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SENATE BILL NO. 341

Offered January 9, 2008

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A *BILL to amend and reenact §§ 16.1-338, 16.1-339, 19.2-169.6, 19.2-176, 19.2-182.9, 37.2-809, 37.2-814, and 37.2-816 of the Code of Virginia, relating to temporary detention orders; time for hearing.*

 Patron—Cuccinelli

Referred to Committee for Courts of Justice

Be it enacted by the General Assembly of Virginia:

1. That §§ 16.1-338, 16.1-339, 19.2-169.6, 19.2-176, 19.2-182.9, 37.2-809, 37.2-814, and 37.2-816 of the Code of Virginia are amended and reenacted as follows:

§ 16.1-338. Parental admission of minors younger than 14 and nonobjecting minors 14 years of age or older.

A. A minor younger than 14 years of age may be admitted to a willing mental health facility for inpatient treatment upon application and with the consent of a parent. A minor 14 years of age or older may be admitted to a willing mental health facility for inpatient treatment upon the joint application and consent of the minor and the minor's parent.

B. Admission of a minor under this section shall be approved by a qualified evaluator who has conducted a personal examination of the minor within 48 hours after admission and has made the following written findings:

1. The minor appears to have a mental illness serious enough to warrant inpatient treatment and is reasonably likely to benefit from the treatment; and

2. The minor has been provided with a clinically appropriate explanation of the nature and purpose of the treatment; and

3. If the minor is 14 years of age or older, that he has been provided with an explanation of his rights under this Act as they would apply if he were to object to admission, and that he has consented to admission; and

4. All available modalities of treatment less restrictive than inpatient treatment have been considered and no less restrictive alternative is available that would offer comparable benefits to the minor.

If admission is sought to a state hospital, the community services board serving the area in which the minor resides shall provide the examination required by this section and shall ensure that the necessary written findings have been made before approving the admission. A copy of the written findings of the evaluation required by this section shall be provided to the consenting parent and the parent shall have the opportunity to discuss the findings with the evaluator.

C. Within 10 days after the admission of a minor under this section, the director of the facility or the director's designee shall ensure that an individualized plan of treatment has been prepared by the provider responsible for the minor's treatment and has been explained to the parent consenting to the admission and to the minor. The minor shall be involved in the preparation of the plan to the maximum feasible extent consistent with his ability to understand and participate, and the minor's family shall be involved to the maximum extent consistent with the minor's treatment needs. The plan shall include a preliminary plan for placement and aftercare upon completion of inpatient treatment and shall include specific behavioral and emotional goals against which the success of treatment may be measured. A copy of the plan shall be provided to the minor and to his parents.

D. If the parent who consented to a minor's admission under this section revokes his consent at any time, or if a minor 14 or older objects at any time to further treatment, the minor shall be discharged within 48 72 hours to the custody of such consenting parent unless the minor's continued hospitalization is authorized pursuant to § 16.1-339, 16.1-340, or 16.1-345.

E. Inpatient treatment of a minor hospitalized under this section may not exceed 90 consecutive days unless it has been authorized by appropriate hospital medical personnel, based upon their written findings that the criteria set forth in subsection B of this section continue to be met, after such persons have examined the minor and interviewed the consenting parent and reviewed reports submitted by members of the facility staff familiar with the minor's condition.

F. Any minor admitted under this section while younger than 14 and his consenting parent shall be informed orally and in writing by the director of the facility for inpatient treatment within 10 days of his fourteenth birthday that continued voluntary treatment under the authority of this section requires his consent.

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59 G. Any minor 14 years of age or older who joins in an application and consents to admission
60 pursuant to subsection A, shall, in addition to his parent, have the right to access his health information.
61 The concurrent authorization of both the parent and the minor shall be required to disclose such minor's
62 health information.

63 § 16.1-339. Parental admission of an objecting minor 14 years of age or older.

64 A. A minor 14 years of age or older who objects to admission may be admitted to a willing facility
65 for up to 72 hours, pending the review required by subsections B and C of this section, upon the
66 application of a parent. If admission is sought to a state hospital, the community services board or
67 behavioral health authority serving the area in which the minor resides shall provide the examination
68 required by subsection B of § 16.1-338 and shall ensure that the necessary written findings, except the
69 minor's consent, have been made before approving the admission.

70 B. A minor admitted under this section shall be examined within 24 hours of his admission by a
71 qualified evaluator designated by the community services board or behavioral health authority serving
72 the area where the facility is located who is not and will not be treating the minor and who has no
73 significant financial interest in the minor's hospitalization. The evaluator shall prepare a report that shall
74 include written findings as to whether:

75 1. Because of mental illness, the minor (i) presents a serious danger to himself or others to the extent
76 that severe or irremediable injury is likely to result, as evidenced by recent acts or threats or (ii) is
77 experiencing a serious deterioration of his ability to care for himself in a developmentally
78 age-appropriate manner, as evidenced by delusory thinking or by a significant impairment of
79 functioning in hydration, nutrition, self-protection, or self-control;

80 2. The minor is in need of inpatient treatment for a mental illness and is reasonably likely to benefit
81 from the proposed treatment; and

82 3. Inpatient treatment is the least restrictive alternative that meets the minor's needs. The qualified
83 evaluator shall submit his report to the juvenile and domestic relations district court for the jurisdiction
84 in which the facility is located.

85 C. Upon admission of a minor under this section, the facility shall immediately file a petition for
86 judicial approval with the juvenile and domestic relations district court for the jurisdiction in which the
87 facility is located. A copy of this petition shall be delivered to the minor's consenting parent. Upon
88 receipt of the petition and of the evaluator's report submitted pursuant to subsection B, the judge shall
89 appoint a guardian ad litem for the minor. The court and the guardian ad litem shall review the petition
90 and evaluator's report and shall ascertain the views of the minor, the minor's consenting parent, the
91 evaluator, and the attending psychiatrist. The court shall conduct its review in such place and manner,
92 including the facility, as it deems to be in the best interests of the minor. Based upon its review and the
93 recommendations of the guardian ad litem, the court shall order one of the following dispositions:

94 1. If the court finds that the minor does not meet the criteria for admission specified in subsection B,
95 the court shall issue an order directing the facility to release the minor into the custody of the parent
96 who consented to the minor's admission. However, nothing herein shall be deemed to affect the terms
97 and provisions of any valid court order of custody affecting the minor.

98 2. If the court finds that the minor meets the criteria for admission specified in subsection B, the
99 court shall issue an order authorizing continued hospitalization of the minor for up to 90 days on the
100 basis of the parent's consent.

101 Within 10 days after the admission of a minor under this section, the director of the facility or the
102 director's designee shall ensure that an individualized plan of treatment has been prepared by the
103 provider responsible for the minor's treatment and has been explained to the parent consenting to the
104 admission and to the minor. A copy of the plan shall also be provided to the guardian ad litem. The
105 minor shall be involved in the preparation of the plan to the maximum feasible extent consistent with
106 his ability to understand and participate, and the minor's family shall be involved to the maximum extent
107 consistent with the minor's treatment needs. The plan shall include a preliminary plan for placement and
108 aftercare upon completion of inpatient treatment and shall include specific behavioral and emotional
109 goals against which the success of treatment may be measured.

110 3. If the court determines that the available information is insufficient to permit an informed
111 determination regarding whether the minor meets the criteria specified in subsection B, the court shall
112 schedule a commitment hearing that shall be conducted in accordance with the procedures specified in
113 §§ 16.1-341 through 16.1-345. The minor may be detained in the hospital for up to 72 additional hours
114 pending the holding of the commitment hearing.

115 D. A minor admitted under this section who rescinds his objection may be retained in the hospital
116 pursuant to § 16.1-338.

117 E. If the parent who consented to a minor's admission under this section revokes his consent at any
118 time, the minor shall be released within 48 72 hours to the parent's custody unless the minor's continued
119 hospitalization is authorized pursuant to § 16.1-340 or 16.1-345.

120 § 19.2-169.6. Emergency treatment prior to trial.

A. Any defendant who is not subject to the provisions of § 19.2-169.2 may be hospitalized for psychiatric treatment prior to trial if:

1. The court with jurisdiction over the defendant's case finds clear and convincing evidence that the defendant (i) is being properly detained in jail prior to trial; (ii) has mental illness and is imminently dangerous to himself or others in the opinion of a qualified mental health professional; and (iii) requires treatment in a hospital rather than the jail in the opinion of a qualified mental health professional; or

2. The person having custody over a defendant who is awaiting trial has reasonable cause to believe that (i) the defendant has mental illness and is imminently dangerous to himself or others and (ii) requires treatment in a hospital rather than jail and the person having such custody arranges for an evaluation of the defendant by a person skilled in the diagnosis and treatment of mental illness provided a district court judge or a special justice, as defined in § 37.2-100 or, if a judge or special justice is not available, a magistrate, upon the advice of a person skilled in the diagnosis and treatment of mental illness, subsequently issues a temporary detention order for treatment in accordance with the procedures specified in §§ 37.2-809 through 37.2-813. In no event shall the defendant have the right to make application for voluntary admission and treatment as may be otherwise provided in § 37.2-805 or 37.2-814.

If the defendant is committed pursuant to subdivision 1 of this subsection, the attorney for the defendant shall be notified that the court is considering hospitalizing the defendant for psychiatric treatment and shall have the opportunity to challenge the findings of the qualified mental health professional. If the defendant is detained pursuant to subdivision 2 of this subsection, the court having jurisdiction over the defendant's case and the attorney for the defendant shall be given notice prior to the detention pursuant to a temporary detention order or as soon thereafter as is reasonable. Upon detention pursuant to subdivision 2 of this subsection, a hearing shall be held, upon notice to the attorney for the defendant, either (i) before the court having jurisdiction over the defendant's case or (ii) before a district court judge or a special justice, as defined in § 37.2-100, in accordance with the provisions of § 37.2-820, in which case the defendant shall be represented by counsel as specified in § 37.2-814; the hearing shall be held ~~within 48 hours of~~ *no sooner than 24 hours and no later than 72 hours from the time of the execution of the temporary order* to allow the court that hears the case to make the findings, based upon clear and convincing evidence, that are specified in subdivision 1 of this subsection. If the ~~48-hour~~ *72-hour* period herein specified terminates on a Saturday, Sunday, or legal holiday, *or day on which the court is lawfully closed*, the person may be detained ~~for the same period allowed for detention pursuant to a temporary detention order issued pursuant to §§ 37.2-809 through 37.2-813 until the next day that is not a Saturday, Sunday, legal holiday, or day on which the court is lawfully closed.~~

In any case in which the defendant is hospitalized pursuant to this section, the court having jurisdiction over the defendant's case may provide by order that the admitting hospital evaluate the defendant's competency to stand trial and his mental state at the time of the offense pursuant to §§ 19.2-169.1 and 19.2-169.5.

B. A defendant subject to this section shall be treated at a hospital designated by the Commissioner as appropriate for treatment and evaluation of persons under criminal charge. The director of the hospital shall, within 30 days of the defendant's admission, send a report to the court with jurisdiction over the defendant addressing the defendant's continued need for treatment for a mental illness and being imminently dangerous to himself or others and, if so ordered by the court, the defendant's competency to stand trial, pursuant to subsection D of § 19.2-169.1, and his mental state at the time of the offense, pursuant to subsection D of § 19.2-169.5. Based on this report, the court shall (i) find the defendant incompetent to stand trial pursuant to subsection E of § 19.2-169.1 and proceed accordingly, (ii) order that the defendant be discharged from custody pending trial, (iii) order that the defendant be returned to jail pending trial, or (iv) make other appropriate disposition, including dismissal of charges and release of the defendant.

C. A defendant may not be hospitalized longer than 30 days under this section unless the court which has criminal jurisdiction over him or a district court judge or a special justice, as defined in § 37.2-100, holds a hearing at which the defendant shall be represented by an attorney and finds clear and convincing evidence that the defendant continues to (i) have a mental illness, (ii) be imminently dangerous to himself or others, and (iii) be in need of psychiatric treatment in a hospital. Hospitalization may be extended in this manner for periods of 60 days, but in no event may such hospitalization be continued beyond trial, nor shall such hospitalization act to delay trial, so long as the defendant remains competent to stand trial.

§ 19.2-176. Determination of insanity after conviction but before sentence; hearing.

A. If, after conviction and before sentence of any person, the judge presiding at the trial finds reasonable ground to question such person's mental state, he may order an evaluation of such person's mental state by at least one psychiatrist or clinical psychologist who is qualified by training and experience to perform such evaluations. If the judge, based on the evaluation, and after hearing

182 representations of the defendant's counsel, finds clear and convincing evidence that the defendant (i) is
183 mentally ill, and (ii) requires treatment in a mental hospital rather than the jail, he may order the
184 defendant hospitalized in a facility designated by the Commissioner as appropriate for treatment of
185 persons convicted of crime. The time such person is confined to such hospital shall be deducted from
186 any term for which he may be sentenced to any penal institution, reformatory or elsewhere.

187 B. If it appears from all evidence readily available that the defendant is mentally ill and poses an
188 imminent danger to himself or others if not immediately hospitalized, a temporary order of detention
189 may be issued in accordance with subdivision A 2 of § 19.2-169.6 and a hearing shall be conducted in
190 accordance with subsections A and C ~~within forty-eight hours of~~ *no sooner than 24 hours and no later*
191 *than 72 hours from the time of the execution of the temporary order of detention, or if the*
192 ~~forty-eight-hour~~ *72-hour* period herein specified terminates on a Saturday, Sunday ~~or, legal holiday, or~~
193 *day on which the court is lawfully closed*, such person may be detained ~~for the same period allowed for~~
194 *detention pursuant to an order for temporary detention issued pursuant to §§ 37.2-809 to 37.2-813 until*
195 *the next day that is not a Saturday, Sunday, legal holiday, or day on which the court is lawfully closed.*

196 C. A defendant may not be hospitalized longer than ~~thirty~~ 30 days under this section unless the court
197 which has criminal jurisdiction over him, or a court designated by such court, holds a hearing, at which
198 the defendant shall be represented by an attorney, and finds clear and convincing evidence that the
199 defendant continues to be (i) mentally ill, (ii) imminently dangerous to self or others, and (iii) in need of
200 psychiatric treatment in a hospital. Hospitalization may be extended in this manner for periods of 180
201 days, but in no event may such hospitalization be continued beyond the date upon which his sentence
202 would have expired had he received the maximum sentence for the crime charged.

203 § 19.2-182.9. Emergency custody of conditionally released acquittee.

204 When exigent circumstances do not permit compliance with revocation procedures set forth in
205 § 19.2-182.8, any district court judge or a special justice, as defined in § 37.2-100, or a magistrate may
206 issue an emergency custody order, upon the sworn petition of any responsible person or upon his own
207 motion based upon probable cause to believe that an acquittee on conditional release (i) has violated the
208 conditions of his release or is no longer a proper subject for conditional release and (ii) requires
209 inpatient hospitalization. The emergency custody order shall require the acquittee within his judicial
210 district to be taken into custody and transported to a convenient location where a person designated by
211 the community services board or behavioral health authority who is skilled in the diagnosis and
212 treatment of mental illness shall evaluate such acquittee and assess his need for inpatient hospitalization.
213 A law-enforcement officer who, based on his observation or the reliable reports of others, has probable
214 cause to believe that any acquittee on conditional release has violated the conditions of his release and is
215 no longer a proper subject for conditional release and requires emergency evaluation to assess the need
216 for inpatient hospitalization, may take the acquittee into custody and transport him to an appropriate
217 location to assess the need for hospitalization without prior judicial authorization. The evaluation shall
218 be conducted immediately. The acquittee shall remain in custody until a temporary detention order is
219 issued or until he is released, but in no event shall the period of custody exceed four hours. If it appears
220 from all evidence readily available (i) that the acquittee has violated the conditions of his release or is
221 no longer a proper subject for conditional release and (ii) that he requires emergency evaluation to
222 assess the need for inpatient hospitalization, the district court judge or a special justice, as defined in
223 § 37.2-100, or magistrate, upon the advice of such person skilled in the diagnosis and treatment of
224 mental illness, may issue a temporary detention order authorizing the executing officer to place the
225 acquittee in an appropriate institution for a period ~~not to exceed 48 of no less than 24 hours and no~~
226 *more than 72* hours prior to a hearing. If the ~~48-hour~~ *72-hour* period terminates on a Saturday, Sunday,
227 legal holiday, or day on which the court is lawfully closed, the acquittee may be detained until the next
228 day which is not a Saturday, Sunday, legal holiday, or day on which the court is lawfully closed.

229 The committing court or any district court judge or a special justice, as defined in § 37.2-100, shall
230 have jurisdiction to hear the matter. Prior to the hearing, the acquittee shall be examined by a
231 psychiatrist or licensed clinical psychologist, provided the psychiatrist or clinical psychologist is skilled
232 in the diagnosis of mental illness, who shall certify whether the person is in need of hospitalization. At
233 the hearing the acquittee shall be provided with adequate notice of the hearing, of the right to be present
234 at the hearing, the right to the assistance of counsel in preparation for and during the hearing, and the
235 right to introduce evidence and cross-examine witnesses at the hearing. Following the hearing, if the
236 court determines, based on a preponderance of the evidence presented at the hearing, that the acquittee
237 (i) has violated the conditions of his release or is no longer a proper subject for conditional release and
238 (ii) has mental illness or mental retardation and is in need of inpatient hospitalization, the court shall
239 revoke the acquittee's conditional release and place him in the custody of the Commissioner. An
240 acquittee's conditional release shall not be revoked solely because of his voluntary hospital admission.

241 When an acquittee on conditional release pursuant to this chapter is taken into emergency custody,
242 detained, or hospitalized, such action shall be considered to have been taken pursuant to this section,
243 notwithstanding the fact that his status as an insanity acquittee was not known at the time of custody,

detention, or hospitalization. Detention or hospitalization of an acquittee pursuant to provisions of law other than those applicable to insanity acquittees pursuant to this chapter shall not render the detention or hospitalization invalid. If a person's status as an insanity acquittee on conditional release is not recognized at the time of emergency custody or detention, at the time his status as such is verified, the provisions applicable to such persons shall be applied and the court hearing the matter shall notify the committing court of the proceedings.

§ 37.2-809. Involuntary temporary detention; issuance and execution of order.

A. For the purposes of this section:

"Designee of the local community services board" means an examiner designated by the local community services board or behavioral health authority who (i) is skilled in the assessment and treatment of mental illness, (ii) has completed a certification program approved by the Department, (iii) is able to provide an independent examination of the person, (iv) is not related by blood or marriage to the person being evaluated, (v) has no financial interest in the admission or treatment of the person being evaluated, (vi) has no investment interest in the facility detaining or admitting the person under this article, and (vii) except for employees of state hospitals and of the U.S. Department of Veterans Affairs, is not employed by the facility.

"Employee" means an employee of the local community services board or behavioral health authority who is skilled in the assessment and treatment of mental illness and has completed a certification program approved by the Department.

"Investment interest" means the ownership or holding of an equity or debt security, including shares of stock in a corporation, interests or units of a partnership, bonds, debentures, notes, or other equity or debt instruments.

B. A magistrate may issue, upon the sworn petition of any responsible person or upon his own motion and only after an in-person evaluation by an employee or a designee of the local community services board, a temporary detention order if it appears from all evidence readily available, including any recommendation from a physician or clinical psychologist treating the person, that the person (i) has mental illness, (ii) presents an imminent danger to himself or others as a result of mental illness or is so seriously mentally ill as to be substantially unable to care for himself, (iii) is in need of hospitalization or treatment, and (iv) is unwilling to volunteer or incapable of volunteering for hospitalization or treatment. The magistrate shall also consider the recommendations of any treating or examining physician licensed in Virginia if available either verbally or in writing prior to rendering a decision.

C. A magistrate may issue a temporary detention order without an emergency custody order proceeding. A magistrate may issue a temporary detention order without a prior in-person evaluation if (i) the person has been personally examined within the previous 72 hours by an employee or a designee of the local community services board or (ii) there is a significant physical, psychological, or medical risk to the person or to others associated with conducting such evaluation.

D. An employee or a designee of the local community services board shall determine the facility of temporary detention for all individuals detained pursuant to this section. The facility of temporary detention shall be one that has been approved pursuant to regulations of the Board. The facility shall be identified on the preadmission screening report and indicated on the temporary detention order. Except as provided in § 37.2-811 for defendants requiring hospitalization in accordance with subdivision A 2 of § 19.2-169.6, the person shall not be detained in a jail or other place of confinement for persons charged with criminal offenses.

E. Any facility caring for a person placed with it pursuant to a temporary detention order is authorized to provide emergency medical and psychiatric services within its capabilities when the facility determines that the services are in the best interests of the person within its care. The costs incurred as a result of the hearings and by the facility in providing services during the period of temporary detention shall be paid and recovered pursuant to § 37.2-804. The maximum costs reimbursable by the Commonwealth pursuant to this section shall be established by the State Board of Medical Assistance Services based on reasonable criteria. The State Board of Medical Assistance Services shall, by regulation, establish a reasonable rate per day of inpatient care for temporary detention.

F. The employee or the designee of the local community services board who is conducting the evaluation pursuant to this section shall determine, prior to the issuance of the temporary detention order, the insurance status of the person. Where coverage by a third party payor exists, the facility seeking reimbursement under this section shall first seek reimbursement from the third party payor. The Commonwealth shall reimburse the facility only for the balance of costs remaining after the allowances covered by the third party payor have been received.

G. The duration of temporary detention shall ~~not exceed 48~~ *be no less than 24 hours and no more than 72 hours* prior to a hearing. If the ~~48-hour~~ *72-hour* period herein specified terminates on a Saturday, Sunday, or legal holiday, *or day on which the court is lawfully closed*, the person may be detained, as herein provided, until the next day that is not a Saturday, Sunday, or legal holiday, *or day*

305 *on which the court is lawfully closed.*

306 H. If a temporary detention order is not executed within 24 hours of its issuance, or within a shorter
307 period as is specified in the order, the order shall be void and shall be returned unexecuted to the office
308 of the clerk of the issuing court or, if the office is not open, to any magistrate thereof. Subsequent
309 orders may be issued upon the original petition within 96 hours after the petition is filed. However, a
310 magistrate must again obtain the advice of an employee or a designee of the local community services
311 board prior to issuing a subsequent order upon the original petition. Any petition for which no
312 temporary detention order or other process in connection therewith is served on the subject of the
313 petition within 96 hours after the petition is filed shall be void and shall be returned to the office of the
314 clerk of the issuing court.

315 I. The chief judge of each general district court shall establish and require that a magistrate, as
316 provided by this section, be available seven days a week, 24 hours a day, for the purpose of performing
317 the duties established by this section. Each community services board or behavioral health authority
318 shall provide to each general district court and magistrate's office within its service area a list of its
319 employees and designees who are available to perform the evaluations required herein.

320 § 37.2-814. Commitment hearing for involuntary admission; written explanation; right to counsel;
321 rights of petitioner.

322 A. The commitment hearing for involuntary admission shall be held ~~within 48 hours~~ *no sooner than*
323 *24 hours and no later than 72 hours from the time* of the execution of the temporary detention order as
324 provided for in § 37.2-809; however, if the ~~48-hour~~ *72-hour* period herein specified terminates on a
325 Saturday, Sunday, legal holiday, or day on which the court is lawfully closed, the person may be
326 detained, as herein provided, until the next day that is not a Saturday, Sunday, legal holiday, or day on
327 which the court is lawfully closed.

328 B. At the commencement of the commitment hearing, the district court judge or special justice shall
329 inform the person whose involuntary admission is being sought of his right to apply for voluntary
330 admission and treatment as provided for in § 37.2-805 and shall afford the person an opportunity for
331 voluntary admission. The judge or special justice shall ascertain if the person is then willing and capable
332 of seeking voluntary admission and treatment. If the judge or special justice finds that the person is
333 capable and willingly accepts voluntary admission and treatment, the judge or special justice shall
334 require him to accept voluntary admission for a minimum period of treatment not to exceed 72 hours.
335 After such minimum period of treatment, the person shall give the hospital ~~48~~ 72 hours' notice prior to
336 leaving the hospital. During this notice period, the person shall not be discharged except as provided in
337 § 37.2-837, 37.2-838, or 37.2-840. The person shall be subject to the transportation provisions as
338 provided in § 37.2-829 and the requirement for preadmission screening by a community services board
339 or behavioral health authority as provided in § 37.2-805.

340 C. If a person is incapable of accepting or unwilling to accept voluntary admission and treatment, the
341 judge or special justice shall inform the person of his right to a commitment hearing and right to
342 counsel. The judge or special justice shall ascertain if the person whose admission is sought is
343 represented by counsel, and, if he is not represented by counsel, the judge or special justice shall
344 appoint an attorney to represent him. However, if the person requests an opportunity to employ counsel,
345 the judge or special justice shall give him a reasonable opportunity to employ counsel at his own
346 expense.

347 D. A written explanation of the involuntary admission process and the statutory protections
348 associated with the process shall be given to the person, and its contents shall be explained by an
349 attorney prior to the commitment hearing. The written explanation shall describe, at a minimum, the
350 person's rights to (i) retain private counsel or be represented by a court-appointed attorney, (ii) present
351 any defenses including independent evaluation and expert testimony or the testimony of other witnesses,
352 (iii) be present during the hearing and testify, (iv) appeal any order for involuntary admission to the
353 circuit court, and (v) have a jury trial on appeal. The judge or special justice shall ascertain whether the
354 person whose involuntary admission is sought has been given the written explanation required herein.

355 E. To the extent possible, during or before the commitment hearing, the attorney for the person
356 whose involuntary admission is sought shall interview his client, the petitioner, the examiner described
357 in § 37.2-815, the community services board or behavioral health authority staff, and any other material
358 witnesses. He also shall examine all relevant diagnostic and other reports, present evidence and
359 witnesses, if any, on his client's behalf, and otherwise actively represent his client in the proceedings. A
360 health care provider shall disclose or make available all such reports, treatment information, and records
361 concerning his client to the attorney, upon request. The role of the attorney shall be to represent the
362 wishes of his client, to the extent possible.

363 F. The petitioner shall be given adequate notice of the place, date, and time of the commitment
364 hearing. The petitioner shall be entitled to retain counsel at his own expense, to be present during the
365 hearing, and to testify and present evidence. The petitioner shall be encouraged but shall not be required
366 to testify at the hearing, and the person whose involuntary admission is sought shall not be released

solely on the basis of the petitioner's failure to attend or testify during the hearing.

§ 37.2-816. Commitment hearing for involuntary admission; preadmission screening report.

The district court judge or special justice shall require a preadmission screening report from the community services board or behavioral health authority that serves the county or city where the person resides or, if impractical, where the person is located. The report shall be admissible as evidence of the facts stated therein and shall state (i) whether the person presents an imminent danger to himself or others as a result of mental illness or is so seriously mentally ill that he is substantially unable to care for himself, (ii) whether the person is in need of involuntary inpatient treatment, (iii) whether there is no less restrictive alternative to inpatient treatment, and (iv) the recommendations for that person's placement, care, and treatment. The board or authority shall provide the preadmission screening report within 48 72 hours of the execution of the temporary detention order as provided for in § 37.2-809 or if the 48-hour 72-hour period terminates on a Saturday, Sunday, legal holiday, or day on which the court is lawfully closed, the next day that is not a Saturday, Sunday, legal holiday, or day on which the court is lawfully closed. In the case of a person who has been sentenced and committed to the Department of Corrections and who has been examined by a psychiatrist or clinical psychologist, the judge or special justice may proceed to adjudicate whether the person has mental illness and should be involuntarily admitted without requesting a preadmission screening report from the community services board or behavioral health authority.

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