Fifty-eighth Legislative Assembly of North Dakota

SENATE BILL NO. 2296

Introduced by

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Senators Mathern, Lyson, Nelson, Grindberg

Representatives DeKrey, Ruby

- 1 A BILL for an Act to amend and reenact section 25-03.1-02, subsection 1 of section
- 2 25-03.1-18.1, and subsection 1 of section 25-03.1-25 of the North Dakota Century Code,
- 3 relating to mental illness commitment procedures.

BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA: 4

- 5 SECTION 1. AMENDMENT. Section 25-03.1-02 of the North Dakota Century Code is 6 amended and reenacted as follows:
- 7 **25-03.1-02. Definitions.** In this chapter, unless the context requires otherwise:
- 8 "Alternative treatment order" means an involuntary outpatient order for a treatment 1. 9 program, other than hospitalization, which includes treatment with a prescribed 10 medication pursuant to section 25-03.1-18.1.
- "Chemically dependent person" means an individual with an illness or disorder 2. 12 characterized by a maladaptive pattern of usage of alcohol or drugs, or a 13 combination thereof, resulting in social, occupational, psychological, or physical 14 problems.
- 15 2. 3. "Consent" means voluntary permission that is based upon full disclosure of facts 16 necessary to make a decision and which is given by an individual who has the 17 ability to understand those facts.
- "Court" means, except when otherwise indicated, the district court serving the 18 3. 4. 19 county in which the respondent resides.
- 20 4. <u>5.</u> "Department" means the department of human services.
- 21 5. 6. "Director" means the director of a treatment facility or the director's designee.
- 22 "Expert examiner" means a licensed physician, psychiatrist, psychologist trained in 6. <u>7.</u> 23 a clinical program, or licensed addiction counselor appointed by the court to 24 examine the respondent and to provide an evaluation of whether the respondent is

1 a person requiring treatment. An evaluation of a respondent's physical condition 2 may be made only by a licensed physician or psychiatrist, an evaluation of a 3 respondent's mental status may be made only by a psychiatrist or psychologist 4 trained in a clinical program, and an evaluation of whether the respondent is 5 chemically dependent may be made only by a licensed physician or licensed 6 addiction counselor. 7 7. 8. "Independent expert examiner" means a licensed physician, psychiatrist, 8 psychologist trained in a clinical program, or licensed addiction counselor, chosen 9 at the request of the respondent to provide an independent evaluation of whether 10 the respondent is a person requiring treatment. An evaluation of a respondent's 11 physical condition may be made only by a licensed physician or psychiatrist; an 12 evaluation of a respondent's mental status may be made only by a psychiatrist or 13 psychologist; and an evaluation of whether the respondent is chemically dependent 14 may be made only by a licensed physician or licensed addiction counselor. 15 8. <u>9.</u> "Magistrate" means the judge of the appropriate district or juvenile court or a judge 16 assigned by the presiding judge of the judicial district. 17 9. 10. "Mental health professional" means: 18 A psychologist with at least a master's degree who has been either licensed 19 or approved for exemption by the North Dakota board of psychology 20 examiners. 21 A social worker with a master's degree in social work from an accredited b. 22 program. 23 A registered nurse with a master's degree in psychiatric and mental health C. 24 nursing from an accredited program. 25 d. A registered nurse with a minimum of two years of psychiatric clinical 26 experience under the supervision of a registered nurse as defined by 27 subdivision c or of an expert examiner. 28 A licensed addiction counselor. e. 29 A licensed professional counselor with a master's degree in counseling from f. 30 an accredited program who has either successfully completed the advanced 31 training beyond the master's degree as required by the national academy of

1 mental health counselors or a minimum of two years of clinical experience in a 2 mental health agency or setting under the supervision of a psychiatrist or 3 psychologist. 4 10. 11. "Mentally ill person" means an individual with an organic, mental, or emotional 5 disorder which substantially impairs the capacity to use self-control, judgment, and 6 discretion in the conduct of personal affairs and social relations. "Mentally ill 7 person" does not include a mentally retarded person of significantly subaverage 8 general intellectual functioning which originates during the developmental period 9 and is associated with impairment in adaptive behavior, although a person who is 10 mentally retarded may also suffer from a mental illness. Chemical dependency 11 does not per se constitute mental illness, although persons suffering from that 12 condition may also be suffering from mental illness. 13 11. 12. "Person requiring treatment" means a person who is mentally ill or chemically 14 dependent, and there is a reasonable expectation that if the person is not treated there exists a serious risk of harm to that person, others, or property. "Serious risk 15 16 of harm" means a substantial likelihood of: 17 Suicide, as manifested by suicidal threats, attempts, or significant depression a. 18 relevant to suicidal potential; 19 Killing or inflicting serious bodily harm on another person or inflicting b. 20 significant property damage, as manifested by acts or threats. Direct 21 evidence of overt violence or an expressed intent to commit violence is not 22 required: 23 Substantial deterioration in physical health, or substantial injury, disease, or C. 24 death, based upon recent poor self-control or judgment in providing one's 25 shelter, nutrition, or personal care; or 26 d. Substantial deterioration in mental health which would predictably result in 27 dangerousness to that person, others, or property, based upon the risk of loss 28 of the person's ability to function independently in the community or the loss 29 of cognitive or volitional control over the person's thoughts or actions or based 30 upon acts, threats, or patterns in the person's treatment history, current

1			condition, and other relevant factors, including the person's inability to make a			
2			rational decision about the need for treatment.			
3	12.	<u>13.</u>	"Private treatment facility" means any facility established under chapter 10-19.1 or			
4			10-33 and licensed under chapter 23-16 or 23-17.1.			
5	13.	- 14. "Psychiatrist" means a licensed physician who has completed a residency p				
6		in psychiatry.				
7	14.	<u>15.</u>	"Public treatment facility" means any treatment facility not falling under the			
8			definition of a private treatment facility.			
9	15.	<u>16.</u>	"Qualified service organization" means a person or entity that provides services to			
10			a treatment facility such as data processing, bill collecting, dosage preparation,			
11			laboratory analysis, or legal, medical, accounting, or other professional services,			
12			and which agrees that in dealing with patient records, it is bound by the			
13			confidentiality restrictions of this chapter, except as otherwise provided for by law.			
14	16.	<u>17.</u>	"Respondent" means a person subject to petition for involuntary treatment.			
15	17.	<u>18.</u>	"Superintendent" means the state hospital superintendent or the superintendent's			
16			designee.			
17	18.	<u>19.</u>	"Third-party payer" means a person or entity who pays, or agrees to pay, for			
18			diagnosis or treatment furnished to a patient on the basis of a contractual			
19			relationship with the patient or a member of the patient's family, or on the basis of			
20			the patient's eligibility for federal, state, or local governmental benefits, and			
21			includes any person or entity providing audit or evaluation activities for the			
22			third-party payer.			
23	19.	<u>20.</u>	"Treatment facility" or "facility" means any hospital including the state hospital at			
24			Jamestown or any evaluation and treatment facility that provides directly, or by			
25			direct arrangement with other public or private agencies, emergency evaluation			
26			and treatment, outpatient care, and inpatient care to persons suffering from a			
27			mental disorder or chemical dependency.			
28		SE	CTION 2. AMENDMENT. Subsection 1 of section 25-03.1-18.1 of the North Dakota			
29	Cent	ury Co	de is amended and reenacted as follows:			
30		1.	a. Upon notice and hearing, a treating psychiatrist may request authorization			
31			from the court to treat a person under a mental health treatment order with			

1		prescribed medication. The request may be considered by the court in an					
2			invol	untary treatment hearing. As a part of the request, the treating			
3		psychiatrist and another licensed physician or psychiatrist not involved in the					
4		current diagnosis or treatment of the patient shall certify:					
5			(1)	That the proposed prescribed medication is clinically appropriate and			
6				necessary to effectively treat the patient and there is a reasonable			
7				expectation that if the person is not treated as proposed there exists a			
8				serious risk of harm to that person, other persons, or property that the			
9				patient is a person requiring treatment;			
10			(2)	That the patient was offered that treatment and refused it or that the			
11				patient lacks the capacity to make or communicate a responsible			
12				decision about that treatment;			
13			(3)	That prescribed medication is the least restrictive form of intervention			
14				necessary to meet the treatment needs of the patient; and			
15			(4)	That the benefits of the treatment outweigh the known risks to the			
16				patient.			
17		b.	The	court shall inquire whether the patient has had a sufficient opportunity to			
18			adeq	uately prepare to meet the issue of involuntary treatment with prescribed			
19			medi	cation and, at the request of the patient, the court may continue the			
20			invol	untary treatment hearing for a period not exceeding seven days or may			
21			арро	int an independent expert examiner as provided in subsection 4.			
22	SEC	TIOI	N 3. A	MENDMENT. Subsection 1 of section 25-03.1-25 of the North Dakota			
23	Century Cod	de is	amen	ded and reenacted as follows:			
24	1.	Whe	en a p	eace officer, physician, psychiatrist, psychologist, or mental health			
25		prof	ession	nal has reasonable cause to believe that an individual is a person			
26		requ	uiring t	reatment and there exists a serious risk of harm to that person, other			
27		pers	sons, c	or property of an immediate nature and that considerations of safety do			
28		not	allow _l	oreliminary intervention by a magistrate, the peace officer, physician,			
29		psy	chiatris	st, psychologist, or mental health professional may cause the person to			
30		be t	aken i	nto custody and detained at a treatment facility as provided in			
31		sub	section	a 3, and subject to section 25-03 1-26, except that if emergency			

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1	conditions exist that prevent the immediate conveyance of the individual to a public				
2	treatment facility, a private facility that has adequate resources and capacity to				
3	hold that individual may hold the individual in anticipation of conveyance to a public				
4	treatment facility for up to twenty-three hours:				
5	a. Without conducting an immediate examination required under section				
6	25-03.1-26; and				
7	b. Without following notice and hearing requirements for a transfer to another				
8	treatment facility required under subsection 3 of section 25-03.1-34.				