estimate of when the defendant may be restored to competency;  
1905 or  
1906 (b) three months after the day on which the court determined under Subsection (5)(b) to  
1907 extend the defendant's commitment.
- 1908 (8) Unless the defendant is charged with a crime listed in Subsection (9), if a defendant is  
1909 incompetent to proceed by the day of the competency review hearing that follows the  
1910 extension of a defendant's commitment, the court shall:
- 1911 (a) order the defendant be:
- 1912 (i) released or temporarily detained pending civil commitment proceedings as  
1913 described in Subsection (5)(c); and  
1914 (ii) terminate the defendant's commitment to the department for restoration treatment;  
1915 or  
1916 (b) if the forensic evaluator reports to the court that there is a substantial probability that  
1917 restoration treatment will bring the defendant to competency to stand trial in the  
1918 foreseeable future, extend the defendant's commitment for restoration treatment up to  
1919 45 additional days.
- 1920 (9) If the defendant is charged with aggravated murder, murder, attempted murder,  
1921 manslaughter, or a first degree felony and the court determines that the defendant is  
1922 making reasonable progress towards restoration of competency at the time of the hearing  
1923 held pursuant to Subsection (7), the court may extend the commitment for a period not  
1924 to exceed nine months for the purpose of restoration treatment, with a mandatory review  
1925 hearing at the end of the nine-month period.
- 1926 (10) Unless the defendant is charged with aggravated murder or murder, if, at the  
1927 nine-month review hearing described in Subsection (9), the court determines that the  
1928 defendant is incompetent to proceed, the court shall:

- 1929 (a)(i) order the defendant be released or temporarily detained pending civil  
1930 commitment proceedings as provided in Subsection (5)(c); and  
1931 (ii) terminate the defendant's commitment to the department for restoration treatment;  
1932 or  
1933 (b) if the forensic evaluator reports to the court that there is a substantial probability that  
1934 restoration treatment will bring the defendant to competency to stand trial in the  
1935 foreseeable future, extend the defendant's commitment for restoration treatment for  
1936 up to 135 additional days.
- 1937 (11) If the defendant is charged with aggravated murder or murder and the court determines  
1938 that the defendant is making reasonable progress towards restoration of competency at  
1939 the time of the nine-month review hearing described in Subsection (9), the court may  
1940 extend the commitment for a period not to exceed 24 months for the purpose of  
1941 restoration treatment.
- 1942 (12) If the court extends the defendant's commitment term under Subsection (11), the court  
1943 shall hold a hearing no less frequently than at 12-month intervals following the  
1944 extension for the purpose of determining the defendant's competency status.
- 1945 (13) If, at the end of the 24-month commitment period described in Subsection (11), the  
1946 court determines that the defendant is incompetent to proceed, the court shall:  
1947 (a)(i) order the defendant be released or temporarily detained pending civil  
1948 commitment proceedings as provided in Subsection (5)(c); and  
1949 (ii) terminate the defendant's commitment to the department for restoration treatment;  
1950 or  
1951 (b) if the forensic evaluator reports to the court that there is a substantial probability that  
1952 restoration treatment will bring the defendant to competency to stand trial in the  
1953 foreseeable future, extend the defendant's commitment for restoration treatment for  
1954 up to 12 additional months.
- 1955 (14)(a) Neither release from a pretrial incompetency commitment under the provisions  
1956 of this section nor civil commitment requires dismissal of criminal charges.  
1957 (b) The court may retain jurisdiction over the criminal case and may order periodic  
1958 reviews.
- 1959 (15) A defendant who is civilly committed pursuant to Title 26B, Chapter 5, Health Care -  
1960 Substance Use and Mental Health, or Title 26B, Chapter 6, Part 4, Division of Services  
1961 for People with Disabilities, may still be adjudicated competent to stand trial under this  
1962 chapter.

- 1963 (16)(a) The remedy for a violation of the time periods specified in this section, other  
1964 than those specified in Subsection (5)(c), (8), (10), or (13), shall be a motion to  
1965 compel the hearing, or mandamus, but not release from detention or dismissal of the  
1966 criminal charges.
- 1967 (b) The remedy for a violation of the time periods specified in Subsection (5)(c), (8), (9),  
1968 or (13), or is not dismissal of the criminal charges.
- 1969 (17) In cases in which the treatment of the defendant is precluded by court order for a  
1970 period of time, that time period may not be considered in computing time limitations  
1971 under this section.
- 1972 (18)(a) If, at any time, the defendant becomes competent to stand trial while the  
1973 defendant is committed to the department, the clinical director of the Utah State  
1974 Hospital, the department, or the department's designee shall certify that fact to the  
1975 court.
- 1976 (b) The court shall conduct a competency review hearing:
- 1977 (i) within 15 working days after the day on which the court receives the certification  
1978 described in Subsection (18)(a); or
- 1979 (ii) within 30 working days after the day on which the court receives the certification  
1980 described in Subsection (18)(a), if the court determines that more than 15 working  
1981 days are necessary for good cause related to the defendant's competency.
- 1982 (19) The court may order a hearing at any time on the court's own motion or upon  
1983 recommendations of the clinical director of the Utah State Hospital or other facility or  
1984 the department.
- 1985 (20) Notice of a hearing on competency to stand trial shall be given to the prosecuting  
1986 attorney and all counsel of record.
- 1987 Section 18. Section **77-19-203** is amended to read:
- 1988 **77-19-203 . Petition for inquiry as to competency to be executed -- Filing --**  
1989 **Contents -- Successive petitions.**
- 1990 (1) If an inmate who has been sentenced to death is or becomes incompetent to be executed,  
1991 a petition under Subsection (2) may be filed in the district court of the county where the  
1992 inmate is confined.
- 1993 (2) The petition shall:
- 1994 (a) contain a certificate stating that it is filed in good faith and on reasonable grounds to  
1995 believe the inmate is incompetent to be executed; and
- 1996 (b) contain a specific recital of the facts, observations, and conversations with the inmate

1997 that form the basis for the petition.

1998 (3) The petition may be based upon knowledge or information and belief and may be filed  
1999 by the inmate alleged to be incompetent, legal counsel for the inmate, or by an attorney  
2000 representing the state.

2001 (4) Before ruling on a petition filed by an inmate or his counsel alleging that the inmate is  
2002 incompetent to be executed, the court shall give the state and the Department of  
2003 Corrections an opportunity to respond to the allegations of incompetency.

2004 (5) If a petition is filed after an inmate has previously been found competent under either  
2005 this chapter or under [~~Title 77, Chapter 15, Inquiry into Sanity of Defendant~~] Chapter 15,  
2006 Defendant's Competency to Proceed, no further hearing on competency may be granted  
2007 unless the successive petition:

2008 (a) alleges with specificity a substantial change of circumstances subsequent to the  
2009 previous determination of competency; and

2010 (b) is sufficient to raise a significant question about the inmate's competency to be  
2011 executed.

2012 Section 19. Section **77-29-3** is amended to read:

2013 **77-29-3 . Chapter inapplicable to incompetent persons.**

2014 The provisions of this chapter shall not apply to any person while adjudged to be  
2015 incompetent to proceed under [~~Chapter 15, Inquiry into Sanity of Defendant~~] Chapter 15,  
2016 Defendant's Competency to Proceed.

2017 Section 20. Section **80-6-402** is amended to read:

2018 **80-6-402 . Procedure -- Standard.**

2019 (1) When a written motion is filed in accordance with Section 80-6-401 [-]raising the issue  
2020 of a minor's competency to proceed, or when the juvenile [-]court raises the issue of a  
2021 minor's competency to proceed, the juvenile court shall stay all proceedings under this  
2022 chapter .

2023 (2)(a) If a motion for inquiry is opposed by either party, the juvenile [-]court shall,  
2024 before granting or denying the motion, hold a limited hearing solely for the purpose  
2025 of determining the sufficiency of the motion.

2026 (b) If the juvenile [-]court finds that the allegations of incompetency raise a bona fide  
2027 doubt as to the minor's competency to proceed, the juvenile court shall:

2028 (i) enter an order for an evaluation of the minor's competency to proceed; and

2029 (ii) set a date for a hearing on the issue of the minor's competency.

2030 (3)(a) After the granting of a motion, and before a full competency hearing, the juvenile [-]

2031 court may order the department to evaluate the minor and to report to the juvenile [-]  
2032 court concerning the minor's mental condition.

2033 (b) In accordance with state licensing laws, the court may only order the department to  
2034 provide an initial evaluation and progress toward competency evaluation for a minor  
2035 who is located within the state.

2036 (4) The minor shall be evaluated by a forensic evaluator who:

- 2037 (a) has experience in juvenile forensic evaluations and juvenile brain development;
- 2038 (b) if it becomes apparent that the minor is not competent due to an intellectual disability
- 2039 or related condition, has experience in intellectual disability or related conditions; and
- 2040 (c) is not involved in the current treatment of the minor.

2041 (5) The petitioner or other party, as directed by the juvenile court, shall provide all  
2042 information and materials relevant to a determination of the minor's competency to the  
2043 department within seven days of the juvenile court's order, including:

- 2044 (a) the motion;
- 2045 (b) the arrest or incident reports pertaining to the charged offense;
- 2046 (c) the minor's known delinquency history information;
- 2047 (d) the minor's probation record relevant to competency;
- 2048 (e) known prior mental health evaluations and treatments; and
- 2049 (f) consistent with 20 U.S.C. Sec. 1232g (b)(1)(E)(ii)(I), records pertaining to the
- 2050 minor's education.

2051 (6)(a) The minor's parent or guardian, the prosecuting attorney, the defense attorney, and  
2052 the attorney guardian ad litem, shall cooperate, by executing releases of information  
2053 when necessary, in providing the relevant information and materials to the forensic  
2054 evaluator, including:

- 2055 (i) medical records;
- 2056 (ii) prior mental evaluations; or
- 2057 (iii) records of diagnosis or treatment of substance abuse disorders.

2058 (b) The minor shall cooperate, by executing a release of information when necessary, in  
2059 providing the relevant information and materials to the forensic evaluator regarding  
2060 records of diagnosis or treatment of a substance abuse disorder.

2061 (7)(a) In conducting the evaluation and in the report determining if a minor is competent  
2062 to proceed, the forensic evaluator shall inform the juvenile court of the forensic  
2063 evaluator's opinion whether:

- 2064 (i) the minor has a present ability to consult with counsel with a reasonable degree of

- 2065                   rational understanding; and
- 2066                   (ii) the minor has a rational as well as factual understanding of the proceedings.
- 2067       (b) In evaluating the minor, the forensic evaluator shall consider the minor's present
- 2068           ability to:
- 2069           (i) understand the charges or allegations against the minor;
- 2070           (ii) communicate facts, events, and states of mind;
- 2071           (iii) understand the range of possible penalties associated with the allegations against
- 2072               the minor;
- 2073           (iv) engage in reasoned choice of legal strategies and options;
- 2074           (v) understand the adversarial nature of the proceedings against the minor;
- 2075           (vi) manifest behavior sufficient to allow the juvenile court to proceed;
- 2076           (vii) testify relevantly; and
- 2077           (viii) any other factor determined to be relevant to the forensic evaluator.
- 2078   (8)(a) The forensic evaluator shall provide an initial report to the juvenile court, the
- 2079           prosecuting and defense attorneys, and the attorney guardian ad litem, if applicable,
- 2080           within 30 days of the receipt of the juvenile court's order.
- 2081       (b) If the forensic evaluator informs the juvenile court that additional time is needed, the
- 2082           juvenile court may grant, taking into consideration the custody status of the minor, up
- 2083           to an additional 15 days to provide the report to the juvenile court and counsel.
- 2084       (c) The forensic evaluator must provide the report within 45 days from the receipt of the
- 2085           juvenile court's order unless, for good cause shown, the juvenile court authorizes an
- 2086           additional period of time to complete the evaluation and provide the report.
- 2087       (d) The report shall inform the juvenile court of the forensic evaluator's opinion
- 2088           concerning the minor's competency.
- 2089   (9) If the forensic evaluator's opinion is that the minor is not competent to proceed, the
- 2090           report shall indicate:
- 2091       (a) the nature of the minor's:
- 2092           (i) mental illness;
- 2093           (ii) intellectual disability or related condition; or
- 2094           (iii) developmental immaturity;
- 2095       (b) the relationship of the minor's mental illness, intellectual disability, related condition,
- 2096           or developmental immaturity to the minor's incompetence;
- 2097       (c) whether there is a substantial likelihood that the minor may attain competency in the
- 2098           foreseeable future;

- 2099 (d) the amount of time estimated for the minor to achieve competency if the minor  
2100 undergoes competency attainment treatment, including medication;
- 2101 (e) the sources of information used by the forensic evaluator; and
- 2102 (f) the basis for clinical findings and opinions.
- 2103 (10) Regardless of whether a minor consents to a competency evaluation, any statement  
2104 made by the minor in the course of the competency evaluation, any testimony by the  
2105 forensic evaluator based upon any statement made by the minor in the competency  
2106 evaluation, and any other fruits of the statement made by the minor in the competency  
2107 evaluation:
- 2108 (a) may not be admitted in evidence against the minor in a proceeding under this  
2109 chapter, except the statement may be admitted on an issue respecting the mental  
2110 condition on which the minor has introduced evidence; and
- 2111 (b) may be admitted where relevant to a determination of the minor's competency.
- 2112 (11) Before evaluating the minor for a competency evaluation, a forensic evaluator shall  
2113 specifically advise the minor, and the minor's parent or guardian if reasonably available,  
2114 of the limits of confidentiality as provided under Subsection (10).
- 2115 (12) When the report is received, the juvenile court shall set a date for a competency  
2116 hearing that shall be held in not less than five and not more than 15 days, unless the  
2117 juvenile court enlarges the time for good cause.
- 2118 (13)(a) A minor shall be presumed competent unless the juvenile court, by a  
2119 preponderance of the evidence, finds the minor not competent to proceed.
- 2120 (b) The burden of proof is upon the proponent of incompetency to proceed.
- 2121 (14)(a) Following the hearing, the juvenile court shall determine by a preponderance of  
2122 evidence whether the minor is:
- 2123 (i) competent to proceed;
- 2124 (ii) not competent to proceed with a substantial probability that the minor may attain  
2125 competency in the foreseeable future; or
- 2126 (iii) not competent to proceed without a substantial probability that the minor may  
2127 attain competency in the foreseeable future.
- 2128 (b) If the juvenile court enters a finding described in Subsection (14)(a)(i), the juvenile  
2129 court shall proceed with the proceedings in the minor's case.
- 2130 (c) If the juvenile court enters a finding described in Subsection (14)(a)(ii), the juvenile  
2131 court shall proceed in accordance with Section 80-6-403.
- 2132 (d)(i) If the juvenile court enters a finding described in Subsection (14)(a)(iii), the

juvenile court shall terminate the competency proceeding, dismiss the charges against the minor without prejudice, and release the minor from any custody order related to the pending proceeding, unless the prosecutor informs the court that commitment proceedings will be initiated in accordance with:

(A) Title 26B, Chapter 6, Part 6, Admission to an Intermediate Care Facility for People with an Intellectual Disability;

(B) if the minor is 18 years old or older, Title 26B, Chapter 5, Part 3, Utah State Hospital and Other Mental Health Facilities; or

(C) if the minor is a child, Title 26B, Chapter 5, Part 4, Commitment of Persons Under Age 18.

(ii) The commitment proceedings described in Subsection (14)(d)(i) shall be initiated within seven days after the day on which the juvenile court enters the order under Subsection (14)(a), unless the court enlarges the time for good cause shown.

(iii) The juvenile court may order the minor to remain in custody until the commitment proceedings have been concluded.

(15) If the juvenile court finds the minor not competent to proceed, the juvenile court's order shall contain findings addressing each of the factors in Subsection (7)(b).

Section 21. Section **80-6-403** is amended to read:

**80-6-403 . Disposition on finding of not competent to proceed -- Subsequent hearings -- Notice to prosecuting attorneys.**

(1) If the juvenile court determines that the minor is not competent to proceed, and there is a substantial likelihood that the minor may attain competency in the foreseeable future, the juvenile court shall notify the department of the finding and allow the department 30 days to develop an attainment plan for the minor.

(2) The attainment plan shall include:

(a) any services or treatment the minor has been or is currently receiving that are necessary to attain competency;

(b) any additional services or treatment the minor may require to attain competency;

(c) an assessment of the parent, custodian, or guardian's ability to access or provide any recommended treatment or services;

(d) any special conditions or supervision that may be necessary for the safety of the minor or others during the attainment period; and

(e) the likelihood that the minor will attain competency and the amount of time likely required for the minor to attain competency.



- 2167 (3) The department shall provide the attainment plan to the juvenile court, the prosecuting  
2168 attorney, the defense attorney, and the attorney guardian ad litem at least three days  
2169 before the competency disposition hearing.
- 2170 (4)(a) During the attainment period, the minor shall remain in the least restrictive  
2171 appropriate setting.
- 2172 (b) A finding of not competent to proceed does not grant authority for a juvenile court to  
2173 place a minor in the custody of a division of the department, or create eligibility for  
2174 services from the Division of Services for People With Disabilities.
- 2175 (c) If the juvenile court orders the minor to be held in detention during the attainment  
2176 period, the juvenile court shall make the following findings on the record:  
2177 (i) the placement is the least restrictive appropriate setting;  
2178 (ii) the placement is in the best interest of the minor;  
2179 (iii) the minor will have access to the services and treatment required by the  
2180 attainment plan in the placement; and  
2181 (iv) the placement is necessary for the safety of the minor or others.
- 2182 (d) A juvenile court shall terminate an order of detention related to the pending  
2183 proceeding for a minor who is not competent to proceed in that matter if:  
2184 (i) the most severe allegation against the minor if committed by an adult is a class B  
2185 misdemeanor;  
2186 (ii) more than 60 days have passed after the day on which the juvenile court  
2187 adjudicated the minor not competent to proceed; and  
2188 (iii) the minor has not attained competency.
- 2189 (5)(a) At any time that the minor becomes competent to proceed during the attainment  
2190 period, the department shall notify the juvenile court, the prosecuting attorney, the  
2191 defense attorney, and the attorney guardian ad litem.
- 2192 (b) The juvenile court shall hold a hearing with 15 business days of notice from the  
2193 department described in Subsection (5)(a).
- 2194 (6)(a) If at any time during the attainment period the juvenile court finds that there is not  
2195 a substantial probability that the minor will attain competency in the foreseeable  
2196 future, the juvenile court shall terminate the competency proceeding, dismiss the  
2197 petition or information without prejudice, and release the minor from any custody  
2198 order related to the pending proceeding, unless the prosecuting attorney or any other  
2199 individual informs the juvenile court that commitment proceedings will be initiated in  
2200 accordance with:

- 2201 (i) Title 26B, Chapter 6, Part 6, Admission to an Intermediate Care Facility for  
2202 People with an Intellectual Disability;
- 2203 (ii) if the minor is 18 years old or older, Title 26B, Chapter 5, Part 3, Utah State  
2204 Hospital and Other Mental Health Facilities; or
- 2205 (iii) if the minor is a child, Title 26B, Chapter 5, Part 4, Commitment of Persons  
2206 Under Age 18.
- 2207 (b) The prosecuting attorney shall initiate the proceedings described in Subsection (6)(a)  
2208 within seven days after the juvenile court's order, unless the juvenile court enlarges  
2209 the time for good cause shown.
- 2210 (7) During the attainment period, the juvenile court may order a hearing or rehearing at  
2211 anytime on the juvenile court's own motion or upon recommendation of any interested  
2212 party or the department.
- 2213 (8)(a) Within three months of the juvenile court's approval of the attainment plan, the  
2214 department shall provide a report on the minor's progress towards competence.
- 2215 (b) The report described in Subsection (8)(a) shall address the minor's:
- 2216 (i) compliance with the attainment plan;
- 2217 (ii) progress towards competency based on the issues identified in the original  
2218 competency evaluation; and
- 2219 (iii) current mental illness, intellectual disability or related condition, or  
2220 developmental immaturity, and need for treatment, if any, and whether there is  
2221 substantial likelihood of the minor attaining competency within six months.
- 2222 (9)(a) Within 30 days of receipt of the report, the juvenile court shall hold a hearing to  
2223 determine the minor's current status.
- 2224 (b) At the hearing, the burden of proving the minor is competent is on the proponent of  
2225 competency.
- 2226 (c) The juvenile court shall determine by a preponderance of the evidence whether the  
2227 minor is competent to proceed.
- 2228 (10) If the minor has not attained competency after the initial three month attainment period  
2229 but is showing reasonable progress towards attainment of competency, the juvenile court  
2230 may extend the attainment period up to an additional three months.
- 2231 (11) The department shall provide an updated juvenile competency evaluation at the  
2232 conclusion of the [~~six-month~~] extended attainment period under Subsection (10) to advise  
2233 the juvenile court on the minor's current competency status.
- 2234 (12) If the minor does not attain competency within six months after the juvenile court

2235 initially finds the minor not competent to proceed, the court shall terminate the  
2236 competency proceedings and dismiss the petition or information filed without prejudice,  
2237 unless good cause is shown that there is a substantial likelihood the minor will attain  
2238 competency within one year from the initial finding of not competent to proceed.

2239 (13) In the event a minor has an unauthorized leave lasting more than 24 hours, the  
2240 attainment period shall toll until the minor returns.

2241 (14)(a) Regardless of whether a minor consents to attainment, any statement made by  
2242 the minor in the course of attainment, any testimony by the forensic evaluator based  
2243 upon any statement made by the minor in the course of attainment, and any other  
2244 fruits of a statement made by the minor in the course of attainment:

2245 (i) may not be admitted in evidence against the minor in a proceeding under this  
2246 chapter, except the statement may be admitted on an issue respecting the mental  
2247 condition on which the minor has introduced evidence; and

2248 (ii) may be admitted where relevant to a determination of the minor's competency.

2249 (b) Before evaluating the minor during the attainment period, a forensic evaluator shall  
2250 specifically advise the minor, and the minor's parent or guardian if reasonably  
2251 available, of the limits of confidentiality provided in Subsection (14)(a).

2252 Section 22. **Effective Date.**

2253 This bill takes effect on May 7, 2025.