GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2009

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HOUSE BILL 243 Committee Substitute Favorable 5/11/09 Committee Substitute #2 Favorable 5/13/09 Fourth Edition Engrossed 5/14/09 Senate Health Care Committee Substitute Adopted 6/24/09

Short Title:	Mental Health/Law Enforcement Custody. (Public)			
Sponsors:				
Referred to:				
	February 23, 2009			
A BILL TO BE ENTITLED				
AN ACT TO) AUTHORIZE THE FACILITY OF FIRST COMMITMENT EXAMINATION			

AN ACT TO AUTHORIZE THE FACILITY OF FIRST COMMITMENT EXAMINATION
TO TERMINATE THE INPATIENT COMMITMENT PROCEEDINGS IN
APPROPRIATE CIRCUMSTANCES WHEN A TWENTY-FOUR-HOUR FACILITY IS
NOT AVAILABLE.

6 The General Assembly of North Carolina enacts:

SECTION 1. G.S. 122C-261(d) reads as rewritten:

8 "(d) If the affiant is a physician or eligible psychologist, the affiant may execute the 9 affidavit before any official authorized to administer oaths. This affiant is not required to 10 appear before the clerk or magistrate for this purpose. This affiant shall file the affidavit with 11 the clerk or magistrate by delivering to the clerk or magistrate the original affidavit or a copy in 12 paper form that is printed through the facsimile transmission of the affidavit. If the affidavit is 13 filed through facsimile transmission, the affiant shall mail the original affidavit no later than 14 five days after the facsimile transmission of the affidavit to the clerk or magistrate to be filed 15 by the clerk or magistrate with the facsimile copy of the affidavit. This affiant's examination shall comply with the requirements of the initial examination as provided in G.S. 122C-263(c). 16 17 If the physician or eligible psychologist recommends outpatient commitment and the clerk or 18 magistrate finds probable cause to believe that the respondent meets the criteria for outpatient 19 commitment, the clerk or magistrate shall issue an order that a hearing before a district court 20 judge be held to determine whether the respondent will be involuntarily committed. The 21 physician or eligible psychologist shall provide the respondent with written notice of any 22 scheduled appointment and the name, address, and telephone number of the proposed 23 outpatient treatment physician or center. If the physician or eligible psychologist recommends 24 inpatient commitment and the clerk or magistrate finds probable cause to believe that the 25 respondent meets the criteria for inpatient commitment, the clerk or magistrate shall issue an 26 order transportation to or custody at а 24-hour facility for described in G.S. 122C-252.122C-252, provided that if a 24-hour facility is not immediately available or 27 appropriate to the respondent's medical condition, the respondent may be temporarily detained 28 29 under appropriate supervision and, upon further examination, released in accordance with 30 G.S. 122C-263(d)(2). However, if If the clerk or magistrate finds probable cause to believe that 31 the respondent, in addition to being mentally ill, is also mentally retarded, the clerk or 32 magistrate shall contact the area authority before issuing the order and the area authority shall 33 designate the facility to which the respondent is to be transported. If a physician or eligible



5

General Assem	oly Of North Carolina	Session 2009
physician shall b	ecutes an affidavit for inpatient commitment of a required to perform the examination required by G.S. 1 FION 2. G.S. 122C-263(d) reads as rewritten:	1
	uties of law-enforcement officer; first examination by	physician or eligible
	nologist.	
	the conclusion of the examination the physician or elig	ible psychologist shall
. ,	ng determinations:	
(1)	If the physician or eligible psychologist finds that:	
	a. The respondent is mentally ill;	
	b. The respondent is capable of surviving safely i	n the community with
	available supervision from family, friends, or o	thers;
	c. Based on the respondent's psychiatric history	, the respondent is in
	need of treatment in order to prevent	
	deterioration that would predictably result	in dangerousness as
	defined by G.S. 122C-3(11); and	
	d. The respondent's current mental status or	
	respondent's illness limits or negates the respon	•
	an informed decision to seek voluntaril	y or comply with
	recommended treatment.	
	The physician or eligible psychologist shall so show	
	report and shall recommend outpatient commitm	
	examining physician or eligible psychologist shall she	
	and telephone number of the proposed outpatient the	
	center. The person designated in the order to provid	
	return the respondent to the respondent's regular re-	
	respondent's consent, to the home of a consenting inc	
(2)	originating county, and the respondent shall be released	
(2)	If the physician or eligible psychologist finds that the ill and is dengerous to solf as defined in C.S. 122C	1
	ill and is dangerous to self, as defined in G.S. 122C defined in G.S. 122C-3(11)b., the physician or eligi	
	recommend inpatient commitment, and shall so show	
	report. If, in addition to mental illness and dangerous	
	eligible psychologist also finds that the respondent is	1,0
	believed to be mentally retarded, this finding shall be	
	The law enforcement officer or other designated	1
	respondent to a 24-hour facility described in G.S.	
	district court hearing. If there is no area 24-hou	
	respondent is indigent and unable to pay for care	-
	facility, the law enforcement officer or other designate	-
	respondent to a State facility for the mentally i	1
	Commission in accordance with G.S. 143B-147(a)(1)a. for custody,
	observation, and treatment and immediately notify the	clerk of superior court
	of this action. If a 24-hour facility is not imm	ediately available or
	appropriate to the respondent's medical condition, the	e respondent may be
	temporarily detained under appropriate supervision a	
	examination, provided that at anytime that a p	
	psychologist determines that the respondent is no long	
	commitment, the proceedings shall be terminated	
	transported and released in accordance with sub	
	subsection. However, if the physician or eligible ps	ychologist determines

	General Assembly Of North CarolinaSession 2009
1	that the respondent meets the criteria for outpatient commitment, as defined
2 3	in subdivision (1) of this subsection, the physician or eligible psychologist
	may recommend outpatient commitment, and the respondent shall be
	transported and released in accordance with subdivision (1) of this
	subsection. Any decision to terminate the proceedings or to recommend
	outpatient commitment after an initial recommendation of inpatient
	commitment shall be documented and reported to the clerk of superior court
	in accordance with subsection (e) of this section. If the respondent is
	temporarily detained and a 24-hour facility is not available or medically
	appropriate seven days after the issuance of the custody order, a physician or
	psychologist shall report this fact to the clerk of superior court and the
	proceedings shall be terminated.
	In the event an individual known or reasonably believed to be mentally
	retarded is transported to a State facility for the mentally ill, in no event shall
	that individual be admitted to that facility except as follows:
	a. Persons described in G.S. 122C-266(b);
	b. Persons admitted pursuant to G.S. 15A-1321;
	c. Respondents who are so extremely dangerous as to pose a serious
	threat to the community and to other patients committed to non-State
	hospital psychiatric inpatient units, as determined by the Director of
	the Division of Mental Health, Developmental Disabilities, and
	Substance Abuse Services or his designee; and
	d. Respondents who are so gravely disabled by both multiple disorders
	and medical fragility or multiple disorders and deafness that
	alternative care is inappropriate, as determined by the Director of the
	Division of Mental Health, Developmental Disabilities, and
	Substance Abuse Services or his designee.
	Individuals transported to a State facility for the mentally ill who are not
	admitted by the facility may be transported by law enforcement officers or
	designated staff of the State facility in State-owned vehicles to an
	appropriate 24-hour facility that provides psychiatric inpatient care.
	No later than 24 hours after the transfer, the responsible professional at
	the original facility shall notify the petitioner, the clerk of court, and, if
	consent is granted by the respondent, the next of kin, that the transfer has
	been completed.
	(3) If the physician or eligible psychologist finds that neither condition
	described in subdivisions (1) or (2) of this subsection exists, the proceedings
	shall be terminated. The person designated in the order to provide
	transportation shall return the respondent to the respondent's regular
	residence or, with the respondent's consent, to the home of a consenting
	individual located in the originating county and the respondent shall be
	released from custody."
	SECTION 3. Section 1(5) of S.L. 2003-178, as amended by Section 10.27 of S.L. 2006 66 and as further amended by Section 1 $1(a)(5)$ of S.L. 2007 504 reads as rewritten:
	2006-66, and as further amended by Section 1.1(a)(5) of S.L. 2007-504, reads as rewritten:
	"(5) The Secretary may grant a waiver under this section to up to $\frac{10.15}{15}$ LMEs."
	SECTION 4. Section 3 of this act becomes effective July 1, 2009. The remainder
	of this act becomes effective October 1, 2009.