

**SENATE . . . . . No. 942**

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**The Commonwealth of Massachusetts**

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PRESENTED BY:

***Cindy F. Friedman***

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*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 to provide critical community services.

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PETITION OF:

NAME:

*Cindy F. Friedman*

DISTRICT/ADDRESS:

*Fourth Middlesex*

**SENATE . . . . . No. 942**

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By Ms. Friedman, a petition (accompanied by bill, Senate, No. 942) of Cindy F. Friedman for legislation to provide critical community services. The Judiciary.

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**The Commonwealth of Massachusetts**

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**In the One Hundred and Ninety-First General Court  
(2019-2020)**  
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An Act to provide critical community services.

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

1           SECTION 1. Section 1 of chapter 123 of the General Laws, as appearing in the 2016  
2 Official Edition, is hereby amended by inserting after the word “health.”, in line 4, the following  
3 words:-

4           “Critical community health services”, health, behavioral health and social services that  
5 can be provided in a community setting and do not require continuous inpatient hospitalization.

6           “Critical community health service treatment plan”, a plan defining a set of health,  
7 behavioral health or social services delivered to an individual.

8           SECTION 2. Said section 1 of said chapter 123, as so appearing, is hereby further  
9 amended by inserting after the word “program.”, in line 18, the following words:-

10           “Gravely disabled”, a condition evidenced by behavior in which a person, as a result of a  
11 mental illness, is at substantial risk of inflicting serious harm to self or others, and has shown an

12 inability to provide for their basic physical needs, including medical and psychiatric treatment  
13 and shelter, because of the mental illness.

14 SECTION 3. Said section 1 of said chapter 123, as so appearing is hereby further  
15 amended by inserting after the word “facility.”, in line 92, the following words:-

16 “Supervising mental health professional”, a mental health services provider who is  
17 required pursuant to such practice to obtain a license from the commonwealth or who, at the  
18 discretion of the court, is deemed suitable to supervise a critical community health service  
19 treatment plan.

20 SECTION 4. Said chapter 123 is hereby further amended by inserting after section 8 the  
21 following section:-

22 Section 8 1/2. (a) Any physician licensed pursuant to section 2 of chapter 112 after  
23 examining an individual, the department of mental health, any person age 18 or older with whom  
24 the individual resides, the parent, spouse, sibling age 18 or older, child age 18 or older of the  
25 individual, the superintendent of any public or private facility or hospital authorized for the  
26 commitment or treatment of individuals with a mental illness , or the medical director of the  
27 Bridgewater state hospital, may petition for an order of a critical community health service  
28 treatment plan in the district court in whose jurisdiction a facility is located that shall provide  
29 such services, for any individual who:

30 (1) has a mental illness;

31 (2) is at least 18 years old; and

32 (3) meets the following criteria:

33 (i) is gravely disabled;

34 (ii) has a history of lack of compliance with treatment for mental illness that, prior to the  
35 filing of the petition, has been a significant factor in: (A) necessitating, at least twice within the  
36 previous 36 months, hospitalization or receipt of mental health services in a forensic or  
37 department of correction facility or house of corrections or the Bridgewater state hospital; or (B)  
38 the commission of one or more acts of serious violent behavior toward self or others or threats  
39 of, or attempts at, serious physical harm to self or others within the previous 36 months;

40 (iii) based on the individual's treatment history and current behavior, is in need of critical  
41 community health services in order to prevent a relapse or deterioration which would likely  
42 result in serious harm to the individual or others; and

43 (iv) is likely to benefit from critical community health services.

44 The petition shall include a written critical community health service treatment plan,  
45 hereinafter "plan," prepared in consultation with, when possible, those familiar with the  
46 individual, the superintendent or physician in charge of the care of the individual or those  
47 familiar with the case history of the individual. The plan shall include:

48 (1) a statement of the requirements for supervision, medication, and assistance in  
49 obtaining basic necessities such as employment, food, clothing, and shelter;

50 (2) if known, the address of the residence where the individual resides and the name of  
51 the person or persons in charge of the residence;

52 (3) if known, the name and address of any person, agency, or organization assigned to  
53 supervise a critical community health service treatment plan or care for the individual; and

54 (4) the conditions for continued receipt of critical community health services, which may  
55 require reporting, continuation of medication, submission to testing, or other reasonable  
56 conditions.

57 (b) A petition for critical community health services may be filed along with, and as an  
58 alternative to, a petition for inpatient commitment under section 7.

59 (c) A hearing shall be commenced within 4 days of the filing of the petition. The periods  
60 of time prescribed or allowed under the provisions of this section shall be computed pursuant to  
61 Rule 6 of the Massachusetts Rules of Civil Procedure. Adjournments shall be permitted only for  
62 good cause shown. In granting adjournments, the court shall consider the need for further  
63 examination by a physician or the potential need to provide treatment expeditiously.

64 (d) A court may not issue a critical community health service treatment plan unless it  
65 finds that providing critical community health services is the least restrictive alternative available  
66 to the person.

67 (e) If, after the hearing, the court finds by clear and convincing evidence that the  
68 individual who is the subject of the petition meets the criteria for critical community health  
69 services included in subsection (a), the court may order the supervising mental health  
70 professional of an appropriate treatment program to supervise the plan for such services.

71 Critical community health services shall not be ordered unless the court approves a  
72 written critical community health service treatment plan presented to the court which conforms  
73 to the requirements of this section and which contains the name of the designated director of the  
74 facility that will supervise and administer the service plan.

75 (f) The first order for critical community health services shall not exceed 180 days, and  
76 any subsequent order shall not exceed 365 days.

77 (g) Before an order for critical community health services can commence, the individual  
78 shall be provided with copies of the court order and full explanations of the approved service  
79 plan. The approved service plan shall be filed with the court and the supervising mental health  
80 professional in charge of the individual's service plan.

81 (h) During any period in which an individual receives critical community health services,  
82 the individual or the supervising mental health professional may petition the court to amend the  
83 critical community health service treatment plan. The court may order an amended service plan  
84 or, if contested, the court may order a hearing on the amended plan. If an amended service plan  
85 is contested, the party wishing to amend the service plan shall provide the opposing party the  
86 proposed amended service plan at least 7 days before the filing of a petition.

87 (i) A supervising mental health professional may petition the court for a hearing if the  
88 supervising mental health professional has determined that the individual is not complying with  
89 the critical community health service treatment plan.

90 When a supervising mental health professional determines that the individual has not  
91 complied with any condition of the service plan, that monitor shall notify the court of the  
92 conditions of the treatment plan that have been violated.

93 (1) Upon receiving notice from the supervising mental health professional, the court shall  
94 appoint counsel, if necessary, and schedule a service plan non-compliance hearing for a date no  
95 less than 7 days and not more than 14 days after receiving said petition, except in extraordinary  
96 circumstances, as determined by the court. The court shall create a standard “notice of service

97 plan non-compliance” form, which the monitor shall complete with the times and dates of the  
98 alleged non-compliance of the individual.

99 (2) The notice of service plan non-compliance shall set forth the conditions of the plan  
100 that the supervising mental health professional alleges have not been complied with and shall  
101 order the individual to appear at a specific date and time for the non-compliance hearing, and  
102 shall be delivered to all parties to the original proceeding under which the service plan order was  
103 issued.

104 (3) Service plan non-compliance hearings shall proceed in two distinct steps, the first to  
105 adjudicate the factual issue of whether the plan is being complied with and the second to  
106 determine the disposition of the matter, if plan non-compliance is found by the court to have  
107 occurred.

108 (4) If the court finds that the individual has not complied with one or more conditions of  
109 the service plan as alleged, the supervising mental health professional shall recommend to the  
110 court a course of immediate action and may present argument and evidence in support of that  
111 recommendation. If the court determines that the individual is not complying with the terms of  
112 the order, the court may amend the service plan as the court deems necessary. The amended  
113 order may alter the service plan, or the court may request, under the provisions of section 12 of  
114 this chapter, an emergency evaluation to determine whether the failure to hospitalize the  
115 individual would create a likelihood of serious harm.

116 (j) The supervising mental health professional shall require periodic reports, not more  
117 frequently than every 30 days, concerning the condition of individuals receiving critical

118 community health services from any person, agency, or organization assigned to treat such  
119 individuals.

120 (k) The supervising mental health professional shall review the condition of an individual  
121 ordered to receive critical community services at least once every 30 days.

122 (l) The supervising mental health professional may, at any time, petition the court for  
123 termination of an individual's critical community health service plan if the supervising mental  
124 health professional determines that critical community health services are no longer the least  
125 restrictive appropriate treatment available.

126 (m) Nothing in this section shall prevent the supervising mental health professional from  
127 authorizing involuntary commitment and treatment in cases of emergency under section 12 of  
128 this chapter.

129 (n) The individual or their representative may petition for termination of an order for  
130 critical community health services.

131 (o) All hearings under this section shall be conducted by a judge consistent with the  
132 requirements of this chapter and applicable law with such flexibility and informality as the court  
133 may deem appropriate. The individual shall be entitled to the assistance of counsel, and the court,  
134 if necessary, shall appoint counsel. All testimony shall be taken under oath. The standard of  
135 proof at such hearing will be that of clear and convincing evidence.

136 (p) Reasonable expense incurred in providing critical community health services may be  
137 paid for out of the estate of the individual, by the petitioner or by the commonwealth, as may be  
138 determined by the court.



139           SECTION 5. Section 9 of said chapter 123, as so appearing, is hereby amended by  
140 inserting after the words “of section eight B.”, in line 39, the following words:- Any person may  
141 apply to the court stating their belief that an individual currently receiving critical community  
142 health services under section 8 1/2 should no longer be so treated.