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## The Commonwealth of Massachusetts

#### PRESENTED BY:

### Kenneth J. Donnelly

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act relative to assisted outpatient treatment.

#### PETITION OF:

NAME:

Kenneth J. Donnelly

DISTRICT/ADDRESS:

Fourth Middlesex

# SENATE DOCKET, NO. 930 FILED ON: 1/17/2013 SENATE No. 906

By Mr. Donnelly, a petition (accompanied by bill, Senate, No. 906) of Kenneth J. Donnelly for legislation relative to assisted outpatient treatment. Mental Health and Substance Abuse.

# The Commonwealth of Massachusetts

In the Year Two Thousand Thirteen

An Act relative to assisted outpatient treatment.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

SECTION 1. Section 1 of chapter 123 of the General Laws, as appearing in the 2004
 Official Edition, is hereby amended by inserting, in line 18, after the word "program" the
 following:-

"Gravely disabled" means a condition evidenced by behavior in which a person, as a
result of a mental disorder, becomes likely to come to serious harm or serious illness because of
his inability to provide for his basic physical needs, including medical and psychiatric treatment
and shelter.

8 SECTION 2. Section 1 of said chapter 123, as so appearing, is amended by inserting, in 9 line 20, after the word "review" the following:-

10 "Informed decision" means a voluntary decision following presentation of all facts 11 necessary to form the basis of an intelligent consent by a patient, or guardian, who is aware of 12 the effects of his psychiatric disorder and has the capacity to make a well-reasoned, willful, and 13 knowing decision concerning his medical or psychiatric treatment.

14 "Outpatient Treatment" means any treatment that does not require continuous inpatient15 hospitalization.

SECTION 3. Section 6 of said chapter 123, as so appearing, is amended by inserting, in
 line 2, after the words "provisions of" the following: - paragraph (e) of section 8<sup>1</sup>/<sub>2</sub>,

SECTION 4. Chapter 123 of the General Laws, as so appearing, is amended by inserting,
 after section 7, the following new section:-

20 21 22 23 24 25 26 27	Section 71/2. (a) Any physician licensed pursuant to section 2 of chapter 112 after examining a patient; the Department of Mental Health; any person eighteen years of age or older with whom the subject of the petition resides; the parent, spouse, sibling eighteen years of age or older, or child eighteen years of age or older of the subject of the petition; or the superintendent of any public or private facility or hospital authorized for the commitment or treatment of mentally ill persons under section 8(a) or 12(a) of this chapter, may petition the district court in whose jurisdiction the facility is located for the assisted outpatient treatment of any individual who (1) is mentally ill, and (2) displays one or more of the following:
28	(i) likelihood of creating serious harm, or
29	(ii) incapacity to make an informed decision regarding treatment, or
30	(iii) grave disability, and
31	(3) the patient's condition will likely either deteriorate or not improve without treatment.
32 33 34 35	(c) The petition shall include a written outpatient treatment plan prepared in consultation with, when possible, those familiar with the patient's case history and the superintendent or physician in charge of the patient's care and the patient. The plan shall include each of the following:
36 37	(1) A statement of the patient's requirements for supervision, medication, and assistance in obtaining the basic needs such as employment, food, clothing, and shelter.
38 39	(2) If known, the address of the residence where the patient resides and the name of the person(s) in charge of the residence.
40 41	(3) If known, the name and address of any person, agency, or organization assigned to supervise an outpatient treatment plan or care for the patient.
42 43	(4) The conditions for continued outpatient treatment, which may require reporting, continuation of medication, submission to testing, or other such reasonable conditions.
44 45 46 47 48	(d) The hearing shall be commenced within 4 days of the filing of the petition. The periods of time prescribed or allowed under the provisions of this section shall be computed pursuant to Rule 6 of the Massachusetts Rules of Civil Procedure. Adjournments shall be permitted only for good cause shown. In granting adjournments, the court shall consider the need for further examination by a physician or the potential need to provide treatment expeditiously.
49 50	(e) A petition for assisted outpatient treatment may be filed along with and in the alternative to a petition for inpatient commitment brought pursuant to section 7.
51 52	SECTION 5. Chapter 123 of the General Laws, as so appearing, is hereby amended by inserting, after section 8, the following section:-

53 54 55 56	Section 8 1/2. (a) After a hearing, unless the subject waives the hearing in writing, the district court shall not order the commitment of a person to outpatient treatment or shall not renew such order unless it finds (1) the patient is mentally ill, and (2) the illness results in one or more of the following:
57	(i) likelihood of creating serious harm, or
58	(ii) incapacity to make an informed decision regarding treatment, or
59	(iii) grave disability, and
60 61 62	(3) the patient does not require continuous inpatient hospitalization, and will be more appropriately treated in an outpatient treatment program, and (4) the patient's condition will either:
63 64 65 66	(i) likely deteriorate until his or her psychiatric disorder significantly impairs the person's judgment, reason, behavior or capacity to recognize reality and has a substantial probability of causing him or her to suffer or continue to suffer severe psychiatric, emotional or physical harm, or
67 68	(ii) not improve without treatment and such deterioration could result in harm to the patient or others.
69 70 71 72	(b) Assisted outpatient treatment shall not be ordered unless the court approves a written treatment plan presented to the court which conforms to the requirements of section 71 /2; of this chapter, and which contains the name of the designated director of the mental health treatment agency that will supervise and administer the patient's treatment program.
73 74 75	(c) The court may order only that portion of the treatment plan submitted pursuant to section 71/2 of this chapter which, considering all available alternatives for treatment, it determines appropriate and the least restrictive treatment alternative available.
76 77 78	(d) If the court finds by clear and convincing evidence that the subject of the petition meets the criteria for assisted outpatient treatment, , the court may order the director of appropriate treatment program to oversee such plan.
79 80	(e) The first order for assisted outpatient treatment shall not exceed 180 days, and any subsequent order shall not exceed 365 days.
81 82	(f) If the court orders outpatient treatment pursuant to this section, all of the following will apply:
83 84 85	(1) During any period of the assisted outpatient treatment, if the court, on motion by the supervising mental health professional in charge of a patient's assisted outpatient treatment, determines that the patient is not complying with the terms of the order and that the outpatient
	3 of 5

86 plan no longer remains appropriate, the court may enter an order amending its original order. The

87 amended order may alter the outpatient treatment plan, or request an emergency evaluation to

88 determine whether the failure to hospitalize such person would create a likelihood of serious

89 harm.

90 (2) If a patient refuses to comply with an amended outpatient plan, further amendments
91 may be made as the court deems necessary including the inpatient commitment of the patient
92 where the court finds that failure to hospitalize such person would create a likelihood of serious
93 harm.

94 (3) If the court determines the person meets the standard for inpatient commitment and
95 the patient refuses to comply with an amended order, the court may authorize and direct a peace
96 officer to take the patient into protective custody and transport him to the agency specified for
97 inpatient treatment.

98 (4) When reporting or being returned to a treatment facility for inpatient treatment
99 pursuant to an amended order, the patient shall retain all rights to judicial review, and the right to
100 counsel.

SECTION 6. Chapter 123 of the General Laws, as so appearing, is hereby amended byinserting, after section 8, the following section-

Section 8 <sup>3</sup>/<sub>4</sub>. (a) Before commitment for outpatient treatment, the patient shall be
 provided with copies of the court order and full explanations of the approved treatment plan. The
 approved treatment plan shall be filed with the court and the supervising mental health
 professional in charge of the patient's outpatient treatment.

(b) The supervising mental health professional shall require periodic reports, not more
 frequently than every 30 days, concerning the condition of patients committed to outpatient
 treatment from any person, agency, or organization assigned to supervise such patients.

(c) The supervising mental health professional shall review the condition of a patientcommitted to outpatient treatment at least once every 30 days.

(d) The supervising mental health professional may amend any part of the outpatient
treatment plan during the course of commitment, subject to judicial review after notice to and
objection of the patient.

(e) The supervising mental health professional may, at any time during the course of the
ordered outpatient treatment, petition the court for inpatient commitment of the patient if, in the
supervising mental health professional's judgment, the patient has failed to comply with a term of
the outpatient treatment plan and outpatient treatment no longer remains appropriate.

(f) The supervising mental health professional may, at any time, petition the court for
 termination of a patient's assisted outpatient treatment order if the supervising mental health
 professional determines that assisted outpatient treatment is no longer the least restrictive
 appropriate treatment available.

(g) Nothing in this section shall prevent the supervising mental health professional from
 authorizing involuntary commitment and treatment in an emergency under section 12 of this
 chapter.

SECTION 7. Section 9 of said chapter 123 of the General Laws, as so appearing, is
hereby amended by inserting, in line 37, after the words "of section eight B." the following:Any person may apply to the court stating his or her belief that a person currently treated on an
assisted outpatient basis under section 8 1/2 should no longer be so treated.