



Grading the States

An Analysis of U.S. Psychiatric Treatment Laws



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Contents

| | |
|--------------------------------------------------------------|-----|
| Executive Summary | 4 |
| Introduction | 8 |
| SECTION I: Involuntary Treatment | 9 |
| SECTION II: Policy Recommendations | 14 |
| Emergency Psychiatric Evaluation | 14 |
| Initiation of Evaluation or Treatment | 16 |
| Criteria for Inpatient Commitment | 18 |
| Assisted Outpatient Treatment | 22 |
| SECTION III: Methodology | 27 |
| SECTION IV: Findings | 30 |
| Endnotes | 41 |
| APPENDIX A: State Report Cards | 43 |
| APPENDIX B: Recommended State Statutory Changes | 146 |

Executive Summary

The U.S. mental health system is not one single broken system, but many. Responsibility for making needed reform is in the hands of the states and thousands of local governments. Each has a unique set of laws, regulations, policies and budget priorities that, collectively, make up our national mental health system.

We are effectively running 50 different experiments, with no two states taking the same approach. As a result, whether a person receives timely, appropriate treatment for an acute psychiatric crisis or chronic psychiatric disease is almost entirely dependent on what state that person is in when the crisis arises.

We are effectively running 50 different experiments, with no two states taking the same approach.

Grading the States: An Analysis of U.S. Psychiatric

Treatment Laws examines the laws that provide for involuntary treatment for psychiatric illness. For each state, we analyzed whether an individual who needs involuntary evaluation or treatment can receive it in a timely fashion, for sufficient duration, and in a manner that enables and promotes long-term wellbeing.

We found that on some issues, states are close to universal use of recommended best practices that we identify in our policy recommendations.

- A robust majority of states authorize an emergency psychiatric hold of at least 72 hours for evaluation and crisis care
- Only a small number of states require that danger to self or danger to others be imminent to qualify for hospitalization
- Nearly all states recognize a person's failure to meet basic needs (such as food, clothing and shelter) due to mental illness as a basis for intervention
- All but three states have laws that authorize civil commitment on an outpatient basis

But we also identified many states whose criteria have not been updated for many years, whose laws create needless barriers to treatment for people with severe mental illness, and whose procedures are confusing or vague, making them even more difficult to navigate for families and practitioners alike.

Our purpose in writing this report is not to shame states whose laws need to improve, but it is absolutely critical that people understand the connection between flawed civil commitment laws and the bad outcomes that they see in their communities every day. Emergency holds that are too short lead to "streeting," the abominable practice of discharge without care because a person has simply "timed out" of their opportunity for intervention. Impossibly high civil commitment criteria prevent a person in crisis from accessing excellent outpatient programming. As discussed in the 2017 report *Beyond Beds: The Vital Role of a Full Continuum of Care*, no law exists in a vacuum. A loved one can fall through the cracks if any one part of the treatment continuum fails. For many, this can mean violence, arrest, trauma or victimization.

The majority of states receive neither top nor bottom grades, with most earning a B or C.



Figure 1: Distribution of State Grades

| | | |
|----------|-----------|------------------------------------------------------------------------------------------------------------------------------------------------|
| A | A+ | Minnesota (97) |
| | A | Wisconsin (96), Michigan (95), West Virginia (94) |
| | A- | North Dakota (92), Vermont (92), Arkansas (91), Hawaii (91), Louisiana (90), Wyoming (90) |
| B | B+ | Indiana (89), South Carolina (88), Mississippi (87), Washington (87) |
| | B | Missouri (86), Ohio (86), Idaho (85), Nevada (84), Oregon (84), Arizona (83) |
| | B- | Georgia (82), Illinois (82), Virginia (82), Iowa (80), North Carolina (80) |
| C | C+ | Kentucky (79), Oklahoma (79), Pennsylvania (79), Maine (77), Texas (77) |
| | C | New York (76), New Mexico (75), Kansas (73), Utah (73) |
| | C- | South Dakota (72), Colorado (71), New Hampshire (71) |
| D | D+ | New Jersey (67) |
| | D | Florida (66), Alaska (65), Nebraska (63) |
| | D- | Alabama (60), California (60) |
| F | F | Montana (59), Tennessee (57), Rhode Island (57), District of Columbia (56), Connecticut (41), Massachusetts (33), Delaware (30), Maryland (18) |

Our analysis found the following:

- Ten states earned an A grade, while eight received an F.
- Minnesota achieved the highest combined score, with 97 out of 100 points. Maryland received the lowest combined score, with 18 out of 100.
- Six states (Alabama, Delaware, Georgia, Oklahoma, Pennsylvania and Tennessee) still have an outdated requirement that harm to self or others be imminent for a person to qualify for inpatient commitment, and seven (Georgia, Ohio, Oklahoma, Oregon, Rhode Island, Wisconsin and Wyoming) require harm from failing to meet basic needs to be imminent to intervene.
- Five state laws contain no path to civil commitment for those who cannot meet their basic needs due to mental illness (Alabama, Delaware, District of Columbia, Maryland and New York).
- Three states still have no law allowing civil commitment to occur on an outpatient basis (AOT) (Connecticut, Maryland and Massachusetts).
- Tennessee's AOT law is the only one written to prevent its use as an alternative to hospitalization.

The following recommendations are based on our analysis of the treatment laws in each state and identify key components of an ideally functioning system of mental illness treatment laws.

POLICY RECOMMENDATIONS

- #1** The time limit for an emergency hold should not be less than 72 hours with 48 hours as an absolute minimum.
- #2** Emergency evaluation laws should provide clear guidance for practitioners, law enforcement and families.
- #3** Any responsible adult or, at a minimum, a guardian or family member, should be authorized to petition the court for both emergency evaluation and inpatient civil commitment.
- #4** Criteria for danger to self should expressly include grave disability and psychiatric deterioration.
- #5** Criteria for grave disability should not require either unreasonably severe harm or for families to be required to deny assistance.
- #6** Criteria for psychiatric deterioration should allow consideration of treatment history and the likelihood of future psychiatric deterioration without treatment.
- #7** Criteria for danger to self or danger to others should not require imminent harm.

- #8** AOT criteria should allow consideration of at least three years of treatment history and must be suitable for outpatient use.

- #9** AOT criteria should not place unreasonable limitations on eligibility.

- #10** Any responsible adult or, at a minimum, guardians and family members should be authorized to petition the court for AOT.

- #11** AOT procedures should be described in sufficient detail to provide guidance to practitioners and to make maximum use of the “black robe effect.”

- #12** The duration for an initial AOT order should be a minimum of 90 days, and renewed orders should be for a minimum of 180 days.

INTRODUCTION

This report focuses on a key component of the mental health system in every state— the laws that provide for involuntary treatment for psychiatric illness. For each state, we have assigned grades based upon whether state law permits someone who needs involuntary evaluation or treatment to receive it in a timely fashion, for sufficient duration, and in a manner that enables and promotes long-term wellbeing.

Our intended audience for this report is anyone looking to better understand the laws of their state and how they compare with the rest of the nation, or to look for trends among the states generally. These grade sheets are designed to clearly identify the current strengths and weaknesses of a state’s civil commitment laws, and to provide a state-specific blueprint for change that can improve access to treatment for those most in need of care. We have established a grading system that we believe is transparent and yields reliable and consistent results.

The sole focus of this report is analyzing statutes authorizing involuntary treatment. It should not read as a commentary on whether a state is implementing its laws, how a state is implementing its laws, or the quality of care for those who are admitted to involuntary treatment. Those factors and others, such as budget prioritization and the number of available beds, are essential to examining the efficacy of a state’s overall public mental health system. However, in keeping with Treatment Advocacy Center’s mission and our belief that reform of treatment laws is at the root of systemic improvement, this assessment is limited to current statutes and what is theoretically authorized or prohibited by them.

A state grade may not match the experience of navigating that state’s system due to factors other than the quality of its law. In practice, a state may have robust voluntary mental health programs but have chosen a too-high threshold for involuntary treatment, effectively excluding people who are too sick to seek services on their own. Similarly, a statute provides authority to act but rarely a mandate to do so. Even an ideal law may not be implemented or may be used inconsistently. An inquiry into implementation, funding priorities and systemic capacity is beyond the scope of this report though we acknowledge that analysis of laws alone is but a first step in assessing public mental health systems.

If fixing civil commitment laws represent only a first step, though, it is an essential one. As a practical matter, the impact of increased funding is greatly diminished by the passage of unusable laws. Adding beds is an empty gesture if one cannot reach them except by committing a crime and entering the forensic treatment system. Improving and modernizing treatment laws is something any state can do immediately, even when the funding necessary to solve other problems is scarce. We hope that this report will prove helpful in understanding this complicated subject more fully and thus empower readers to advocate for positive change.

SECTION I: INVOLUNTARY TREATMENT

Calls to the Treatment Advocacy Center from family members, reporters, advocates, and people with mental illness make it obvious that what is publicly available for people to find out about involuntary treatment is confusing. These materials are rarely worded to be accessible to those who do not work within the system. Lack of consistency in the use of civil commitment terminology is common, even among practitioners.

Before offering our recommendations for specific policies, this section lays out the basic structure for involuntary care and some of the terms and concepts that are often used but rarely defined. We hope that by providing a clear overall framework in which to view civil commitment, and by defining these key common terms, we can aid people in understanding and improving the laws in their states and bring better precision to our public discourse moving forward.

Types of Involuntary Treatment

Public mental health is primarily the responsibility of state and local government. State legislatures pass laws establishing the criteria and procedures for when and in what manner the state may override an individual's refusal of mental health treatment. Although courts and administrative offices play a role in interpreting and executing those laws, the decision of what the state laws should be is a legislative function performed on behalf of the public. This is useful to keep in mind for lawmakers – it is their responsibility to speak for the people and they are in the best position to fix statutory problems as revealed by poor outcomes among constituents.

While health decisions are typically private in nature, a state legislature may utilize its law enforcement and *parens patriae* powers (the right of government to make decisions on behalf of persons incapable of making them) to authorize the evaluation and treatment of an individual, even over that person's objection. Such action is subject to a balancing of interests in which it must be determined, after all due process rights are afforded, that the state's interest in protecting either the individual or the public outweighs that individual's general right to make their own health care decisions.

The process for involuntary treatment can be broken down into three distinct components: emergency psychiatric evaluation, inpatient commitment and outpatient commitment (the latter also known as *assisted outpatient treatment*, or *AOT* for short).

EMERGENCY PSYCHIATRIC EVALUATION. When an individual believed to be in psychiatric crisis refuses to undergo a clinical evaluation, it is sometimes necessary, as authorized by statute, to remove the individual from the community and place them under a short-term emergency hold so that an evaluation may be performed.

All states have a process for this under law. In most states, the maximum period of an emergency hold is 72 hours or less. This typically serves as the entry point for longer-term involuntary care.

INPATIENT COMMITMENT. As with emergency evaluation, all states have laws authorizing involuntary admission to a hospital for mental health treatment. These inpatient commitment laws empower a court to order a person with mental illness to be held over their objection for a period of care and treatment.

At a minimum, these laws address both the *criteria* for commitment (the legal standard by which a judge decides whether commitment is warranted – see further discussion below) and the *process* of commitment (the various components and mechanisms that get the matter before a judge for consideration).

ASSISTED OUTPATIENT TREATMENT. Almost every state also has laws that allow commitment of an individual to treatment in the community, if a judge finds that a community setting is adequate to meet their current clinical needs. These laws, known broadly as “assisted outpatient treatment” or “AOT” laws, vary in their eligibility criteria and means of enforcement.

Through the ritual of a court hearing and the symbolic weight of a judge’s order, AOT seeks to motivate the individual to regard treatment adherence as a legal obligation and impress upon treatment providers that the individual requires close monitoring and comprehensive services.

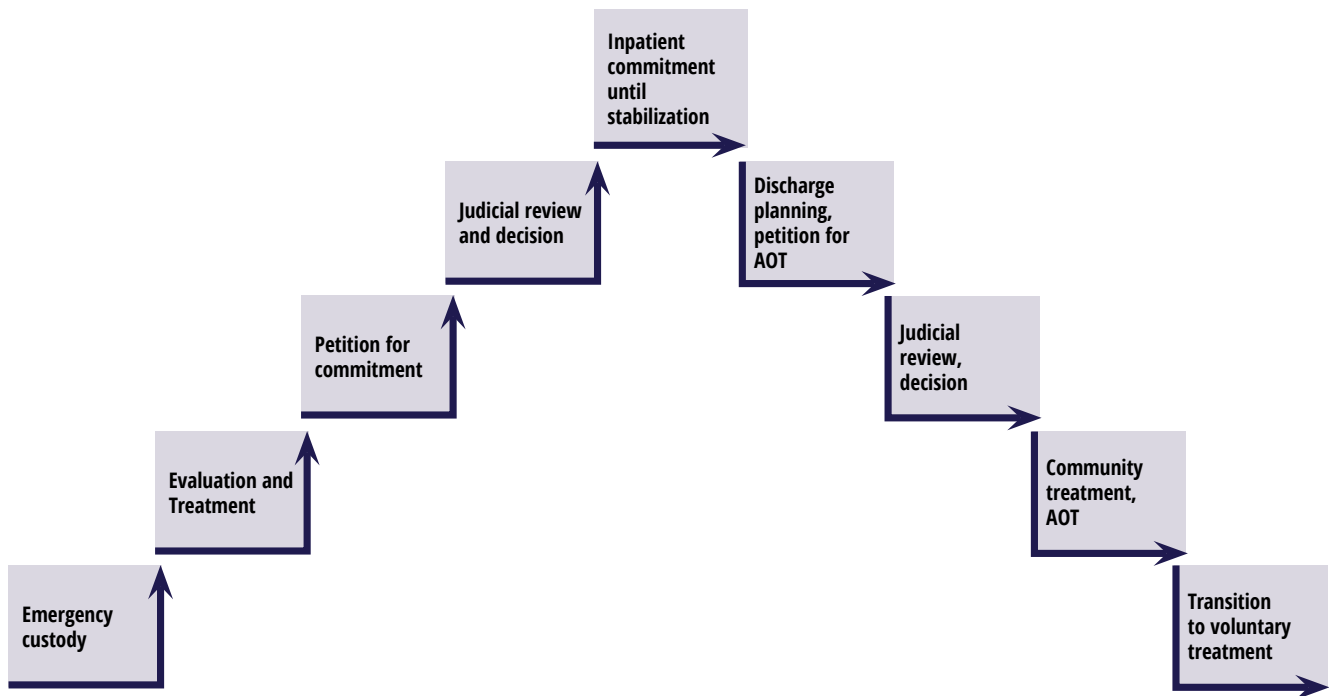


Figure 2

The path for involuntary care parallels the path for voluntary care but adds a layer of court review and oversight to ensure that a person’s liberty is curtailed only when it is necessary to protect the public or the person, and only for as long as that remains true. The usual trajectory for a person who remains eligible for involuntary care throughout the continuum involves 1) a period of emergency custody followed by evaluation, 2) a petition for inpatient commitment followed by treatment in a facility, 3) petition for discharge to court-supervised outpatient treatment (AOT), and 4) a transition when appropriate to voluntary care in the community. Every step triggers a review of the individual’s need to be subject to involuntary care.

In practice, most people are discharged at early stages without reaching judicial review or after a relatively short period of hospitalization. Many committed to inpatient care are discharged without step-down community care, either voluntary or involuntary. The choices made by

medical and mental health practitioners on whether to pursue involuntary treatment at each stage is distinct from the laws themselves.

Criteria for Involuntary Treatment

Whether someone is subject to involuntary evaluation or treatment is based on whether they are believed to or are determined to meet the criteria laid out in the statute. Criteria are standards on which a judgment or decision may be based. In the context of civil commitment, a person meets criteria for involuntary treatment if they satisfy all the enumerated conditions listed within the law. Statutes often contain multiple criteria, each a potential basis for commitment. Many also incorporate other sections of code by reference, such as terms that are specifically defined by the legislature.

For example, in North Carolina, N.C. GEN. STAT. § 122C-268(j) states:

“To support an inpatient commitment order, the court shall find by clear, cogent, and convincing evidence that the respondent is mentally ill and dangerous to self... or dangerous to others[.]”

However, the terms ‘dangerous to self’ and ‘dangerous to others’ are further defined within N.C. GEN. STAT. § 122C-3(11):

“Dangerous to himself or others” means:

- a. “Dangerous to himself” means that within the relevant past:
 1. The individual has acted in such a way as to show:
 - I. That he would be unable, without care, supervision, and the continued assistance of others not otherwise available, to exercise self-control, judgment, and discretion in the conduct of his daily responsibilities and social relations, or to satisfy his need for nourishment, personal or medical care, shelter, or self-protection and safety; and
 - II. That there is a reasonable probability of his suffering serious physical debilitation within the near future unless adequate treatment is given pursuant to this Chapter.[...]; or
 2. The individual has attempted suicide or threatened suicide and that there is a reasonable probability of suicide unless adequate treatment is given pursuant to this Chapter; or
 3. The individual has mutilated himself or attempted to mutilate himself and that there is a reasonable probability of serious self-mutilation unless adequate treatment is given pursuant to this Chapter. [...]
- b. “Dangerous to others” means that within the relevant past, the individual has inflicted or attempted to inflict or threatened to inflict serious bodily harm on another, or has acted in such a way as to create a substantial risk of serious bodily harm to another, or has engaged in extreme destruction of property; and that there is a reasonable probability that this conduct will be repeated. [...]

Therefore, the *criteria* for inpatient civil commitment in North Carolina can be any of the following:

| Criteria for Inpatient Commitment (Dangerous to Self) | Criteria for Inpatient Commitment (Dangerous to Others) |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>The respondent is mentally ill <u>and</u></p> <ul style="list-style-type: none"> • The individual has acted in such a way as to show: <ul style="list-style-type: none"> – That he would be unable, without care, supervision, and the continued assistance of others not otherwise available, to exercise self-control, judgment, and discretion in the conduct of his daily responsibilities and social relations, or to satisfy his need for nourishment, personal or medical care, shelter, or self-protection and safety; <u>and</u> – That there is a reasonable probability of his suffering serious physical debilitation within the near future unless adequate treatment is given <p><u>or</u></p> <p>The respondent is mentally ill <u>and</u></p> <ul style="list-style-type: none"> • The individual has attempted suicide or threatened suicide and that there is a reasonable probability of suicide unless adequate treatment is given <p><u>or</u></p> <p>The respondent is mentally ill <u>and</u></p> <ul style="list-style-type: none"> • The individual has mutilated himself or attempted to mutilate himself and that there is a reasonable probability of serious self-mutilation unless adequate treatment is given | <p>The respondent is mentally ill <u>and</u></p> <ul style="list-style-type: none"> • Within the relevant past, the individual has inflicted or attempted to inflict or threatened to inflict serious bodily harm on another <p><u>or</u></p> <p>The respondent is mentally ill <u>and</u></p> <ul style="list-style-type: none"> • Has acted in such a way as to create a substantial risk of serious bodily harm to another <p><u>or</u></p> <p>The respondent is mentally ill <u>and</u></p> <ul style="list-style-type: none"> • Has engaged in extreme destruction of property and that there is a reasonable probability that this conduct will be repeated |

North Carolina's statute contains six complete sets of criteria by which an individual is assessed for dangerousness. The term *criteria* refers collectively to an entire set of conditions that must be met under the statute to qualify for involuntary treatment.

While the ultimate decider of whether someone meets or does not meet criteria is a judge (or a person assigned that judicial function), it is important to note that the first assessment is

frequently made by law enforcement, a social worker, or a medical or psychiatric professional based on whether they believe an individual meets criteria for involuntary care. Training on how to read and interpret the statutes for any individual called upon to do so is imperative to ensure consistency and accuracy.

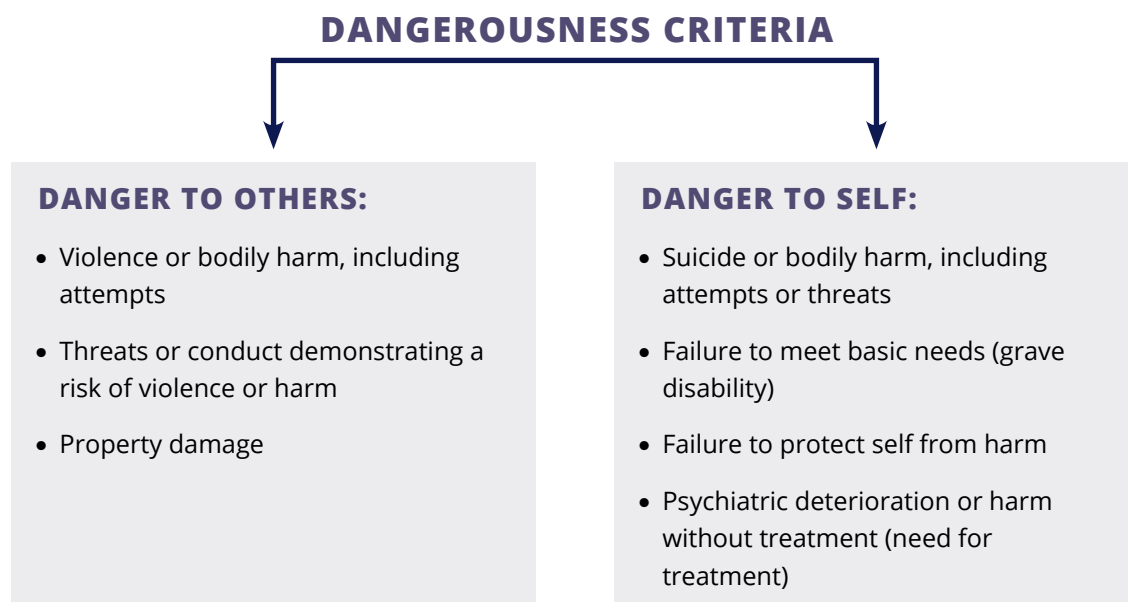
The Key Concept of Dangerousness

If there is one overarching concept necessary to understanding involuntary treatment laws, it is the role that *dangerousness* plays in eligibility. It is possible to generalize criteria for involuntary treatment into one sentence, from which all other detail springs: states have the authority to intervene and provide involuntary care if an individual poses a danger to self or to other people. Any basis for involuntary treatment fits within one of these two overarching categories. The wide variation in the states arises from the level of detail the legislature includes in defining dangerousness, particularly danger to self.

Most states have identified similar specific ways people might pose a danger to themselves. Apart from the risk of suicide or direct bodily self-harm, states generally recognize that failing to meet basic needs for survival (food, clothing, shelter) due to mental illness qualifies as being dangerous to self. The term most frequently used for this type of treatment criteria is *grave disability*. A definition of grave disability may also include things like failure to seek needed medical treatment or an inability to protect oneself from danger. An increasing number of states consider foreseeable harm from not receiving needed psychiatric treatment to pose a danger to self as well. The common terms for these types of criteria are *psychiatric deterioration* or *need for treatment*.

While many are familiar with grave disability or psychiatric deterioration as treatment criteria, at times the nexus to dangerousness gets lost. It is important to communicate this connection clearly, however, to provide context for both as a basis for intervention.

Figure 3



SECTION II: POLICY RECOMMENDATIONS

Each state's legislature adopts its own framework for civil commitment. In considering statutory changes, however, lawmakers often examine laws from other states in search of optimal language or to solve specific problems arising in implementation. The purpose of this section is to highlight language commonly found in state civil commitment statutes that has been identified as the most likely to promote timely treatment or, conversely, the most likely to impose needless barriers to treatment. Our analysis of each state's laws breaks down in detail which clauses are desirable and which could be eliminated to maximize an individual's likelihood of receiving involuntary treatment at the appropriate time and in the manner best suited to their needs. We lay out these policy recommendations first for emergency evaluation, next for inpatient commitment and finally for AOT.

Emergency psychiatric evaluation

Every state has enacted laws that, under certain narrow circumstances, allow for temporary custody of an individual experiencing a psychiatric crisis and in need of an emergency evaluation. While there is variation among the states regarding who is empowered to initiate an emergency evaluation, *all* states authorize law enforcement to transport an individual to an evaluation facility if an officer finds probable cause to believe that the person meets the state's civil commitment criteria. No state requires a court order if it appears there is an imminent need to prevent physical harm to the individual or others. If, however, potential harm does not appear to be imminent, many states require law enforcement to obtain a court order prior to transporting a person for emergency evaluation.

Variation in laws on emergency custody and evaluation falls mainly into two categories: the duration of an initial psychiatric inpatient hold and the categories of individuals who are authorized to initiate proceedings.

POLICY RECOMMENDATION #1:

The time limit for an emergency hold should not be less than 72 hours with 48 hours as an absolute minimum.

States vary widely in the duration of the initial hold for evaluation, during which time the evaluating professional must determine whether the person meets civil commitment criteria and, if so, must begin the process of psychiatric stabilization. Treatment may involve emergency administration of medication. If there is no emergency (such as an immediate need to subdue the person to prevent physical harm to self or others in the hospital environment), a separate legal process is usually required to medicate over the person's objection.

The length of time chosen for emergency custody is of tremendous practical importance. The ability to link an individual with services at this critical point in time is, as discussed in the 2017 report *Beyond Beds: The Vital Role of a Full Continuum of Care*, often the difference between successful treatment and revolving-door crisis-based treatment.¹ A longer hold period helps to ensure there is ample time to decide whether a person qualifies for further treatment and that this decision is based on a medical evaluation rather than the patient simply "timing out" of the hold. It also increases the chance that an individual will be stabilized before discharge or

persuaded to accept voluntary admission or outpatient services.² Allowing an adequate initial hold time also, and very importantly, affords additional time to find a bed if inpatient admission is warranted.

The duration of emergency custody should factor in the time realistically needed to conduct a thorough evaluation of the need for inpatient or outpatient treatment. It should also take into account the time needed to develop an appropriate discharge plan and make referrals to community-based services if outpatient treatment is appropriate. A 72-hour hold period is the shortest amount of time realistically needed to stabilize the patient and, if the individual is not admitted, to discharge them with a long-term care plan.³ Ample research indicates that adequate stabilization and long-term care planning reduces the risk of suicide after discharge.⁴ This factor alone should motivate states with the shortest emergency holds to revisit their laws.

The duration of emergency custody should factor in the time realistically needed to conduct a thorough evaluation of the need for inpatient or outpatient treatment.

While most states provide for emergency custody of at least 72 hours, some inadvisably rely on even shorter periods. New Hampshire allows an emergency custody hold of only six hours, while eight states limit it to less than 48 hours. By contrast, Louisiana allows for holds of up to 15 days, Rhode Island for 10 days, and both Nebraska and New Mexico for seven days (see Table 4.1 in Section 4).

Based on research, the practice of a majority of states, and documented bad outcomes arising from dangerously short initial holds, 48 should be considered an absolute minimum. Forty-three states allow for a hold of at least 48 hours, with 35 allowing a hold of 72 hours or longer.

POLICY RECOMMENDATION #2:

Emergency evaluation laws should provide clear guidance for practitioners, law enforcement and families.

Since emergency evaluation laws must be interpreted by practitioners, police officers and families, they should be concise and should provide clear guidance. Anything vague or ambiguous should be clarified so that legislative intent is clear. It should be simple to ascertain the criteria for emergency evaluation, as well as who can petition for it and how and where to do so. Criteria and procedures should be laid out with sufficient detail to aid implementation. States with emergency custody laws that we consider ideal in this regard include Missouri, North Dakota and Wisconsin.

Because the purpose of emergency evaluation is to determine whether an individual in crisis meets criteria for inpatient commitment, any incongruity between a state's emergency evaluation criteria and inpatient commitment criteria can raise unintended barriers to treatment. When the statutory language is inconsistent, individuals who would be found to require inpatient commitment if they could transport *themselves* to a facility for evaluation may be ineligible for the custody and transport they need to receive that evaluation.

The most common discrepancy between emergency and inpatient criteria is a more restrictive emergency standard that excludes one or more bases of admission included in the inpatient

standard. For example, Arizona’s emergency evaluation law requires reasonable belief that a person is “a danger to self or others,” but omits a number of specific types of harm that are included in the definition for inpatient commitment. These inconsistencies can, however, be very simple to resolve.

Until a 2020 legislative update, Minnesota’s emergency and inpatient criteria were inconsistent. The definition of “harm to self” included a person’s neglect of their own basic survival needs as a basis for hospitalization. But the criteria for law enforcement to take a person into emergency custody required a risk of *injury*, rendering neglect of basic survival needs irrelevant. Minnesota’s legislature removed this statutory barrier to emergency evaluation by replacing the language requiring a risk of injury with “danger of harming self or others.” In total, the emergency custody criteria of six states (Alabama, Arizona, Iowa, Oregon, South Carolina and Texas) are significantly narrower than their respective inpatient criteria.

Many states, while not requiring that the risk of harm be imminent as a prerequisite to civil commitment, nonetheless require imminence of harm before executing a warrantless emergency detention for evaluation. We do not regard this requirement as a true inconsistency between civil commitment and emergency detention criteria that are otherwise the same, but rather as a policy preference for advanced judicial review of potential deprivations of liberty unless the need to prevent imminent harm overrides.

Initiation of Evaluation or Treatment

All states have laws authorizing both emergency evaluation and longer-term involuntary hospitalization for mental health treatment. There is great variation in the detailed criteria states use to determine eligibility for either. Some of our policy recommendations for involuntary evaluation and treatment pertain to the substance of these criteria, while others concern procedure.

The primary procedural issue to assess is who is authorized to seek an emergency hold for evaluation and who can initiate a petition for inpatient commitment. Some states authorize only professionals (law enforcement, physicians or psychiatrists, etc.) to pursue an emergency hold, and some allow only mental health professionals (such as hospital administrators or treating doctors) or public mental health officials to initiate proceedings for commitment. Other states allow family members or other responsible adults to begin the process. It is not always the same groups authorized to initiate the process for both laws. For example, while Alaska authorizes a spouse or family member to seek an emergency hold for evaluation, only a mental health professional can proceed with a petition for inpatient commitment whereas in Ohio a spouse or family member could initiate both.

POLICY RECOMMENDATION #3:

Any responsible adult or, at a minimum, a guardian or family member, should be authorized to petition the court for both emergency evaluation and inpatient civil commitment.

There is significant variation across the states on who is authorized to initiate emergency evaluation. Some states authorize only law enforcement to do so, based on personal observation of an imminent threat. If there is no evidence that harm is imminent, law enforcement may be required to seek a court order, as is the case with others authorized to file a petition.

Another category of petitioners includes physicians, psychiatrists, psychologists or other (often enumerated) mental health professionals or evaluators. Many states authorize adults with specific relationships, such as parents, siblings, spouses, or guardians, to petition the court for an emergency hold. Others authorize any responsible adult with the necessary knowledge of a person's circumstances to do so. The filing of the petition does not cause a person to be taken into custody but merely triggers the court's review of the request.

There are a number of benefits to authorizing court petitions from family, friends, guardians and others as opposed to allowing them only from law enforcement or mental health professionals. An individual's friends, family and frequent contacts are in the best position to provide information to the court as to that person's current conduct and state of wellbeing. Their inclusion in the petitioning process ensures that the court's decision to issue an order will be based on more complete information, including the individual's personal history and recent actions. Such decisions may be better informed than those resting solely on testimony from law enforcement or medical professionals, who have limited interactions with the individual and knowledge of their history or behavior.

There are a number of benefits to authorizing court petitions from family, friends, guardians and others as opposed to allowing them only from law enforcement or mental health professionals.

Emergency custody statutes that limit who can initiate the process to law enforcement make arrest significantly more likely for those in psychiatric crisis simply by virtue of requiring police involvement. Statutes that require mental health professionals to initiate the process artificially screen out individuals who do not seek voluntary care, leading to decompensation over time until law enforcement is called to handle a crisis.⁵ This eventuality is dangerous to the individual and to law enforcement, contributes to the criminalization of mental illness, and disproportionately impacts communities of color.⁶ Alternatively, empowering responsible adults with knowledge of an individual's history and current mental state to petition for emergency evaluation helps prevent medical issues from becoming criminal justice issues and allows for more timely and less traumatic intervention.⁷

Where citizens cannot initiate the process to seek an emergency evaluation, the extreme shortage of mental health professionals in many parts of the United States, especially rural areas, can further restrict access to timely evaluation and treatment. This shortage is projected to worsen over the next 20 years.⁸ The emergency custody statutes of five states (Alabama, Alaska, California, Idaho, and New Jersey) require certification from *two* experts. Such requirements only magnify the problems outlined above and can create unnecessary barriers to emergency evaluation (see Table 4.2 in Section 4).

Similarly, an optimal inpatient civil commitment law should not limit petitioning authority to mental health professionals or officials. Apart from the numerous policy reasons discussed above for emergency evaluation that equally apply to pursuing inpatient civil commitment, empowering citizens to petition allows for more timely treatment that does not require a 911 call and potentially traumatizing police response. It shifts the situation from being a law enforcement encounter to a judicial inquiry with due process protections for the individual. In addition, any time a discretionary decision for a large population, such as whether to pursue inpatient hospitalization, is left up to a single entity (e.g., a state's department of health), there is a need for an avenue to review decisions.

Empowering citizens to petition makes it more likely that the critical decision on a person's eligibility for inpatient commitment will be made or reviewed by an impartial judicial officer. It also helps an individual's support system to engage in their care. Family members often have the most complete knowledge of their loved one's symptoms and overall circumstances, and their involvement in treatment decisions improves compliance and the long-term outcomes of health for their loved ones.⁹

Criteria for Inpatient Commitment

As discussed in Section I, inpatient criteria represent the conditions that must all be met before a person can be committed to a hospital over their objection. This includes language to define terms and sometimes direction about what kind of evidence should be considered in making the decision.

POLICY RECOMMENDATION #4:

Criteria for danger to self should expressly include grave disability and psychiatric deterioration.

Every state's inpatient civil commitment law authorizes hospitalization when an individual poses a danger of harm to self or others. Definitions included in these criteria should provide a clear statement of what this means. Some states define *danger* or *harm* in significant detail. Missouri's inpatient criteria, for example, include a definition of *substantial risk of harm*, further broken down by category into *harm to self* and *harm to others*.

Oregon's law, by comparison, simply authorizes commitment for *dangerousness to self or others*. The law does not specify what type of evidence may be considered or how soon harm must be likely to occur. In interpreting this vague language appellate courts have construed the law extremely narrowly, leading to a dramatic increase in the number of inpatient orders overturned on appeal, an outcome that was likely not intended by lawmakers.¹⁰

States have unsurprisingly recognized similar specific categories of harm or danger to self. Apart from the most obvious category of those displaying suicidal behavior or expressing suicidal or self-harming thoughts, inpatient commitment laws commonly recognize dangers posed by neglect of basic needs or self-protection. States are also increasingly including psychiatric harm and foreseeable damage from failing to provide needed psychiatric care as a basis for intervention as well. While many statutes are written broadly enough to theoretically include all of these types of harm in the phrase *danger to self*, we recommend that states clearly and explicitly include them in their definitions and criteria.

The District of Columbia, one of only five states that does not expressly include grave disability as a basis for commitment, does have case law interpreting its code to include it within the definition of *danger to self*.¹¹ While this case law is helpful if an individual makes it to court, law enforcement, emergency department physicians, and some practitioners consulting the code will be unaware that the courts have allowed a broader interpretation. The best practice is to make clear what common forms of harm, such as grave disability and psychiatric deterioration, are included in the category of *danger to self* by listing them in the definition.

POLICY RECOMMENDATION #5:

Criteria for grave disability should not require either unreasonably severe harm or for families to be required to deny assistance.

Grave disability criteria, sometimes referred to as “basic needs” criteria, authorize intervention if the person’s untreated mental illness prevents them from securing the basic necessities of human survival (such as food, clothing and shelter) or avoiding environmental perils (such as traffic or communicable disease). Nearly all states consider grave disability to be a basis for commitment, though a few holdouts remain. Alabama, Delaware, the District of Columbia (as discussed above), Maryland and New York have not expressly adopted criteria allowing civil commitment for grave disability.

One pitfall to avoid in the phrasing of a state’s grave disability criteria is the requirement that potential harm be unreasonably extreme to qualify. Given the important liberty interest at stake, it is appropriate for grave disability criteria to contemplate a risk of serious harm or serious illness before intervention. But it goes too far to limit its reach to situations where the factfinder can identify a risk of death or disfigurement if treatment is not provided. Pennsylvania, for example, requires that within the last 30 days, an individual has shown that without treatment there is reasonable probability that in the next 30 days they *will die or suffer serious bodily injury or serious physical debilitation*.

There is no valid public policy reason to require such an extreme degree of potential harm before a person qualifies for inpatient commitment, nor does it make sense from a budgetary perspective to essentially require that all care be emergency-based, delivered in the most expensive manner, and offered at the time least likely to lead to recovery. This sort of requirement is deeply stigmatizing, as it implies a fundamental difference between psychiatric medical care and any other type of medical care, which is delivered when it is needed rather than when death or disfigurement will occur without it.

Similarly, a small number of states require that for an individual to qualify for treatment under the grave disability standard, their family or friends must be unwilling or unable to provide assistance. Florida’s law, for example, states: “[N]o person shall be deemed to be unable to satisfy his need for nourishment, essential medical care or shelter if he is able to satisfy such needs with the supervision and assistance of others who are willing and available.”¹² Idaho, New Jersey and Wyoming have similar conditions in their criteria. Presumably the underlying purpose is to limit intervention to those whose basic needs are actively unmet. But the effect is to force a heartbreaking dilemma upon the loved ones of a person in crisis who cannot volunteer for care: either help the person survive as they continue to spiral without access to care, or banish them to the streets in the desperate hope that they will qualify for civil commitment before tragedy strikes. No family should ever be put in this position.

For an example of an ideal grave disability criteria, consider ALASKA STAT. § 47.30.915(9):

“gravely disabled” means a condition in which a person as a result of mental illness

(A) is in danger of physical harm arising from such complete neglect of basic needs for food, clothing, shelter, or personal safety as to render serious accident, illness, or death highly probable if care by another is not taken[.]

Connecticut offers another good model in CONN. GEN. STAT. ANN. § 17a-495(a):

“Gravely disabled” refers to a person who, due to mental or emotional impairment, is in danger of serious harm because he has failed or is unable to provide for his basic needs such as essential food, clothing, shelter, or safety. The person needs hospital treatment, which is available, but his psychiatric disabilities make him incapable of determining whether to accept it.

Grave disability encompasses many of the ways in which a person might be dangerous to self apart from the risk of suicide or physical harm. To capture the danger posed to self from not receiving needed care for mental illness, many states include psychiatric deterioration as one basis for commitment.

POLICY RECOMMENDATION #6:

Criteria for psychiatric deterioration should allow consideration of treatment history and the likelihood of future psychiatric deterioration without treatment.

Treatment standards recognizing the need to prevent harm to a person arising from failure to treat a psychiatric condition as a basis for intervention are commonly referred to as the *psychiatric deterioration*, or sometimes the *need for treatment*, criteria. Rather than focusing on a snapshot in time, inclusion of psychiatric deterioration as a basis for intervention encourages the court to consider the more complete picture, including past patterns of behavior, in order to prevent foreseeable relapses. Close to half (24) of all states include psychiatric deterioration in their criteria as a basis for inpatient civil commitment. Some states define this type of harm separately while others include it within their definition of danger to self or grave disability. Any of these are workable as long as the wording clearly empowers the court to act to prevent psychiatric deterioration.

An optimal psychiatric deterioration standard should enable the evaluator to consider the person’s treatment history in assessing the likelihood that the current episode of non-treatment will lead to psychiatric deterioration. Many states explicitly allow consideration of recent hospitalizations (often limited to the past one to three years) but do not “connect the dots” by making clear that the *relevance* of such evidence is that it helps the evaluator predict the consequences of continued non-treatment. For example, if a person’s treatment history documents that twice within the past year they were involuntarily hospitalized after discontinuing medication and displayed similar behaviors and symptoms as they currently present, the judge can reasonably conclude that intervention is needed to prevent continued psychiatric deterioration and the bad effects that arise from it.

Arizona offers a good example of psychiatric deterioration criteria in ARIZ. REV. STAT. § 36-501(32):

“Persistently or acutely disabled” means a severe mental disorder that meets all the following criteria:

(a) If not treated has a substantial probability of causing the person to suffer or continue to suffer severe and abnormal mental, emotional or physical harm that significantly impairs judgment, reason, behavior or capacity to recognize reality.

(b) Substantially impairs the person’s capacity to make an informed decision regarding treatment and this impairment causes the person to be incapable of understanding and expressing an understanding of the advantages and disadvantages of accepting treatment and understanding and expressing an understanding of the alternatives to the particular treatment offered after the advantages, disadvantages and alternatives are explained to that person.

(c) Has a reasonable prospect of being treatable[.]

Many states’ grave disability criteria contain a psychiatric deterioration clause that can accomplish the same thing. For example, Colorado’s definition for grave disability in COLO. REV. STAT. § 27-65-102(9) reads:

“Gravely disabled” means a condition in which a person, as a result of a mental health disorder, is incapable of making informed decisions about or providing for his or her essential needs without significant supervision and assistance from other people. As a result of being incapable of making these informed decisions, a person who is gravely disabled is at risk of substantial bodily harm, dangerous worsening of any concomitant serious physical illness, *significant psychiatric deterioration*, or mismanagement of his or her essential needs that could result in substantial bodily harm (...) (emphasis added).

Because this definition of grave disability includes the risk of harm from “significant psychiatric deterioration,” the law authorizes intervention for either neglect of basic needs or to prevent psychiatric deterioration.

POLICY RECOMMENDATION #7:

Criteria for danger to self or danger to others should not require imminent harm.

Regardless of how dangerousness is defined for either self or others, inpatient commitment criteria should not include a requirement that danger or harm be imminent for eligibility. Research indicates that laws that require an individual to present an imminent danger to self or others before they can meet criteria lead to the criminalization of mental illness.¹³ Because violent, suicidal or threatening behavior is typically handled by law enforcement, criteria that require someone to decompensate to the point of imminent harm for involuntary treatment all but guarantee an encounter with police.

Any such incident can easily lead to arrest rather than hospitalization. In many jurisdictions, an officer transporting an individual to a hospital is consigned to hours of transit as well as hours of waiting at the emergency department before being able to return to regular duties. On the other hand, an officer may choose simply to drop off a dangerous and arrested individual in a jail’s booking department. It is easy to see why a busy police officer may opt for the latter, especially where doing otherwise may leave too few officers in the community to respond to calls.

It is equally inappropriate to require imminence of harm to meet criteria for grave disability. Some states require that harm be so imminent as to bar treatment prior to significant mental and physical deterioration. Oklahoma statute requires that a person be “in a condition of severe deterioration such that, without immediate intervention, there exists a substantial risk that severe impairment or injury will result to the person, or (...) poses a substantial risk of

immediate serious physical injury to self or death as manifested by evidence that the person is unable to provide for and is not providing for his or her basic physical needs.”¹⁴ Setting aside that such a high bar needlessly prolongs human suffering, it also seems to rest on the dubious assumption that intervention can be perfectly timed to prevent a tragic outcome just before it would otherwise have taken place.

Research offers the most compelling reasons to remove imminence requirements from inpatient criteria. Laws that include only an immediate dangerousness criterion have been associated with longer durations of untreated psychosis.¹⁵ Long durations of untreated psychosis, in turn, have been shown to lead to permanent, physical brain damage.¹⁶ The longer an individual has untreated psychosis, the longer it will take to emerge from it, and the less likely the person is to make a full recovery.¹⁷

Research offers the most compelling reasons to remove imminence requirements from inpatient criteria.

Recent research further suggests that timely treatment can improve an individual’s prognosis for the course of the illness.¹⁸ Following the lead of countries such as the United Kingdom and Denmark, in 2008 the National Institute of Mental Health launched a large-scale research project based on a national model of coordinated specialty care for individuals experiencing first-episode psychosis, indicating that early identification and treatment is key for longer-term success.¹⁹ Just as it would be medically irresponsible to treat heart disease only after an individual suffers a heart attack, legislatures should not create needless statutory hurdles to early intervention, particularly for early episodes of psychosis.

Assisted outpatient treatment

AOT, known by a variety of names from state to state including *outpatient civil commitment* and *mandatory outpatient treatment*, is the least restrictive, community-based intervention option on the court-ordered treatment continuum. While some may think of civil commitment as necessarily involving hospital care, AOT has long been an available option in most states. All but three (Connecticut, Maryland and Massachusetts) authorize some form of outpatient civil commitment. AOT can be a way to transition an individual from inpatient to outpatient treatment (“step-down AOT”), or it can be ordered directly from the community as an alternative to hospitalization (“step-up AOT”). It can also be used to transition an individual from incarceration to treatment and is thus a potentially powerful tool for the decriminalization of mental illness.

Non-adherence to prescribed treatment is a significant contributor to some peoples’ endless shuttling between crisis hospitalization, incarceration and homelessness.²⁰ These individuals experience frequent fluctuation between crisis care and no care. A 2017 literature review identified lack of insight as the most common reason for treatment non-adherence in patients with serious mental illness.²¹

Lack of insight, known clinically as *anosognosia*, is the inability of a person to perceive their own illness, no matter how clear the symptoms may be to others. Brain scan comparisons of individuals with and without anosognosia during self-reflective activities reveal physiological differences.²² A person with anosognosia is not merely “in denial”; extended outreach attempts for voluntary services are unlikely to succeed because the individual truly does not recognize their illness or their need for care.

AOT is a practical, evidence-based intervention designed to promote treatment adherence regardless of insight, enabling even individuals with anosognosia to function safely in the community and develop habits of treatment engagement.

POLICY RECOMMENDATION #8:

AOT criteria should allow consideration of at least three years of treatment history and must be suitable for outpatient use.

An optimal AOT law should include the ability to look at a person's treatment history. The purpose of doing this in an outpatient context is to determine whether discontinuing needed treatment has led to involuntary hospitalizations or arrests in the past and could therefore lead to the same problems in the future. AOT eligibility hinges on the individual's need for community-based treatment to maintain safety and stability, and their unlikelihood to maintain treatment engagement over time on a voluntary basis.

While many states allow courts and clinicians broad consideration of a person's treatment history to make these findings, others limit the consideration of history to designated "lookback" periods. These limitations are intended to prevent use of long-ago hospitalizations or incidents, on the theory that they are unreliable as indicia of the person's current inclinations. While this is reasonable, lawmakers should be careful not to overcorrect by making the lookback period too short. Laws should authorize consideration of at least the prior 36 months of treatment history. This period ensures fair consideration of the person's recent history of treatment adherence and the consequences of any non-adherence. Shorter periods of review may not be sufficient to identify patterns of conduct as needed to make an informed assessment.

Any periods of hospitalization or incarceration, which take place under regimented supervision and therefore do not provide a view of a person's ability to adhere to treatment in the community, should be excluded from the lookback periods. (In other words, a lookback period of 36 months should look to the last 36 months that the person spent in the community, rather than a strict cutoff at 36 months prior to the date of evaluation.) These exclusions should be stated clearly in the law.

The other major factor for an optimal AOT law is selecting criteria that allow people to remain eligible for commitment following discharge. The issue that can arise is that a person ready for discharge from hospitalization is presumably no longer a danger to self or others, so criteria for AOT must authorize commitment to prevent relapse or deterioration. If a state has written criteria specifically for AOT, this is less likely to be an issue. If a state uses the same criteria for both inpatient and outpatient commitment, however, these shared criteria must actually allow a person to remain eligible for AOT or it is essentially unusable.

Arizona's shared criteria, quoted above, allow a person at discharge to remain eligible based on the continued need for treatment to prevent deterioration. Rhode Island's shared criteria, however, are completely ill-suited for AOT. An individual who qualifies for inpatient commitment in Rhode Island, whose criteria require present instability, is unlikely to be deemed appropriate for discharge to an outpatient setting. Conversely, a person who is discharged from the hospital likely no longer qualifies for AOT because they are not presently unstable.

As a result, it is mainly states with psychiatric deterioration criteria that have been most successful in using shared criteria for both inpatient and outpatient commitment. However, it is possible to use well-crafted grave disability criteria as the basis for an AOT order as long as it allows for continued treatment of an individual who is stabilized and prepared for discharge from the hospital. New Jersey, for example, does not have psychiatric deterioration criteria and relies on its grave disability criteria for AOT, which are written broadly enough for the purpose by directing the determination of dangerousness to take into account “a person’s history, recent behavior and any recent act, threat or serious psychiatric deterioration.”²³

POLICY RECOMMENDATION #9:

AOT criteria should not place unreasonable limitations on eligibility.

AOT laws are less effective if they contain unreasonable limitations on which people are eligible to enroll. One example of such a limitation is the restriction of AOT to those unstable at the time of discharge. As described above, this can occur due to the use of the same criteria for inpatient and outpatient commitment. There are states with criteria written for outpatient use which nonetheless contain this problematic requirement. While requiring instability may be suitable for inpatient care, it is inappropriate as a requirement for outpatient commitment. California’s outpatient criteria, for example, include as a condition that at the time the determination is made “[t]he person’s condition is substantially deteriorating.”²⁴ This is nonsensical for an outpatient program and makes step-down commitment particularly difficult as an individual ready for discharge is presumably stable but may still need and benefit from AOT.

There should likewise be no explicit requirement that eligibility for AOT hinge on refusal to participate voluntarily. Alaska’s criteria require that a person refuse care in order to be eligible for a treatment order. Many individuals will agree to an AOT order at the time of discharge. These individuals should be eligible for robust community-based programming, just as their refusing counterparts are. The order is an acknowledgment that treatment adherence has been an issue in the past and could, regardless of an agreement at discharge, become an issue in the future.

Another limitation to avoid is a requirement that a person lack insight in order to qualify. Kentucky’s AOT criteria list anosognosia as a condition to qualify. While AOT is in fact very appropriate for those with anosognosia, requiring it is counterproductive because insight can be in flux based on medication compliance. At the time of discharge from inpatient treatment, an individual is presumably medicated and/or stable and may actually have a tenuous grasp on insight for the time being. That person is a good candidate for AOT and should not be excluded on that basis.

POLICY RECOMMENDATION #10:

Any responsible adult or, at a minimum, guardians and family members should be authorized to petition the court for AOT.

In many cases, families are far more intimately aware of a person’s treatment history, adherence struggles and outcomes (i.e., their need for AOT) than mental health professionals. A jurisdiction will ideally operate an AOT *program* through the public mental health system, such that a family member need only make a referral to the program and share information to have their loved

one evaluated for AOT participation. If the person is found to meet criteria, the program would then take the initiative to petition the court.

Unfortunately, however, this ideal scenario is still far from the norm. Public AOT programs are rapidly growing in prevalence, but still don't exist in most counties. Even where programs do operate, they are not always as responsive as they should be to referrals from the public. For these reasons, authority to petition the court for AOT should not be limited to public mental health officials or other professionals. Some mental health departments may be unwilling to pursue AOT because of the perceived expense, resource limitations, or organizational philosophy. Enabling citizens to access the courts makes it possible to secure AOT in an individual case, even in jurisdictions where there is no formal AOT program, or where a program has erred in declining to petition for that individual to participate.

POLICY RECOMMENDATION #11:

AOT procedures should be described in sufficient detail to provide guidance to practitioners and to make maximum use of the “black robe effect.”

While AOT laws exist in all but three states, they vary widely in how much detail is included to describe how AOT should function procedurally. States such as Rhode Island and Delaware merely mention outpatient treatment as an option but provide no explanation of how AOT should be initiated, or what happens if the person does not comply with the AOT court order. By contrast, states such as Louisiana and Ohio explicitly lay out their processes from petition to renewal hearing.

Local mental health systems are better equipped to develop and implement AOT programs when the law provides guidance and eliminates uncertainty as to what is allowed. Laws should therefore be sufficiently clear and complete on procedure and should identify the specific courts and timelines for petition filings, who is entitled to petition, the requirements for reporting to the court, and issues relevant to procedural due process such as representation at hearings and admissibility of evidence. A state's AOT law should expressly include authorization for direct referral from the community to AOT as a method of avoiding inpatient hospitalization where appropriate. To avoid uncertainty for implementers, procedures should be clearly delineated for how to pursue revocation of outpatient status if the need arises or how to renew an order if appropriate.

One of the primary reasons AOT is effective is a phenomenon known as the “black robe effect.” The basic principle is that the respect citizens generally have for a judge as an authority figure will motivate them to adhere to a court-ordered treatment plan. Research demonstrates that the court order itself has a significant effect in preventing re-hospitalization and re-arrest, when compared with similar services provided to the same individuals previously on a voluntary basis.²⁵ For optimal impact of the black robe effect, a state's AOT law should require that a written treatment plan be submitted to the court and incorporated into the order.

POLICY RECOMMENDATION #12:

The duration for an initial AOT order should be a minimum of 90 days, and renewed orders should be for a minimum of 180 days.

Evaluations of AOT programs have shown that treatment engagement among AOT participants is improved with longer durations of program involvement. For example, in New York, evaluators found that AOT participants had greater service engagement after 12 months or more in an AOT program.²⁶ Results from a randomized control trial of AOT in North Carolina indicate improved outcomes for individuals sustained on an AOT order for longer than an initial 90-day period.²⁷ A study conducted in Summit County, Ohio concluded that participating in AOT for at least six months was associated with a reduction in the number of hospitalizations and days spent in the hospital for individuals enrolled.²⁸

Additionally, research indicates that the vast majority of individuals with schizophrenia respond slowly to antipsychotic medication, with their symptoms still improving even six months after treatment initiation.²⁹ During stabilization, whether it occurs in inpatient or outpatient treatment, an individual needs intensive support and supervision to ensure success. Providing adequate time for mandated treatment ensures that needed services will be available and provided, along with needed case management, increasing the likelihood that the individual will improve and elect to continue treatment voluntarily. The duration of an initial AOT order, accordingly, should not be shorter than 90 days, though research shows even better results following an initial six-month duration. A renewed order for an individual found to be in need of further treatment should be no shorter than 180 days, with one year highly preferable.³⁰ Of the 48 states with AOT laws, all but Arkansas (45 days) allow at least 90 days for initial AOT orders, and 43 of the 48 allow at least 180 days for renewals.

SECTION III: METHODOLOGY

The quality of involuntary treatment laws

To evaluate the involuntary treatment laws of each state in accordance with our policy recommendations, we developed a 100-point grading scale. Our state report card form is intended to provide more detail about the basis for scoring as well as guidance on what specific aspects of a statute could be changed in order to eliminate identified barriers to treatment.

The combined score for emergency evaluation and inpatient commitment laws accounts for 50 points, and the score for AOT laws accounts for the other 50 points. Subtotals within each category comprise points awarded (or lost) for the inclusion or omission of specific statutory components based on the policy recommendations discussed in Section II.

The scoring was computed as follows:

Inpatient commitment / emergency detention: 50 points

| | |
|-------------------------------------------------|--------------------------------------------------------------|
| Emergency evaluation: Up to 15 points | |
| Citizen access to court (emergency evaluation): | Authorizes family / enumerated adults to petition (3 points) |
| | Authorizes any responsible adult to petition (2 points) |
| Quality of petition process: | Procedures clear (2 points) |
| | Timelines clear (2 points) |
| | Responsible entities clear (1 point) |
| <i>Potential demerits:</i> | Requires dual certification (-2 points) |
| | Inconsistent with inpatient standard (-5 points) |
| Emergency hold duration: | At least 48-hour hold allowed (3 points) |
| | At least 72-hour hold allowed (2 points) |
| Inpatient commitment: Up to 35 points | |
| Citizen access to court (inpatient petition): | Authorizes family/enumerated adults to petition (3 points) |
| | Authorizes any responsible adult to petition (2 points) |
| Quality of criteria for danger to self/others: | Criteria for danger to self or others (10 points) |
| <i>Potential demerits:</i> | Vague/ambiguous language (-3 points) |
| | Harm must be imminent (-3 points) |
| Quality of criteria for grave disability: | Expressly includes criteria for grave disability (10 points) |

| | |
|----------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <i>Potential demerits:</i> | Vague/ambiguous language (-3 points) Endangerment must be imminent (-3 points) Requires family/friends to refuse assistance (-3 points) Unreasonably severe harm required (-3 points) |
| Quality of criteria for psychiatric deterioration: | Expressly includes criteria for psychiatric deterioration (10 points) |
| <i>Potential demerit:</i> | Vague/ambiguous language (-3 points) |
| <u>Extra credit:</u> | Specifies court of petition (1 points) |

Outpatient commitment / AOT: 50 points

| | |
|--------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Explicitly authorized: | Statute includes outpatient commitment language (5 points) |
| <i>Potential demerit:</i> | Requires local government to adopt (-3 points) |
| Citizen access to courts (AOT): | Authorizes family/enumerated adults to petition (3 points) Authorizes any responsible adult to petition (2 points) |
| <i>Potential demerit:</i> | Authorizes citizens to petition department only (-2 points) |
| Quality of criteria, shared inpatient/outpatient standard: | Criteria include psychiatric deterioration (10 points) <u>or</u> Adequate grave disability criteria for AOT (5 points) |
| Quality of criteria, separate inpatient/outpatient standard: | Allows treatment history of at least 36 months (2 points) Does not limit to unstable individuals (4 points) Does not limit to those refusing service or currently lacking insight (4 points) |
| <i>Potential demerit:</i> | Does not exclude periods in hospital/incarceration (-1 point) |
| Community access: | Authorizes AOT directly from community as an alternative to hospitalization ("step-up" AOT) (5 points) |
| Quality of procedure: | Procedures clear (1 point) Timelines clear (1 point) Responsible entities clear (1 point) Periodic reporting to court required (1 point) Renewal process clear (1 point) |

| | |
|----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Black robe effect: | Requires that treatment plan be shared with court (5 points) |
| Compliance: | Revocation/nonadherence process clear (5 points) |
| Duration: | Initial order 90 days (2 points) <u>or</u> Initial order greater than 90 days (5 points) Renewal duration 180 days (2 points) <u>or</u> Renewal duration greater than 180 days (5 points) |
| <u>Extra credit:</u> | Specifies court of petition (1 points) Voluntary agreements monitored by court (5 points) |

The raw scores were then converted into one overall letter grade based on total points earned on a 100-point scale.

Conversion of raw scores to overall grades

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87-89 | B+ | 77-79 | C+ | 67-69 | D+ | 59 or below | F |
| 93-96 | A | 83-86 | B | 73-76 | C | 63-66 | D | | |
| 90-92 | A- | 80-82 | B- | 70-72 | C- | 60-62 | D- | | |

SECTION IV: FINDINGS

The quality of involuntary treatment laws

The following chart summarizes the results of our analysis of state practice for civil commitment laws and our grades for each. A detailed breakdown of the scoring for each state, as well as specific findings about the strengths and deficiencies of each state’s laws, may be found within the individual state grade sheets of this report contained in Appendix A.

Of the fifty-one jurisdictions (fifty states plus the District of Columbia), ten earned an A (a score of 90 to 100) while eight received failing grades (a score of 0 to 59).

Minnesota achieved the highest combined score, with 97 out of 100 points. Maryland received the lowest combined score, with 18 out of 100.

Figure 1: Distribution of State Grades



Ranking by Category

To make the most detailed investigation of each state's treatment laws, it is important not to simply look at the overall grade but instead to see how they compare to the other states in each category. A state with a stellar score on AOT may have an abysmal rating on emergency evaluation. As a practical matter, a perfect AOT statute is only able to be applied to those who meet the criteria needed to enter the system. A prohibitively high bar to admission for either emergency evaluation or inpatient commitment thus affects who is able to take advantage of a good outpatient statute, just as a state with excellent laws for emergency or inpatient treatment suffers from the lack of usable outpatient criteria to help ensure continued treatment after discharge. Below is a ranking of each state by category, which assists in providing context for the single grade each state received.

Table 4.0: State Ranks/Scores by Category (Sorted High to Low)

| Emergency (out of 15) | | Inpatient (out of 35) | | AOT (out of 50) | |
|-----------------------|----|-----------------------|----|-----------------|----|
| Arkansas | 15 | Hawaii | 35 | Georgia | 50 |
| Colorado | 15 | Indiana | 35 | Louisiana | 50 |
| Connecticut | 15 | Michigan | 35 | Michigan | 50 |
| Florida | 15 | Minnesota | 35 | Minnesota | 50 |
| Louisiana | 15 | Mississippi | 35 | Oregon | 50 |
| Massachusetts | 15 | North Dakota | 35 | Hawaii | 49 |
| Mississippi | 15 | South Carolina | 35 | New York | 49 |
| Missouri | 15 | Vermont | 35 | Wisconsin | 49 |
| New York | 15 | West Virginia | 35 | Washington | 48 |
| North Dakota | 15 | Arkansas | 32 | Ohio | 47 |
| Ohio | 15 | Idaho | 32 | Texas | 47 |
| Pennsylvania | 15 | Wisconsin | 32 | Alabama | 46 |
| South Dakota | 15 | Alaska | 30 | Pennsylvania | 46 |
| Vermont | 15 | Arizona | 30 | Arizona | 45 |
| Virginia | 15 | Illinois | 30 | Iowa | 45 |
| West Virginia | 15 | Missouri | 30 | Maine | 45 |
| Wisconsin | 15 | Nevada | 30 | New Jersey | 45 |
| Wyoming | 15 | North Carolina | 30 | Idaho | 44 |
| Alaska | 13 | Washington | 30 | Kentucky | 44 |
| Georgia | 13 | New Hampshire | 29 | New Mexico | 44 |
| Kansas | 13 | New Jersey | 29 | Wyoming | 44 |
| Nevada | 13 | Oregon | 29 | Oklahoma | 43 |
| Illinois | 10 | Wyoming | 29 | South Carolina | 43 |
| Indiana | 10 | Colorado | 27 | Arkansas | 42 |
| Kentucky | 10 | Connecticut | 25 | Indiana | 42 |

| Emergency (out of 15) | | Inpatient (out of 35) | | AOT (out of 50) | |
|-----------------------|----|-----------------------|----|-----------------|----|
| Maine | 10 | Iowa | 25 | West Virginia | 42 |
| Maryland | 10 | Kansas | 25 | Missouri | 41 |
| Michigan | 10 | Kentucky | 25 | North Dakota | 41 |
| Minnesota | 10 | Louisiana | 25 | Vermont | 40 |
| Nebraska | 10 | South Dakota | 25 | Virginia | 40 |
| New Mexico | 10 | Utah | 25 | Nevada | 39 |
| North Carolina | 10 | Virginia | 25 | DC | 38 |
| Oklahoma | 10 | Oklahoma | 24 | North Carolina | 38 |
| Rhode Island | 10 | Ohio | 22 | Illinois | 37 |
| Tennessee | 10 | Texas | 22 | New Hampshire | 37 |
| Utah | 10 | Maine | 20 | Utah | 36 |
| Washington | 10 | Montana | 20 | Mississippi | 35 |
| Arizona | 8 | Nebraska | 20 | California | 34 |
| California | 8 | New Mexico | 20 | Montana | 34 |
| DC | 8 | Rhode Island | 20 | Kansas | 33 |
| Iowa | 8 | Georgia | 19 | Florida | 32 |
| New Jersey | 8 | California | 17 | Nebraska | 31 |
| South Carolina | 8 | Florida | 17 | South Dakota | 30 |
| Texas | 8 | Massachusetts | 17 | Tennessee | 30 |
| Idaho | 7 | Tennessee | 17 | Rhode Island | 25 |
| Hawaii | 6 | Pennsylvania | 16 | Colorado | 24 |
| Montana | 5 | DC | 10 | Alaska | 20 |
| New Hampshire | 5 | New York | 10 | Delaware | 18 |
| Oregon | 5 | Alabama | 9 | Connecticut | 0 |
| Alabama | 3 | Delaware | 7 | Maryland | 0 |
| Delaware | 3 | Maryland | 7 | Massachusetts | 0 |

EMERGENCY EVALUATION

Custody duration

We found that state practice overwhelmingly (43 out of 51) comports with our recommendation for a minimum 48-hour emergency custody period. Of these, 35 provide for custody of 72 hours or more, which we identify as a best practice. Only eight states (Delaware, Maine, Maryland, Michigan, Montana, New Hampshire, North Carolina, and Utah) fail to provide at least 48 hours for emergency evaluation. The longest duration of emergency custody is in Louisiana (15 days), followed by Rhode Island (10 days), and both Nebraska and New Mexico (7 days). The shortest duration is in New Hampshire (6 hours).

See Table 4.1 for a complete listing of states in each category.

ACCESS TO COURT FOR CITIZEN PETITIONERS

In Section II of this report we recommend that any responsible adult—and at a minimum, enumerated classes of citizens, such as friends and family—should be authorized to initiate both emergency evaluation and inpatient civil commitment. A small number of states (District of Columbia, Nevada, New Mexico, Oklahoma, Rhode Island, and Tennessee) limit citizen access to court petition to enumerated classes of petitioners in one or more of these categories.

Many states allow only professionals to initiate involuntary evaluation or treatment. We found that statutes authorizing only professionals (no citizens) to initiate proceedings were most common for emergency evaluation, with 20 states failing to provide access to the courts for citizens. Eighteen states fail to provide access to initiate inpatient commitment, and 12 provide no way for citizens to begin a petition for AOT. While 33 states allow citizens to seek AOT for an individual believed to be eligible, 4 of these (California, Illinois, Minnesota, and Washington) allow only for a request for an investigation to be made to the mental health department, and thus provide no direct access to the courts for non-professionals.

See Table 4.2 for a complete listing of states in each category.

Statutory barriers to treatment

As discussed in Section II, we recommend against requiring certification by more than one professional in order to initiate emergency evaluation. We found that five states (Alabama, Alaska, California, Idaho, and New Jersey) have adopted laws with this onerous requirement, which poses an artificial barrier to treatment. Another statutory barrier we recommend against, inconsistency between the standard adopted for emergency evaluation versus inpatient commitment, was identified in six states (Alabama, Arizona, Iowa, Oregon, South Carolina and Texas).

INPATIENT CIVIL COMMITMENT

Danger to Self or Others

We recommend against adopting criteria for either emergency evaluation or inpatient commitment that require imminence of harm for eligibility.

- Six states require imminence of harm to self or others to qualify (Alabama, Delaware, Georgia, Oklahoma, Pennsylvania, Tennessee)
- Seven states require imminent harm due to grave disability (Georgia, Ohio, Oklahoma, Oregon, Rhode Island, Wisconsin, Wyoming)

We further recommend that states prevent issues arising from vagueness or ambiguity in their criteria by including a definition that includes all types of potential harm or danger intended to be a basis for civil commitment to aid law enforcement, families and non-lawyer practitioners.

- Six states (Alabama, California, District of Columbia, Maryland, Oregon, and Texas) fail to adequately define *danger to self or others* within statute

Grave disability

Five jurisdictions do not expressly include grave disability criteria as a basis for civil commitment (Alabama, Delaware, District of Columbia, Maryland and New York). Of the 46 that do, we found that 15 have at least one identified barrier to treatment:

- Three states have vague or ambiguous criteria (New Hampshire, Pennsylvania, Tennessee)
- Seven states require imminent endangerment for intervention (Georgia, Ohio, Oklahoma, Oregon, Rhode Island, Wisconsin, Wyoming)
- Four states require risk of unreasonably severe harm (Massachusetts, Nevada, New Jersey, Pennsylvania)
- Four states require that family and friends refuse assistance for an individual to qualify (Florida, Idaho, New Jersey, Wyoming)

See Table 4.3 for a complete listing of states in each category.

Psychiatric deterioration

We recommend adoption of an inpatient psychiatric deterioration criteria to promote timelier treatment. While 43 states have criteria allowing for commitment based on psychiatric deterioration, only twenty-four include such a criteria as a basis for inpatient (as well as outpatient) commitment.

- Four states have adopted psychiatric deterioration criteria that are vague or ambiguous (Alaska, Arkansas, New Hampshire, Oklahoma)

See Table 4.4 for a complete listing of states in each category. See comments on individual state grade sheets in Appendix A for additional detail.

ASSISTED OUTPATIENT TREATMENT

All but three states (Connecticut, Maryland and Massachusetts) have explicit statutory authority for some version of AOT. Twenty-one states use the same criteria for both inpatient and outpatient treatment, while twenty-seven use at least one separate criteria for outpatient commitment. Either practice can be successful.

Suitable criteria for AOT

An optimal AOT law should allow courts to consider an individual's treatment history and risk for future relapse or decompensation without continued treatment. To be suitable for use for outpatient commitment, the criteria must be written so that a person retains eligibility after discharge. We found that two states with shared inpatient and outpatient criteria (Alaska, Rhode Island) that are, as written, unsuitable for AOT. These states should consider amending the wording of their existing law or adopting separate criteria specific to AOT.

Lookback periods for AOT

We recommend that if consideration of treatment history is limited to a defined lookback period, courts be able to consider at least thirty-six months excluding periods of hospitalization or incarceration. Two states have lookback periods of less than 3 years (Kentucky, 24 months

and Oklahoma, 12 months). Both require two hospitalizations within that very limited period to qualify.

Limitations to eligibility for AOT

We recommend that states remove unreasonable limitations to eligibility for individuals to qualify for assisted outpatient treatment contained in their criteria.

- We recommend against a requirement that an individual refuse voluntary enrollment to qualify for AOT. Alaska requires refusal and Virginia requires affirmative agreement to participate
- We also recommend against any requirement that an individual lack insight to be eligible. California and Delaware require a lack of insight, while Kentucky affirmatively requires anosognosia
- We recommend against criteria worded to require an individual to be currently unstable in order to qualify. Alabama, California, Rhode Island, and Wyoming each use criteria with this requirement

See Table 4.5 for a complete listing of states in each category.

Procedural barriers to use of AOT

- Two states (California, New Mexico) currently require local adoption of an ordinance to use AOT, which presents an unnecessary and burdensome extra step for implementation. California has passed a law reversing this requirement that will be effective in July of 2021
- One state (Tennessee) disallows use of AOT as an alternative to hospitalization (“step-up” AOT) as its mandatory outpatient treatment law explicitly indicates that such treatment must be a “step-down” from inpatient hospitalization

Black robe effect

As discussed in Section II, one of the primary mechanisms of AOT is utilization of the black robe effect. To maximize its impact, we recommend a requirement within statute that a written treatment plan be shared with the court and incorporated into the court order, either expressly or by implication, to add the weight of the judge’s authority to the plan. Though there is likely flexibility within many statutes to allow programs to do this, an express requirement is best.

- Nineteen of the 48 states with AOT laws lack this express requirement (Alaska, Colorado, Delaware, District of Columbia, Idaho, Iowa, Kansas, Mississippi, Montana, Nebraska, New Hampshire, North Dakota, Rhode Island, South Carolina, South Dakota, Tennessee, Utah, Vermont, West Virginia)

To maximize the black robe effect, another critical aspect of AOT laws is to specify the consequences and procedures to be followed in the event an individual does not adhere to the court order. We found that the great majority of states (41 of 48) do provide such express guidance.

- Seven states (Alaska, Colorado, Delaware, Illinois, New Hampshire, Rhode Island and Utah) fail to provide procedural guidance for nonadherence to an AOT order

Duration of AOT orders

We recommend that an initial AOT order should be a minimum of 90 days in duration. We found that 47 of 48 states allow for at least 90 days for initial orders.

- One state (Arkansas) authorizes only 45 days for an initial order

We further recommend that a renewed order (for individuals who qualify) should be a minimum of 180 days in duration. Fort-three of 48 states meet this best practice recommendation.

- Five states (Delaware, Florida, Indiana, Kansas, Mississippi) allow for a continued order of less than 180 days

Court monitoring of voluntary settlement agreements

One provision in AOT laws that we recommend states consider is the practice of filing settlement agreements with the court so that they can be supervised and handled in the same manner as contested orders. This practice gives individuals agreeing to a plan (following a petition for AOT) the benefit of the black robe effect and added support – including the ability to hold mental health officials and providers accountable for their responsibilities under the order. While courts can choose to follow this procedure (as several do), express statutory authorization is best to ensure the practice continues regardless of staff changes and that practice is consistent throughout a state.

- Only one state (Illinois) expressly requires this by statute though Nevada courts have adopted the practice in implementation

See Table 4.6 for a complete listing of states in each category.

Table 4.1. Duration of emergency custody

| Less than 48 Hours | At least 48 hours | 72 hours or more |
|-----------------------------|---------------------------------|------------------------------------|
| Delaware (24 hours) | Arizona (48 hours) | Alabama (by 5th business day) |
| Maine (24 hours) | District of Columbia (48 hours) | Alaska (72 hours) |
| Maryland (30 hours) | Georgia (48 hours) | Arkansas (72 hours) |
| Michigan (24 hours) | Hawaii (48 hours) | California (72 hours) |
| Montana (next business day) | Iowa (48 hours) | Colorado (72 hours) |
| New Hampshire (6 hours) | Kansas (48 hours) | Connecticut (72 hours) |
| North Carolina (24 hours) | South Carolina (48 hours) | Florida (72 hours) |
| Utah (24 hours) | Texas (48 hours) | Idaho (5 days) |
| | Total = 8 | Illinois (72 hours) |
| | | Indiana (72 hours) |
| | | Kentucky (72 hours) |
| | | Louisiana (15 days) |
| | | Massachusetts (3 days) |
| | | Minnesota (72 hours) |
| | | Mississippi (72 hours) |
| | | Missouri (96 hours) |
| | | Nebraska (7 days) |
| | | Nevada (72 hours) |
| | | New Jersey (72 hours) |
| | | New Mexico (7 days) |
| | | New York (72 hours) |
| | | North Dakota (by 4th business day) |
| | | Ohio (3 court days) |
| | | Oklahoma (120 hours) |
| | | Oregon (5 judicial days) |
| | | Pennsylvania (120 hours) |
| | | Rhode Island (10 days) |
| | | South Dakota (5 days) |
| | | Tennessee (5 days) |
| | | Vermont (72 hours) |
| | | Virginia (72 hours) |
| | | Washington (72 hours)* |
| | | West Virginia (72 hours) |
| | | Wisconsin (72 hours) |
| | | Wyoming (72 hours) |
| | | *120 hours beginning 7/2/26 |

Table 4.2. Access to Courts for Citizens

| WHO CAN PETITION – EMERGENCY EVALUATION | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Only professionals | Enumerated class(es) only | Any responsible adult |
| Alabama, California, Delaware, District of Columbia, Hawaii, Idaho, Illinois, Indiana, Kentucky, Minnesota, Montana, Nebraska, New Hampshire, New Jersey, New Mexico, Oklahoma, Oregon, Rhode Island, Tennessee, Washington | Nevada | Alaska, Arizona, Arkansas, Colorado, Connecticut, Florida, Georgia, Iowa, Kansas, Louisiana, Maine, Maryland, Massachusetts, Michigan, Mississippi, Missouri, New York, North Carolina, North Dakota, Ohio, Pennsylvania, South Carolina, South Dakota, Texas, Utah, Vermont, Virginia, West Virginia, Wisconsin, Wyoming |
| WHO CAN PETITION – INPATIENT COMMITMENT | | |
| Only professionals | Enumerated class(es) only | Any responsible adult |
| Alaska, Arizona, California, Colorado, Delaware, Florida, Illinois, Maine, Maryland, Massachusetts, Missouri, Montana, Nebraska, New Jersey, New Mexico, New York, North Carolina, Washington | District of Columbia, Nevada, Oklahoma, Rhode Island, Tennessee | Alabama, Arkansas, Connecticut, Georgia, Hawaii, Idaho, Indiana, Iowa, Kansas, Kentucky, Louisiana, Michigan, Minnesota, Mississippi, New Hampshire, North Dakota, Ohio, Oregon, Pennsylvania, South Carolina, South Dakota, Texas, Utah, Vermont, Virginia, West Virginia, Wisconsin, Wyoming |
| WHO CAN PETITION – OUTPATIENT COMMITMENT | | |
| Only professionals | Enumerated class(es) only | Any responsible adult |
| Alaska, Arizona, Colorado, Delaware, Florida, Maine, Missouri, Montana, Nebraska, North Carolina, Oklahoma, Tennessee | District of Columbia, Nevada, New Mexico, Rhode Island | Alabama, Arkansas, California,* Georgia, Hawaii, Idaho, Illinois,* Indiana, Iowa, Kansas, Kentucky, Louisiana, Michigan, Minnesota,* Mississippi, New Hampshire, New Jersey, New York, North Dakota, Ohio, Oregon, Pennsylvania, South Carolina, South Dakota, Texas, Utah, Vermont, Virginia, Washington,* West Virginia, Wisconsin, Wyoming * Can petition county mental health department only. |

Table 4.3. Statutory barriers, grave disability

| No express grave disability standard | Has vague or ambiguous grave disability standard | Grave disability standard requires imminent harm | Grave disability standard requires refusal of help | Grave disability standard requires risk of unreasonably severe harm |
|---------------------------------------------------------------------|--------------------------------------------------|-----------------------------------------------------------------------------------------------|----------------------------------------------------|---------------------------------------------------------------------|
| Alabama Delaware District of Columbia Maryland New York | New Hampshire Pennsylvania Tennessee | Georgia Ohio Oklahoma Oregon Pennsylvania Rhode Island Wisconsin Wyoming | Florida Idaho New Jersey Wyoming | Massachusetts Nevada New Jersey Pennsylvania |

Table 4.4. Psychiatric deterioration standard

| Has psychiatric deterioration standard | Has no psychiatric deterioration standard | Has vague or ambiguous psychiatric deterioration standard |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| Alaska Arizona Arkansas Colorado Hawaii Idaho Illinois Indiana Michigan Minnesota Mississippi Missouri Nevada New Hampshire North Carolina North Dakota Oklahoma Oregon South Carolina Vermont Washington West Virginia Wisconsin Wyoming | Alabama California Connecticut Delaware District of Columbia Florida Georgia Iowa Kansas Kentucky Louisiana Maine Maryland Massachusetts Montana Nebraska New Jersey New Mexico New York Ohio Pennsylvania Rhode Island South Dakota Tennessee Texas Utah Virginia | Alaska Arkansas New Hampshire Oklahoma |

Table 4.5. Statutory barriers to eligibility, AOT

| Lookback period less than 36 months | Must refused treatment or affirmatively agree | Must lack insight or be found to have anosognosia | Must be currently unstable for eligibility |
|-------------------------------------|-----------------------------------------------|---------------------------------------------------|--------------------------------------------|
| Kentucky Oklahoma | Alaska, Virginia | California, Delaware, Kentucky | Alabama, California, Rhode Island, Wyoming |

Table 4.6. Procedural barriers to AOT

| Requires local adoption | No "step-up" AOT possible under statute | Written treatment plan not required to be shared with court | No nonadherence procedure | Original order > 90 days | Renewal order > 180 days |
|----------------------------|-----------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| California*, New Mexico | Tennessee | Alaska, Colorado, Delaware, District of Columbia, Idaho, Iowa, Kansas, Mississippi, Montana, Nebraska, New Hampshire, North Dakota, Rhode Island, South Carolina, South Dakota, Tennessee, Utah, Vermont, West Virginia | Alaska, Colorado, Delaware, Illinois, New Hampshire, Rhode Island, Utah | Arkansas (45 days) | Delaware (90 days) Florida (90 days) Indiana (90 days) Kansas (first renewal 90 days, second can be 180) Mississippi (90 days) |
| *Changes July of 2021 | | | | | |

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Appendix A: State Report Cards

Alabama State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

| PART ONE: Inpatient Commitment Statute (up to 50 points) | | | |
|---------------------------------------------------------------------------------------|---------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. Citizen access to court, emergency evaluation (5 pts) | Ala. Code § 22-52-91(a) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) | 0 |
| 2. Quality of emergency petition process (5 pts) | Ala. Code § 22-52-91 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Requires certification by more than one professional (-2 pts) <input checked="" type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | -2 |
| 3. Emergency hold duration (5 pts) | Ala. Code § 22-52-91(d) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | Ala. Code § 22-52-1.2(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Ala. Code § 22-52-10.4(a) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input checked="" type="checkbox"/> Language is vague/ambiguous (-3 pts) <input checked="" type="checkbox"/> Harm must be imminent (-3 pts) | 4 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 0 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) Comment: While language regarding psychiatric deterioration exists in the statute, the requirement that such conditions be present <i>in addition to</i> a current risk of harm to self or others prevents its actual application. | 0 |
| SUBTOTAL | | | 12 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | Ala. Code § 22-52-91(d) | Probate court | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 13 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | Ala. Code § 22-52-10.2 | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Criteria sufficiently broad to provide actual access (up to 10 pts) | Ala. Code § 22-52-10.2 | <p>Evaluate applicable provision only:</p> <p><input type="checkbox"/> If inpatient/outpatient criteria are the same:</p> <p style="padding-left: 20px;"><input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) or</p> <p style="padding-left: 20px;"><input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts)</p> <p>or</p> <p><input checked="" type="checkbox"/> If outpatient criteria are distinct from inpatient criteria:</p> <p style="padding-left: 20px;"><input checked="" type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts)</p> <p style="padding-left: 20px;">No explicit reference, but no bar</p> <p style="padding-left: 40px;"><input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt)</p> <p style="padding-left: 20px;"><input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts)</p> <p style="padding-left: 20px;"><input checked="" type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts)</p> <p>Requires lack of capacity to make treatment decisions</p> | 6 |
| 3. Authorizes AOT directly from community (5 pts) | Ala. Code § 22-52-1.2(a) | | 5 |
| 4. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Ala. Code §§ 22-52-10.2; 22-52-10.3 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 5 |
| 5. Procedures require the treatment plan to be shared with the court (5 pts) | Ala. Code § 22-52-10.3 | | 5 |
| 6. Specifies procedures and consequences for nonadherence (5 pts) | Ala. Code § 22-52-10.3 | | 5 |
| 7. Duration of initial order | Ala. Code § 22-52-10.3(d) | <input type="checkbox"/> = 90 days (2 pts) or <input checked="" type="checkbox"/> > 90 days (5 pts) 150 days | 5 |
| 8. Duration of continued order | | <input type="checkbox"/> = 180 days (2 pts) or <input checked="" type="checkbox"/> > 180 days (5 pts) | 5 |
| SUBTOTAL | | | 46 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | Ala. Code § 22-52-10.3 | Probate court | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 47 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 13 |
| PART TWO TOTAL | | | 47 |
| TOTAL | | | 60 |
| GRADE | | | D- |

Alaska State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

| PART ONE: Inpatient Commitment Statute (up to 50 points) | | | |
|---------------------------------------------------------------------------------------|----------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| Criterion | Citation | Specifications | Points |
| 1. Citizen access to court, emergency evaluation (5 pts) | Alaska Stat. § 47.30.700(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | Alaska Stat. § 47.30.700(a) Alaska Stat. § 47.30.710(a) | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 3 |
| 3. Emergency hold duration (5 pts) | Alaska Stat. § 47.30.715 | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) 72 hours | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | Alaska Stat. § 47.30.730(a) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) Two examining mental health professionals | 0 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Alaska Stat. §§ 47.30.915(12) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) Comment: There is a discrepancy in Alaska's commitment standard under § 47.30.755(a) as it includes the term "likely to cause harm," while the term defined under § 47.30.915(12) is "likely to cause serious harm." | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Alaska Stat. § 47.30.915(9)(A) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | Alaska Stat. § 47.30.915(9)(B) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 10 |
| SUBTOTAL | | | 43 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | Alaska Stat. § 47.30.915 | "A superior court of the state" | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 44 |

| PART TWO: Outpatient Commitment Statute (up to 50 points) | | | |
|-----------------------------------------------------------|-----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. AOT explicitly authorized (5 pts) | Alaska Stat. § 47.30.755(b) | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | Alaska Stat. § 47.30.755(b) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 0 |

| | | | |
|------------------------------------------------------------------------------|---------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Alaska Stat. §§ 47.30.915(12), 47.30.755(b) | <p>Evaluate applicable provision only:</p> <p><input checked="" type="checkbox"/> If inpatient/outpatient criteria are the same:</p> <p><input checked="" type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) BUT 4 POINTS DEDUCTED FOR SPECIAL CIRCUMSTANCE. SEE COMMENT BELOW; <u>or</u></p> <p><input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts)</p> <p>or</p> <p><input type="checkbox"/> If outpatient criteria are distinct from inpatient criteria:</p> <p><input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts)</p> <p><input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt)</p> <p><input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts)</p> <p><input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts)</p> <p>Comment: Alaska’s shared commitment criteria are themselves broad enough to address a need for AOT. However, by restricting AOT to respondents currently refusing voluntary treatment, § 47.30.755(b) excludes those for whom there is good reason to doubt the reliability of an expressed willingness to maintain treatment. Language should be added to include those not refusing but who may later refuse during the order.</p> | 6 |
| 4. Authorizes AOT directly from community (5 pts) | Alaska Stat. § 47.30.730(a)(2) | Petition for 30-day commitment (inpatient or outpatient) must be filed in the course of a 72-hour hold | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Alaska Stat. § 47.30.755(b) | <input type="checkbox"/> Process specified and reasonable (1 pt) <input type="checkbox"/> Timelines specified and reasonable (1 pt) <input type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Periodic reporting to court required (1 pt) <input type="checkbox"/> Renewal process expressly specified (1 pt) | 0 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | Alaska Stat. § 47.30.755(b) | | 0 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Alaska Stat. § 47.30.755(b) | | 0 |
| 8. Duration of initial order | Alaska Stat. §§ 47.30.730(5), 47.30.755(b) | <input checked="" type="checkbox"/> = 90 days (2 pts) <u>or</u> <input type="checkbox"/> > 90 days (5 pts) | 2 |
| 9. Duration of continued order | Alaska Stat. §§ 47.30.755(b), 47.30.770(c) | <input checked="" type="checkbox"/> = 180 days (2 pts) <u>or</u> <input type="checkbox"/> > 180 days (5 pts) | 2 |
| SUBTOTAL | | | 20 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | Alaska Stat. § 47.30.915 | “A superior court of the state” | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 21 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 44 |
| PART TWO TOTAL | | | 21 |
| TOTAL | | | 65 |
| GRADE | | | D |

Arizona State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|---------------------------------------------------------------------------------------|------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. Citizen access to court, emergency evaluation (5 pts) | Ariz. Rev. Stat. §§ 36-520(A), 36-524(B) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | Ariz. Rev. Stat. §§ 36-524(C), 36-525(B), and 36-501 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pts) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input checked="" type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) Comment: Emergency evaluation requires belief that the person is "a danger to self or others," omitting several alternative grounds for civil commitment. | 0 |
| 3. Emergency hold duration (5 pts) | Ariz. Rev. Stat. § 36-520(D) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input type="checkbox"/> At least 72-hour hold allowed (2 pts) | 3 |
| 4. Citizen access to court, inpatient petition (5 pts) | Ariz. Rev. Stat. § 36-531(B) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) | 0 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Ariz. Rev. Stat. §§ 36-501(7), (8) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Ariz. Rev. Stat. § 36-501(15) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe risk required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | Ariz. Rev. Stat. § 36-501(32) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 10 |
| SUBTOTAL | | | 38 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | | | 0 |
| Extra Credit | | | 0 |
| PART ONE TOTAL | | | 38 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------------|---------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | Ariz. Rev. Stat. § 36-540(A)(1) | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | Ariz. Rev. Stat. § 36-531(B) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 0 |

| | | | |
|------------------------------------------------------------------------------|----------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Ariz. Rev. Stat. § 36-540(A) | <p>Evaluate applicable provision only:</p> <input checked="" type="checkbox"/> If inpatient/outpatient criteria are the same: <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u> <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) <p>or</p> <input type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <ul style="list-style-type: none"> <input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <ul style="list-style-type: none"> <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 10 |
| 4. Authorizes AOT directly from community (5 pts) | Ariz. Rev. Stat. § 36-540(A) | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Ariz. Rev. Stat. § 36-540(E)(i)(1)-(6) | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 5 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | Ariz. Rev. Stat. § 36-540.01 | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Ariz. Rev. Stat. § 36-540(E)(4) | | 5 |
| 8. Duration of initial order | Ariz. Rev. Stat. § 36-540(D) | <input type="checkbox"/> = 90 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 90 days (5 pts) | 5 |
| 9. Duration of continued order | Ariz. Rev. Stat. § 36-540(D);(F) | <input type="checkbox"/> = 180 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 180 days (5 pts) | 5 |
| SUBTOTAL | | | 45 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | | | |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 0 |
| PART TWO TOTAL | | | 45 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 38 |
| PART TWO TOTAL | | | 45 |
| TOTAL | | | 83 |
| GRADE | | | B |

Arkansas State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|---------------------------------------------------------------------------------------|------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 1. Citizen access to court, emergency evaluation (5 pts) | Ark. Code Ann. § 20-47-210(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | Ark. Code Ann. § 20-47-210 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | Ark. Code Ann. § 20-47-210(a)(1) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | Ark. Code Ann. § 20-47-207(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Ark. Code Ann. § 20-47-207 | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Ark. Code Ann. § 20-47-207(c)(1)(c) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | Ark. Code Ann. § 20-47-207(c)(2)(D)(iii) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input checked="" type="checkbox"/> Language is vague/ambiguous (-3 pts) Comment: The statute includes language about a specific treatment history, which is not needed for the inpatient context and overly complicates the determination. | 7 |
| SUBTOTAL | | | 47 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | Ark. Code Ann. § 20-47-207(a) | <i>Circuit Clerk of the County</i> | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 48 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------------|-------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | Ark. Code Ann. § 20-47-207 | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | Ark. Code Ann. § 20-47-210(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|--------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Ark. Code Ann. § 20-47-207(c)(1) (D) | <p>Evaluate applicable provision only:</p> <input checked="" type="checkbox"/> If inpatient/outpatient criteria are the same: <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u> <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) <p>or</p> <input type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <ul style="list-style-type: none"> <input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <ul style="list-style-type: none"> <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 10 |
| 4. Authorizes AOT directly from community (5 pts) | Ark. Code Ann. § 20-47-218 | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Ark. Code Ann. § 20-47-218 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 5 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | Ark. Code Ann. § 20-47-218(D) | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Ark. Code Ann. § 20-47-219 | | 5 |
| 8. Duration of initial order | Ark. Code Ann. § 20-47-214 | <input type="checkbox"/> = 90 days (2 pts) <u>or</u> <input type="checkbox"/> > 90 days (5 pts) 45 days | 0 |
| 9. Duration of continued order | Ark. Code Ann. § 20-47-215 | <input checked="" type="checkbox"/> = 180 days (2 pts) <u>or</u> <input type="checkbox"/> > 180 days (5 pts) | 2 |
| SUBTOTAL | | | 42 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | Ark. Code Ann. § 20-47-207 | <i>Circuit Clerk of the County</i> | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 43 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 48 |
| PART TWO TOTAL | | | 43 |
| TOTAL | | | 91 |
| GRADE | | | A- |

California State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|---------------------------------------------------------------------------------------|--------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 1. Citizen access to court, emergency evaluation (5 pts) | Cal. Welf. & Inst. Code § 5150 | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) | 0 |
| 2. Quality of emergency petition process (5 pts) | Cal. Welf. & Inst. Code § 5150 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 3 |
| 3. Emergency hold duration (5 pts) | Cal. Welf. & Inst. Code § 5150(a) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) 72 hours | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | Cal. Welf. & Inst. Code § 5251 | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) | 0 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Cal. Welf. & Inst. Code § 5250 | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input checked="" type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 7 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Cal. Welf. & Inst. Code § 5008(h)(1) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 0 |
| SUBTOTAL | | | 25 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | | | |
| Extra Credit | | | |
| PART ONE TOTAL | | | 25 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------------|-----------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | Cal. Welf. & Inst. Code § 5346 | <input checked="" type="checkbox"/> Requires local government to adopt (-3 pts) Comment: AB 1976 removes this requirement but does not go into effect until July of 2021. | 2 |
| 2. Citizen access to court for AOT (5 pts) | Cal. Welf. & Inst. Code § 5346(b) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input checked="" type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 3 |

| | | | |
|------------------------------------------------------------------------------|-----------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Cal. Welf. & Inst. Code § 5346 | <p>Evaluate applicable provision only:</p> <p><input type="checkbox"/> If inpatient/outpatient criteria are the same:</p> <p><input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u></p> <p><input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts)</p> <p>or</p> <p><input checked="" type="checkbox"/> If outpatient criteria are distinct from inpatient criteria:</p> <p><input checked="" type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts)</p> <p><input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt)</p> <p>Comment: The language of Cal. Welf. & Inst. Code § 5346(a)(4) excludes only periods of hospitalization or incarceration that “immediately precede” the filing of the petition.</p> <p><input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts)</p> <p><input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts)</p> <p>Comment: Statutory language requires an individual’s condition to be “currently deteriorating” at the time of the petition, which is poorly suited to outpatient orders at discharge for stabilized individuals.</p> | 2 |
| 4. Authorizes AOT directly from community (5 pts) | Cal. Welf. & Inst. Code § 5346(a) | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Cal. Welf. & Inst. Code § 5346 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 5 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | Cal. Welf. & Inst. Code § 5346 | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Cal. Welf. & Inst. Code § 5346(d)(6) | | 5 |
| 8. Duration of initial order | Cal. Welf. & Inst. Code § 5346(d)(5)(B) | <input type="checkbox"/> = 90 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 90 days (5 pts) | 5 |
| 9. Duration of continued order | Cal. Welf. & Inst. Code § 5346(g) | <input checked="" type="checkbox"/> = 180 days (2 pts) <u>or</u> <input type="checkbox"/> > 180 days (5 pts) | 2 |
| SUBTOTAL | | | 34 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | Cal. Welf. & Inst. Code § 5346(b)(1) | <i>Superior court</i> | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 35 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 25 |
| PART TWO TOTAL | | | 35 |
| TOTAL | | | 60 |
| GRADE | | | D- |

Colorado State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|---------------------------------------------------------------------------------------|--------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. Citizen access to court, emergency evaluation (5 pts) | Colo. Rev. Stat. § 27-65-106(2) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | Colo. Rev. Stat. § 27-65-106(3) | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | Colo. Rev. Stat. § 27-65-106(6) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) 72 hours | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | Colo. Rev. Stat. §§ 27-65-107, 27-65-108 | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) Following 72-hour hold, "a professional person" | 0 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Colo. Rev. Stat. §§ 27-65-102(4.5) (a)–(b) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Colo. Rev. Stat. § 27-65-102(9) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | Colo. Rev. Stat. § 27-65-102(9) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 10 |
| SUBTOTAL | | | 45 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | Colo. Rev. Stat. § 27-65-102(3) | Any district court of the state of Colorado and probate court in the city and county of Denver | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 46 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------------|---------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | Colo. Rev. Stat. § 27-65-107(6) | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | Colo. Rev. Stat. § 27-65-107 | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 0 |

| | | | |
|------------------------------------------------------------------------------|------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Colo. Rev. Stat. § 27-65-102(9) | <p>Evaluate applicable provision only:</p> <p><input checked="" type="checkbox"/> If inpatient/outpatient criteria are the same:</p> <p><input checked="" type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u></p> <p><input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts)</p> <p>or</p> <p><input type="checkbox"/> If outpatient criteria are distinct from inpatient criteria:</p> <p><input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts)</p> <p><input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt)</p> <p><input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts)</p> <p><input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts)</p> | 10 |
| 4. Authorizes AOT directly from community (5 pts) | Colo. Rev. Stat. § 27-65-107 | After a period of short-term detention | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Colo. Rev. Stat. § 27-65-107 | <p><input type="checkbox"/> Process specified and reasonable (1 pt)</p> <p><input type="checkbox"/> Timelines specified and reasonable (1 pt)</p> <p><input type="checkbox"/> Responsible entities identified (1 pt)</p> <p><input type="checkbox"/> Periodic reporting to court required (1 pt)</p> <p><input type="checkbox"/> Renewal process expressly specified (1 pt)</p> <p>Comment: While detail is provided for the inpatient commitment process, the limitation under Colo. Rev. Stat. § 27-65-107(6) that court hearings be held only upon respondent's written request is a barrier to AOT best practice.</p> | 0 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | | | 0 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | | | 0 |
| 8. Duration of initial order | Colo. Rev. Stat. § 27-65-107(1) | <p><input checked="" type="checkbox"/> = 90 days (2 pts) <u>or</u></p> <p><input type="checkbox"/> > 90 days (5 pts)</p> | 2 |
| 9. Duration of continued order | Colo. Rev. Stat. §§ 27-65-108, 27-65-109 | <p><input checked="" type="checkbox"/> = 180 days (2 pts) <u>or</u></p> <p><input type="checkbox"/> > 180 days (5 pts)</p> <p>Comment: Long-term care requires a separate petition and hearing. Orders for long-term treatment are for an undefined length of time. Each extension must not exceed six months, with no restriction on number of extensions.</p> | 2 |
| SUBTOTAL | | | 24 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | Colo. Rev. Stat. § 27-65-102(3) | Any district court of the state of Colorado and probate court in the city and county of Denver | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 25 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 46 |
| PART TWO TOTAL | | | 25 |
| TOTAL | | | 71 |
| GRADE | | | C- |

Connecticut State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|---------------------------------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 1. Citizen access to court, emergency evaluation (5 pts) | Conn. Gen. Stat. § 17a-503 | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | Conn. Gen. Stat. § 17a-503(a)–(d) | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | Conn. Gen. Stat. §§ 17a-503, 17a-502 | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) 72 hours, then under emergency certificate for up to 15 days | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | Conn. Gen. Stat. § 17a-497(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Conn. Gen. Stat. § 17a-495(a) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Conn. Gen. Stat. § 17a-495(a) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 0 |
| SUBTOTAL | | | 40 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | Conn. Gen. Stat. § 17a-497(a) | Probate court | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 41 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------------|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 0 |
| 2. Citizen access to court for AOT (5 pts) | | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 0 |

| | | | |
|------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | | <p>Evaluate applicable provision only:</p> <p><input type="checkbox"/> If inpatient/outpatient criteria are the same:</p> <p style="padding-left: 20px;"><input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u></p> <p style="padding-left: 20px;"><input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts)</p> <p>or</p> <p><input type="checkbox"/> If outpatient criteria are distinct from inpatient criteria:</p> <p style="padding-left: 20px;"><input type="checkbox"/> Allows consideration of length of treatment history \geq 36 months (2 pts)</p> <p style="padding-left: 40px;"><input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt)</p> <p style="padding-left: 20px;"><input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts)</p> <p style="padding-left: 20px;"><input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts)</p> | 0 |
| 4. Authorizes AOT directly from community (5 pts) | | | 0 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | | <p><input type="checkbox"/> Process specified and reasonable (1 pt)</p> <p><input type="checkbox"/> Timelines specified and reasonable (1 pt)</p> <p><input type="checkbox"/> Responsible entities identified (1 pt)</p> <p><input type="checkbox"/> Periodic reporting to court required (1 pt)</p> <p><input type="checkbox"/> Renewal process expressly specified (1 pt)</p> | 0 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | | | 0 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | | | 0 |
| 8. Duration of initial order | | <p><input type="checkbox"/> = 90 days (2 pts) <u>or</u></p> <p><input type="checkbox"/> > 90 days (5 pts)</p> | 0 |
| 9. Duration of continued order | | <p><input type="checkbox"/> = 180 days (2 pts) <u>or</u></p> <p><input type="checkbox"/> > 180 days (5 pts)</p> | 0 |
| SUBTOTAL | | | 0 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | | | |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 0 |
| PART TWO TOTAL | | | 0 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 41 |
| PART TWO TOTAL | | | 0 |
| TOTAL | | | 41 |
| GRADE | | | F |

Delaware State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center’s values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state’s assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|---------------------------------------------------------------------------------------|----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 1. Citizen access to court, emergency evaluation (5 pts) | 16 Del. C. § 5004 | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) “Any person” may ask a peace officer or mental health screener for assistance. A mental health screener must initiate emergency detention. | 0 |
| 2. Quality of emergency petition process (5 pts) | 16 Del. C. § 5004 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 3 |
| 3. Emergency hold duration (5 pts) | 16 Del. C. § 5005(e) | <input type="checkbox"/> At least 48-hour hold allowed (3 pts) <input type="checkbox"/> At least 72-hour hold allowed (2 pts) | 0 |
| 4. Citizen access to court, inpatient petition (5 pts) | 16 Del. C. §§ 5007, 5008 | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) A designated treatment facility, hospital, or outpatient provider. After provisional admission, only a hospital may petition. | 0 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | 16 Del. C. §§ 5001(3), (4) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input checked="" type="checkbox"/> Harm must be imminent (-3 pts) | 7 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 0 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 0 |
| SUBTOTAL | | | 10 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | 16 Del. C. § 5001 | The superior court or the family court of the state | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 11 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------|-------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | 16 Del. C. § 5013 | <input type="checkbox"/> Requires local government to adopt (-3 pts) Referred to as “involuntary outpatient treatment over objection” | 5 |

| | | | |
|------------------------------------------------------------------------------|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 2. Citizen access to court for AOT (5 pts) | 16 Del. C. § 5007 | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 0 |
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | 16 Del. C. § 5013 | <p>Evaluate applicable provision only:</p> <input type="checkbox"/> If inpatient/outpatient criteria are the same: <ul style="list-style-type: none"> <input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u> <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) <p>or</p> <input checked="" type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <ul style="list-style-type: none"> <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input checked="" type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) <p>Comment: Requires either refusal of voluntary services or current incapacity to determine whether treatment is necessary.</p> | 6 |
| 4. Authorizes AOT directly from community (5 pts) | 16 Del. C. § 5007 | An outpatient provider may seek to have the individual placed on involuntary outpatient treatment over objection | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | | <input type="checkbox"/> Process specified and reasonable (1 pt) <input type="checkbox"/> Timelines specified and reasonable (1 pt) <input type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Periodic reporting to court required (1 pt) <input type="checkbox"/> Renewal process expressly specified (1 pt) | 0 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | | | 0 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | | | 0 |
| 8. Duration of initial order | 16 Del. C. § 5013(c) | <input checked="" type="checkbox"/> = 90 days (2 pts) <u>or</u> <input type="checkbox"/> > 90 days (5 pts) | 2 |
| 9. Duration of continued order | | <input type="checkbox"/> = 180 days (2 pts) <u>or</u> <input type="checkbox"/> > 180 days (5 pts) 90 days | 0 |
| SUBTOTAL | | | 18 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | 16 Del. C. § 5001 | The superior court or the family court of the state | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 19 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 11 |
| PART TWO TOTAL | | | 19 |
| TOTAL | | | 30 |
| GRADE | | | F |

District of Columbia Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center’s values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state’s assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

| PART ONE: Inpatient Commitment Statute (up to 50 points) | | | |
|---------------------------------------------------------------------------------------|-------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| Criterion | Citation | Specifications | Points |
| 1. Citizen access to court, emergency evaluation (5 pts) | D.C. Code Ann. § 21-521 | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) | 0 |
| 2. Quality of emergency petition process (5 pts) | D.C. Code Ann. § 21-522 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) FD-12 petition process | 5 |
| 3. Emergency hold duration (5 pts) | D.C. Code Ann. § 21-523 | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input type="checkbox"/> At least 72-hour hold allowed (2 pts) 48 hours | 3 |
| 4. Citizen access to court, inpatient petition (5 pts) | D.C. Code Ann. § 21-541(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) Spouse, parent, legal guardian | 3 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | D.C. Code Ann. § 21-545(b)(2) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input checked="" type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 7 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) Comment: Court opinion has read “grave disability” as a qualifying “danger to self,” but the code is not explicit and use of this provision for grave disability has decreased sharply. | 0 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) Comment: Standard lacks consideration of future deterioration, but impact softened by language taking focus off current condition (“likely to injure self or others if not committed”). | 0 |
| SUBTOTAL | | | 18 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | | | |
| Extra Credit | | | 0 |
| PART ONE TOTAL | | | 18 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|------------------------------------------------------------------------------|------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | D.C. Code Ann. § 21-545(b)(2) | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | DC Code Ann. § 21-541(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 3 |
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | D.C. Code Ann. § 21-545(b)(2) | Evaluate applicable provision only: <input checked="" type="checkbox"/> If inpatient/outpatient criteria are the same: <input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u> <input checked="" type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) or <input type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input type="checkbox"/> Does not limit application to those refusing service/lacking insight (4 pts) | 5 |
| 4. Authorizes AOT directly from community (5 pts) | D.C. Code Ann. § 21-541(a) | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | D.C. Code Ann. §§ 21-541 to 21-548 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 5 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | | | 0 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | D.C. Code Ann. § 21-548 | | 5 |
| 8. Duration of initial order | D.C. Code Ann. § 21-545(b)(2) | <input type="checkbox"/> = 90 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 90 days (5 pts) One year | 5 |
| 9. Duration of continued order | D.C. Code Ann. § 21-545.01 | <input type="checkbox"/> = 180 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 180 days (5 pts) One year | 5 |
| SUBTOTAL | | | 38 |

| PART TWO: Extra Credit | | | |
|----------------------------------------------------------------|--|--|----|
| 1. Specifies court for AOT (1 pt) | | | |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 0 |
| PART TWO TOTAL | | | 38 |

| FINAL SCORE | |
|--------------------|----|
| PART ONE TOTAL | 18 |
| PART TWO TOTAL | 38 |
| TOTAL | 56 |
| GRADE | F |

Florida State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|------------------------------------------------------------------------------|----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 1. Citizen access to court, emergency evaluation (5 pts) | Fla. Stat. § 394.463(2)(a)(1) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | Fla. Stat. § 394.463(2) | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | Fla. Stat. § 394.463(2)(g) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | Fla. Stat. § 394.463(2)(g)(4) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) Facility administrator only | 0 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Fla. Stat. § 394.467(1)(a)(2)(b) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Fla. Stat. § 394.467(1)(a)(2)(a) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input checked="" type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 7 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 0 |
| SUBTOTAL | | | 32 |

PART ONE: Extra Credit

| | | | |
|---------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------|-----------|
| 1. Specifies in which court a petition for inpatient commitment be filed (1 pt) | Fla. Stat. § 394.455(10) | <i>Circuit court in county where person is located</i> | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 33 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------------|-----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | Fla. Stat. § 394.4655 | <input type="checkbox"/> Requires local government to adopt (-3 pts) <i>Referred to as "involuntary outpatient services"</i> | 5 |
| 2. Citizen access to court for AOT (5 pts) | Fla. Stat. § 394.4655(4)(a) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) <i>Petitioning limited to facility administrators</i> | 0 |

| | | | |
|------------------------------------------------------------------------------|--------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Fla. Stat. § 394.4655(2) | <p>Evaluate applicable provision only:</p> <p><input type="checkbox"/> If inpatient/outpatient criteria are the same: <input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) or <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability (5 pts)</p> <p>or</p> <p><input checked="" type="checkbox"/> If inpatient/outpatient criteria are distinct: <input checked="" type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input checked="" type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts)</p> <p>Comment: AOT eligibility requirement under Fla. Stat. § 394.4655(2)(f) that person “has refused voluntary services” can only be overcome if the person currently lacks capacity to make treatment decisions. This is too narrow, preventing eligibility of many unlikely to maintain voluntary treatment based on history.</p> | 6 |
| 4. Authorizes AOT directly from community (5 pts) | Fla. Stat. § 394.4655(4)(a) | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Fla. Stat. § 394.4655 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 4 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | Fla. Stat. § 394.4655(4)(b) | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Fla. Stat. § 394.4655(7)(b)(3) | | 5 |
| 8. Duration of initial order | Fla. Stat. § 394.4655(7)(b)(1) | <input checked="" type="checkbox"/> = 90 days (2 pts) or <input type="checkbox"/> > 90 days (5 pts) | 2 |
| 9. Duration of continued order | Fla. Stat. § 394.4655(8) | <input type="checkbox"/> = 180 days (2 pts) or <input type="checkbox"/> > 180 days (5 pts) Order is renewable for 90-day periods, indefinitely, under separate hearing process. | 0 |
| SUBTOTAL | | | 32 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | Fla. Stat. § 394.4655(4)(c) | Circuit court in county where person is located | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 33 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 33 |
| PART TWO TOTAL | | | 33 |
| TOTAL | | | 66 |
| GRADE | | | D |

Georgia State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

| PART ONE: Inpatient Commitment Statute (up to 50 points) | | | |
|---------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. Citizen access to court, emergency evaluation (5 pts) | Ga. Code Ann. § 37-3-61 | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) Requires doctor certification for petition | 5 |
| 2. Quality of emergency petition process (5 pts) | Ga. Code Ann. §§ 37-3-41(a), 37-3-42(a) | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | Ga. Code Ann. § 37-3-43 | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input type="checkbox"/> At least 72-hour hold allowed (2 pts) | 3 |
| 4. Citizen access to court, inpatient petition (5 pts) | Ga. Code Ann. § 37-3-61(2) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) Requires doctor certification for petition | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Ga. Code Ann. § 37-3-1(9.1)(A)(i) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input checked="" type="checkbox"/> Harm must be imminent (-3 pts) | 7 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Ga. Code Ann. § 37-3-1(9.1)(A)(ii) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input checked="" type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 7 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) Comment: Psychiatric deterioration is in the language however no points are given because treatment hinges on imminence thus rendering the psychiatric deterioration standard ineffective. | 0 |
| SUBTOTAL | | | 32 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | | | |
| Extra Credit | | | 0 |
| PART ONE TOTAL | | | 32 |

| PART TWO: Outpatient Commitment Statute (up to 50 points) | | | |
|-----------------------------------------------------------|------------------------------|----------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. AOT explicitly authorized (5 pts) | Ga. Code Ann. § 37-3-1(12.1) | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|-----------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 2. Citizen access to court for AOT (5 pts) | Ga. Code Ann. § 37-3-61(2) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) Requires doctor certification for petition | 5 |
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Ga. Code Ann. § 37-3-1(12.1) | Evaluate applicable provision only: <input type="checkbox"/> If inpatient/outpatient criteria are the same: <input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) or <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) or <input checked="" type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <input checked="" type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input checked="" type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input checked="" type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 10 |
| 4. Authorizes AOT directly from community (5 pts) | Ga. Code Ann. §§ 37-3-61(2), 37-3-41(a) | After a period of short-term detention | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Ga. Code Ann. §§ 37-3-81.1(a)(2), 37-3-82, and 37-3-91(b) | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 5 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | Ga. Code Ann. § 37-3-81.1(a)(2) | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Ga. Code Ann. § 37-3-82 | | 5 |
| 8. Duration of initial order | Ga. Code Ann. § 37-3-93(a) | <input type="checkbox"/> = 90 days (2 pts) or <input checked="" type="checkbox"/> > 90 days (5 pts) One year | 5 |
| 9. Duration of continued order | Ga. Code Ann. § 37-3-93(c) | <input type="checkbox"/> = 180 days (2 pts) or <input checked="" type="checkbox"/> > 180 days (5 pts) One year | 5 |
| SUBTOTAL | | | 50 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | | | |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | |
| PART TWO TOTAL | | | 50 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 32 |
| PART TWO TOTAL | | | 50 |
| TOTAL | | | 82 |
| GRADE | | | B- |

Hawaii State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center’s values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state’s assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|---------------------------------------------------------------------------------------|---------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. Citizen access to court, emergency evaluation (5 pts) | Haw. Rev. Stat. § 334-59(a) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) Designated professionals, designated medical professionals, and law enforcement officers | 0 |
| 2. Quality of emergency petition process (5 pts) | Haw. Rev. Stat. § 334-59 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 3 |
| 3. Emergency hold duration (5 pts) | Haw. Rev. Stat. § 334-59(e) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input type="checkbox"/> At least 72-hour hold allowed (2 pts) | 3 |
| 4. Citizen access to court, inpatient petition (5 pts) | Haw. Rev. Stat. § 334-60.3(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Haw. Rev. Stat. §§ 334-1, 334-60.2(2) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) Comment: In 2019, the definition of “imminently dangerous” under § 334-1 was revised to expressly allow consideration of danger that may arise within the next 45 days, clarifying that danger need not be present at the time of evaluation or disposition. | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Haw. Rev. Stat. §§ 334-1, 334-60.2(2) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | Haw. Rev. Stat. §§ 334-1, 334-60.2(2) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) Comment: In 2019, the definition of “dangerous to self” under § 334-1 was amended to expressly recognize treatment for a mental illness as a component of “essential medical care,” with inability to obtain it constituting danger. | 10 |
| SUBTOTAL | | | 41 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | | | |
| Extra Credit | | | 0 |
| PART ONE TOTAL | | | 41 |

| PART TWO: Outpatient Commitment Statute (up to 50 points) | | | |
|------------------------------------------------------------------------------|----------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| Criterion | Citation | Specifications | Points |
| 1. AOT explicitly authorized (5 pts) | Haw. Rev. Stat. § 334-121 | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | Haw. Rev. Stat. § 334-123 | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Haw. Rev. Stat. § 334-121 | Evaluate applicable provision only: <input type="checkbox"/> If inpatient/outpatient criteria are the same: <input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) or <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) or <input checked="" type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <input checked="" type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input checked="" type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input checked="" type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 10 |
| 4. Authorizes AOT directly from community (5 pts) | Haw. Rev. Stat. § 334-123 | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Haw. Rev. Stat. §§ 334-121-27, 334-133 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 4 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | Haw. Rev. Stat. § 334-126(h) | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Haw. Rev. Stat. § 334-129 | | 5 |
| 8. Duration of initial order | Haw. Rev. Stat. § 334-127(b) | <input type="checkbox"/> = 90 days (2 pts) or <input checked="" type="checkbox"/> > 90 days (5 pts) One year | 5 |
| 9. Duration of continued order | Haw. Rev. Stat. § 334-133 | <input type="checkbox"/> = 180 days (2 pts) or <input checked="" type="checkbox"/> > 180 days (5 pts) One year | 5 |
| SUBTOTAL | | | 49 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | Haw. Rev. Stat. § 334-121 | Family court | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 50 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 41 |
| PART TWO TOTAL | | | 50 |
| TOTAL | | | 91 |
| GRADE | | | A- |

Idaho State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|---------------------------------------------------------------------------------------|---------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 1. Citizen access to court, emergency evaluation (5 pts) | Idaho Code § 66-326(1) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) Only a peace officer or certain medical staff | 0 |
| 2. Quality of emergency petition process (5 pts) | Idaho Code § 66-326 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 2 |
| 3. Emergency hold duration (5 pts) | Idaho Code § 66-326 | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) 24 hours for evaluation, then five days | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | Idaho Code § 66-329(1) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Idaho Code § 66-317(11) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Idaho Code § 66-317(13)(a); § 66-329(13)(c) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input checked="" type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 7 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | Idaho Code § 66-317(13)(b) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 10 |
| SUBTOTAL | | | 39 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | Idaho Code § 66-328 | The district court of the county | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 40 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------------|-------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | Idaho Code § 66-317(14) | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | Idaho Code § 66-329(1) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|----------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Idaho Code § 66-317(14) | <p>Evaluate applicable provision only:</p> <p><input checked="" type="checkbox"/> If inpatient/outpatient criteria are the same:</p> <p><input checked="" type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u></p> <p><input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts)</p> <p>or</p> <p><input type="checkbox"/> If outpatient criteria are distinct from inpatient criteria:</p> <p><input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts)</p> <p><input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt)</p> <p><input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts)</p> <p><input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts)</p> | 10 |
| 4. Authorizes AOT directly from community (5 pts) | Idaho Code § 66-329(1) | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Idaho Code §§ 66-329, 66-337(a) | <p><input checked="" type="checkbox"/> Process specified and reasonable (1 pt)</p> <p><input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt)</p> <p><input checked="" type="checkbox"/> Responsible entities identified (1 pt)</p> <p><input checked="" type="checkbox"/> Periodic reporting to court required (1 pt)</p> <p><input type="checkbox"/> Renewal process expressly specified (1 pt)</p> | 4 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | | | 0 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Idaho Code § 66-329(12) | | 5 |
| 8. Duration of initial order | Idaho Code § 66-329(11)(b) | <p><input type="checkbox"/> = 90 days (2 pts) <u>or</u></p> <p><input checked="" type="checkbox"/> > 90 days (5 pts)</p> <p>Up to one year</p> | 5 |
| 9. Duration of continued order | Idaho Code §§ 66-329(11)(b), 66-337(a) | <p><input type="checkbox"/> = 180 days (2 pts) <u>or</u></p> <p><input checked="" type="checkbox"/> > 180 days (5 pts)</p> <p>No explicit procedure for continued order; initial order up to one year, subject to periodic review</p> | 5 |
| SUBTOTAL | | | 44 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | Idaho Code § 66-328 | The district court of the county | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 45 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 40 |
| PART TWO TOTAL | | | 45 |
| TOTAL | | | 85 |
| GRADE | | | B |

Illinois State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|---------------------------------------------------------------------------------------|---------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. Citizen access to court, emergency evaluation (5 pts) | 405 ILCS 5/3-601 | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) Any person age 18 years or older may present a petition to the facility director | 0 |
| 2. Quality of emergency petition process (5 pts) | 405 ILCS 5/3-601; 5/3-702 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | 405 ILCS 5/3-602 | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) 72 hours | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | 405 ILCS 5/3-701 | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) | 0 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | 405 ILCS 5/1-119(1) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | 405 ILCS 5/1-119(2) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | 405 ILCS 5/1-119(3) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 10 |
| SUBTOTAL | | | 40 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | | | |
| Extra Credit | | | 0 |
| PART ONE TOTAL | | | 40 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------------|--------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | 405 ILCS 5/1-119.1 | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | 405 ILCS 5/3-751 | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input checked="" type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 3 |

| | | | |
|------------------------------------------------------------------------------|------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | 405 ILCS 5/1-119.1(1) or (2) | <p>Evaluate applicable provision only:</p> <p><input type="checkbox"/> If inpatient/outpatient criteria are the same:</p> <p style="padding-left: 20px;"><input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) or</p> <p style="padding-left: 20px;"><input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts)</p> <p>or</p> <p><input checked="" type="checkbox"/> If outpatient criteria are distinct from inpatient criteria:</p> <p style="padding-left: 20px;"><input checked="" type="checkbox"/> Allows consideration of length of treatment history \geq 36 months (2 pts)</p> <p style="padding-left: 40px;"><input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt)</p> <p style="padding-left: 20px;"><input checked="" type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts)</p> <p style="padding-left: 20px;"><input checked="" type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts)</p> | 10 |
| 4. Authorizes AOT directly from community (5 pts) | 405 ILCS 5/1-119.1 | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | 405 ILCS 5/3-812 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 5 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | 405 ILCS 5/3-814(a) | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | | | 0 |
| 8. Duration of initial order | 405 ILCS 5/3-813(a) | <input checked="" type="checkbox"/> = 90 days (2 pts) or <input type="checkbox"/> > 90 days (5 pts) Not to exceed 90 days | 2 |
| 9. Duration of continued order | 405 ILCS 5/3-813(a) | <input checked="" type="checkbox"/> = 180 days (2 pts) or <input type="checkbox"/> > 180 days (5 pts) Not to exceed 180 days | 2 |
| SUBTOTAL | | | 37 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | | | |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | 405 ILCS 5/3-801.5 | | 5 |
| Extra Credit | | | 5 |
| PART TWO TOTAL | | | 42 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 40 |
| PART TWO TOTAL | | | 42 |
| TOTAL | | | 82 |
| GRADE | | | B- |

Indiana State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

| PART ONE: Inpatient Commitment Statute (up to 50 points) | | | |
|---------------------------------------------------------------------------------------|----------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. Citizen access to court, emergency evaluation (5 pts) | Ind. Code Ann. § 12-26-5-1 | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) Application is filed with the facility | 0 |
| 2. Quality of emergency petition process (5 pts) | Ind. Code Ann. § 12-26-5-1 <i>et seq.</i> | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | Ind. Code Ann. § 12-26-5-1 | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) 72 hours | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | Ind. Code Ann. §§ 12-26-6-2(b), 12-26-7-2(b) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) Any adult for temporary commitment; authority for regular commitment includes "friend" | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Ind. Code Ann. § 12-7-2-53 | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Ind. Code Ann. § 12-7-2-96(1) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | Ind. Code Ann. § 12-7-2-96(2) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 10 |
| SUBTOTAL | | | 45 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | Ind. Code Ann. § 12-26-1-2 | Probate or superior court | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 46 |

| PART TWO: Outpatient Commitment Statute (up to 50 points) | | | |
|------------------------------------------------------------------|----------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. AOT explicitly authorized (5 pts) | Ind. Code Ann. § 12-26-14-1 | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | Ind. Code Ann. §§ 12-26-6-2(b), 12-26-7-2(b) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|--------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Ind. Code Ann. §§ 12-26-14-1, 12-7-2-96, and 12-26-6-8 | <p>Evaluate applicable provision only:</p> <input checked="" type="checkbox"/> If inpatient/outpatient criteria are the same: <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) or <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) <p>or</p> <input type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <ul style="list-style-type: none"> <input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <ul style="list-style-type: none"> <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 10 |
| 4. Authorizes AOT directly from community (5 pts) | Ind. Code Ann. § 12-26-14-1 | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Ind. Code Ann. § 12-26-14-1 <i>et seq.</i> | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 5 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | Ind. Code Ann. § 12-26-6-8 | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Ind. Code Ann. §§ 12-26-14-4, 12-26-14-5 | | 5 |
| 8. Duration of initial order | Ind. Code Ann. § 12-26-6-8(a)(2) | <input checked="" type="checkbox"/> = 90 days (2 pts) or <input type="checkbox"/> > 90 days (5 pts) Not more than 90 days | 2 |
| 9. Duration of continued order | Ind. Code Ann. § 12-26-6-10 | <input type="checkbox"/> = 180 days (2 pts) or <input type="checkbox"/> > 180 days (5 pts) Not more than 90 days | 0 |
| SUBTOTAL | | | 42 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | Ind. Code Ann. § 12-26-1-2 | Probate or superior court | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 43 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 46 |
| PART TWO TOTAL | | | 43 |
| TOTAL | | | 89 |
| GRADE | | | B+ |

Iowa State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|---------------------------------------------------------------------------------------|--------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. Citizen access to court, emergency evaluation (5 pts) | Iowa Code § 229.6(1) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | Iowa Code §§ 229.11(1), 229.22 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input checked="" type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) Comment: Emergency standard adds "likely to injure" to inpatient criteria. | 0 |
| 3. Emergency hold duration (5 pts) | Iowa Code § 229.22(3) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input type="checkbox"/> At least 72-hour hold allowed (2 pts) Not to exceed 48 hours | 3 |
| 4. Citizen access to court, inpatient petition (5 pts) | Iowa Code § 229.6(1) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Iowa Code §§ 229.1(20)(a), (b) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Iowa Code § 229.1(20)(c) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 0 |
| SUBTOTAL | | | 33 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | Iowa Code § 229.6(1) | District court | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 34 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------------|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | Iowa Code § 229.13(3) | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | Iowa Code § 229.6 | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|-----------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Iowa Code § 229.1(20)(d) | <p>Evaluate applicable provision only:</p> <p><input type="checkbox"/> If inpatient/outpatient criteria are the same:</p> <p><input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u></p> <p><input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts)</p> <p>or</p> <p><input checked="" type="checkbox"/> If outpatient criteria are distinct from inpatient criteria:</p> <p><input checked="" type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts)</p> <p><input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt)</p> <p><input checked="" type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts)</p> <p><input checked="" type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts)</p> <p>Comment: Newly added criteria under Iowa Code § 229.1(20)(d), effective July 1, 2018, although not explicitly for outpatients only, should be considered as such because they are unsuitable as inpatient criteria. Commitment is on the basis of a history of lack of treatment adherence.</p> | 10 |
| 4. Authorizes AOT directly from community (5 pts) | Iowa Code § 229.13 | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Iowa Code §§ 229.13, 229.14, and 229.15 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 5 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | | | 0 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Iowa Code §§ 229.13(7), 229.14(2) | | 5 |
| 8. Duration of initial order | Iowa Code §§ 229.13, 229.15 | <input type="checkbox"/> = 90 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 90 days (5 pts) Indefinite term | 5 |
| 9. Duration of continued order | | <input type="checkbox"/> = 180 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 180 days (5 pts) No need for continuations because initial order is periodically reviewed but indefinite in length | 5 |
| SUBTOTAL | | | 45 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | Iowa Code § 229.6 | District court | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 46 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 34 |
| PART TWO TOTAL | | | 46 |
| TOTAL | | | 80 |
| GRADE | | | B- |

Kansas State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|---------------------------------------------------------------------------------------|----------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. Citizen access to court, emergency evaluation (5 pts) | Kan. Stat. Ann. § 59-2957(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | Kan. Stat. Ann. §§ 59-2953(a), 59-2954(c)(3) | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | Kan. Stat. Ann. § 59-2958(e) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input type="checkbox"/> At least 72-hour hold allowed (2 pts) <i>Emergency custody order expires at 5:00 p.m. of the second day the district court is open</i> | 3 |
| 4. Citizen access to court, inpatient petition (5 pts) | Kan. Stat. Ann. § 59-2957(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Kan. Stat. Ann. § 59-2946(f)(3)(a) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Kan. Stat. Ann. § 59-2946(f)(3)(b) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 0 |
| SUBTOTAL | | | 38 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | Kan. Stat. Ann. § 59-2957(a) | District court | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 39 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------------|------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | Kan. Stat. Ann. § 59-2967 | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | Kan. Stat. Ann. § 59-2957(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|---------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Kan. Stat. Ann. § 59-2967(a) | <p>Evaluate applicable provision only:</p> <p><input checked="" type="checkbox"/> If inpatient/outpatient criteria are the same:</p> <p><input type="checkbox"/> Inpatient criteria includes psychiatric deterioration standard (10 pts) or</p> <p><input checked="" type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts)</p> <p>or</p> <p><input type="checkbox"/> If outpatient criteria are distinct from inpatient criteria:</p> <p><input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts)</p> <p><input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt)</p> <p><input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts)</p> <p><input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts)</p> | 5 |
| 4. Authorizes AOT directly from community (5 pts) | Kan. Stat. Ann. § 59-2967 | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Kan. Stat. Ann. § 59-2967 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 5 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | | | 0 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Kan. Stat. Ann. §§ 59-2967(e), (f), and (g) | | 5 |
| 8. Duration of initial order | Kan. Stat. Ann. § 59-2966(a) | <input checked="" type="checkbox"/> = 90 days (2 pts) or <input type="checkbox"/> > 90 days (5 pts) Three months | 2 |
| 9. Duration of continued order | Kan. Stat. Ann. § 59-2969(f) | <input checked="" type="checkbox"/> = 180 days (2 pts) or <input type="checkbox"/> > 180 days (5 pts) Partial credit: first renewal three months, subsequent renewals six months | 1 |
| SUBTOTAL | | | 33 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | Kan. Stat. Ann. § 59-2957(a) | District court | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 34 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 39 |
| PART TWO TOTAL | | | 34 |
| TOTAL | | | 73 |
| GRADE | | | C |

Kentucky State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

| PART ONE: Inpatient Commitment Statute (up to 50 points) | | | |
|---------------------------------------------------------------------------------------|---------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. Citizen access to court, emergency evaluation (5 pts) | Ky. Rev. Stat. Ann. § 202A.041(1) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) | 0 |
| 2. Quality of emergency petition process (5 pts) | Ky. Rev. Stat. Ann. §§ 202A.041(1), 202A.028(1), and 202A.031 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | Ky. Rev. Stat. § 202A.028(1) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | Ky. Rev. Stat. § 202A.051(3) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Ky. Rev. Stat. § 202A.026 | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Ky. Rev. Stat. § 202A.011(2) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 0 |
| SUBTOTAL | | | 35 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | | | |
| Extra Credit | | | 0 |
| PART ONE TOTAL | | | 35 |

| PART TWO: Outpatient Commitment Statute (up to 50 points) | | | |
|------------------------------------------------------------------|------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. AOT explicitly authorized (5 pts) | Ky. Rev. Stat. § 202A.0815 | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | Ky. Rev. Stat. § 202A.051(3) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|-------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Ky. Rev. Stat. § 202A.0815 | <p>Evaluate applicable provision only:</p> <p><input type="checkbox"/> If inpatient/outpatient criteria are the same: <input type="checkbox"/> Inpatient criteria include future deterioration standard (10 pts) <u>or</u> (check one) <input type="checkbox"/> No deterioration but usable grave disability standard for AOT (5 pts)</p> <p>or</p> <p><input checked="" type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) Requires two hospitalizations in the past 24 months (Effective July 1, 2020) <input checked="" type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input checked="" type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts)</p> <p>Comment: Kentucky's outpatient standard requires a clinical finding of anosognosia, which is problematic because the condition may not be present, <i>particularly at discharge</i>, in every individual who can benefit from AOT. The standard thus unnecessarily limits the class of eligible individuals.</p> | 4 |
| 4. Authorizes AOT directly from community (5 pts) | Ky. Rev. Stat. § 202A.0815 | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Ky. Rev. Stat. § 202A.0815 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 5 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | Ky. Rev. Stat. § 202A.0817 | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Ky. Rev. Stat. § 202A.0823 | | 5 |
| 8. Duration of initial order | Ky. Rev. Stat. § 202A.0819(c) | <input type="checkbox"/> = 90 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 90 days (5 pts) 360 days | 5 |
| 9. Duration of continued order | Ky. Rev. Stat. § 202A.0825 | <input type="checkbox"/> = 180 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 180 days (5 pts) 360 days | 5 |
| SUBTOTAL | | | 44 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | | | |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 0 |
| PART TWO TOTAL | | | 44 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 35 |
| PART TWO TOTAL | | | 44 |
| TOTAL | | | 79 |
| GRADE | | | C+ |

Louisiana State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center’s values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state’s assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|---------------------------------------------------------------------------------------|--------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 1. Citizen access to court, emergency evaluation (5 pts) | La. Rev. Stat. Ann. § 28:53(J)(1) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | La. Rev. Stat. Ann. § 28:53 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) Comment: The code requires that a police officer have an emergency medical technician present but does not require dual certification. This requirement could encourage the “medicalization” (and thus decriminalization) of emergency evaluation. | 5 |
| 3. Emergency hold duration (5 pts) | La. Rev. Stat. Ann. § 28:53(A)(1) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) 15 days | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | La. Rev. Stat. Ann. § 28:54(A) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | La. Rev. Stat. Ann. §§ 28:2(6) and 28:2(7) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | La. Rev. Stat. Ann. § 28:2(13) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 0 |
| SUBTOTAL | | | 40 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | | | |
| Extra Credit | | | 0 |
| PART ONE TOTAL | | | 40 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------|-----------------------------|----------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | La. Rev. Stat. Ann. § 28:66 | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|
| 2. Citizen access to court for AOT (5 pts) | La. Rev. Stat. Ann. § 28:67(4) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | La. Rev. Stat. Ann. § 28:66(A) | Evaluate applicable provision only: <input type="checkbox"/> If inpatient/outpatient criteria are the same: <input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u> <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) or <input checked="" type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <input checked="" type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input checked="" type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input checked="" type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 10 |
| 4. Authorizes AOT directly from community (5 pts) | La. Rev. Stat. Ann. § 28:66 | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | La. Rev. Stat. Ann. §§ 28:67–28:71 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 5 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | La. Rev. Stat. Ann. § 28:70 | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | La. Rev. Stat. Ann. § 28:75 | | 5 |
| 8. Duration of initial order | La. Rev. Stat. Ann. § 28:71(b) | <input type="checkbox"/> = 90 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 90 days (5 pts) One year | 5 |
| 9. Duration of continued order | La. Rev. Stat. Ann. § 28:72 | <input type="checkbox"/> = 180 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 180 days (5 pts) One year | 5 |
| SUBTOTAL | | | 50 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | | | |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | |
| PART TWO TOTAL | | | 50 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 40 |
| PART TWO TOTAL | | | 50 |
| TOTAL | | | 90 |
| GRADE | | | A- |

Maine State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|---------------------------------------------------------------------------------------|------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. Citizen access to court, emergency evaluation (5 pts) | Me. Rev. Stat. tit. 34-B, § 3863(1) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | Me. Rev. Stat. tit. 34-B, § 3863(1) | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | Me. Rev. Stat. tit. 34-B, § 3863(3)(B) | <input type="checkbox"/> At least 48-hour hold allowed (3 pts) <input type="checkbox"/> At least 72-hour hold allowed (2 pts) 24 hours | 0 |
| 4. Citizen access to court, inpatient petition (5 pts) | Me. Rev. Stat. tit. 34-B, § 3863(5-A) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) Only the chief administrative officer | 0 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Me. Rev. Stat. tit. 34-B, §§ 3864(6)(A), 3801(4-A)(A), (B) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Me. Rev. Stat. tit. 34-B, § 3801(4-A) (C) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | Me. Rev. Stat. tit. 34-B, § 3801(4-A) (D) | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) Comment: Me. Rev. Stat. tit. 34-B, § 3801(4-A)(D) provides a psychiatric deterioration standard but limits its application to outpatient commitment. | 0 |
| SUBTOTAL | | | 30 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | Me. Rev. Stat. tit. 34-B, § 3864(1) | District court | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 31 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------------|------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | Me. Rev. Stat. tit. 34-B, § 3873-A | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | ME Rev Stat 34-B, § 3873-A | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) Apart from professionals, only legal guardian | 0 |

| | | | |
|------------------------------------------------------------------------------|---------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Me. Rev. Stat. tit. 34-B, § 3873-A | <p>Evaluate applicable provision only:</p> <p><input type="checkbox"/> If inpatient/outpatient criteria are the same:</p> <p style="padding-left: 20px;"><input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) or</p> <p style="padding-left: 20px;"><input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts)</p> <p>or</p> <p><input checked="" type="checkbox"/> If outpatient criteria are distinct from inpatient criteria:</p> <p style="padding-left: 20px;"><input checked="" type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts)</p> <p style="padding-left: 40px;"><input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt)</p> <p style="padding-left: 20px;"><input checked="" type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts)</p> <p style="padding-left: 20px;"><input checked="" type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts)</p> | 10 |
| 4. Authorizes AOT directly from community (5 pts) | Me. Rev. Stat. tit. 34-B, § 3873-A(1) | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Me. Rev. Stat. tit. 34-B, § 3873-A | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 5 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | Me. Rev. Stat. tit. 34-B, § 3873-A(2) | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Me. Rev. Stat. tit. 34-B, §§ 3873-A(7), (8) | | 5 |
| 8. Duration of initial order | Me. Rev. Stat. tit. 34-B, § 3873-A(6) | <input type="checkbox"/> = 90 days (2 pts) or <input checked="" type="checkbox"/> > 90 days (5 pts) One year | 5 |
| 9. Duration of continued order | Me. Rev. Stat. tit. 34-B, § 3873-A(9) | <input type="checkbox"/> = 180 days (2 pts) or <input checked="" type="checkbox"/> > 180 days (5 pts) One year | 5 |
| SUBTOTAL | | | 45 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | Me. Rev. Stat. tit. 34-B, § 3873-A(1) | District court | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 46 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 31 |
| PART TWO TOTAL | | | 46 |
| TOTAL | | | 77 |
| GRADE | | | C+ |

Maryland State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

| PART ONE: Inpatient Commitment Statute (up to 50 points) | | | |
|---------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| Criterion | Citation | Specifications | Points |
| 1. Citizen access to court, emergency evaluation (5 pts) | Md. Code Ann., Health-General § 10-622(b)(iii) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | Md. Code Ann., Health-General §§ 10-622(d), 10-623, 10-624, and 10-624(a)(1)(i) | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | Md. Code Ann., Health-General § 10-624(b)(4) | <input type="checkbox"/> At least 48-hour hold allowed (3 pts) <input type="checkbox"/> At least 72-hour hold allowed (2 pts) Emergency evaluation must be made within 6 hours; an emergency evaluatee may not be kept at an emergency facility for more than 30 hours. | 0 |
| 4. Citizen access to court, inpatient petition (5 pts) | Md. Code Ann., Health-General § 10-632 | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) | 0 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Md. Code Ann., Health-General § 10-632(e)(2) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input checked="" type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 7 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 0 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 0 |
| SUBTOTAL | | | 17 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | Md. Code Ann., Health-General § 10-620(b) | District or circuit court | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 18 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|------------------------------------------------------------------------------|----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 0 |
| 2. Citizen access to court for AOT (5 pts) | | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 0 |
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | | Evaluate applicable provision only: <input type="checkbox"/> If inpatient/outpatient criteria are the same: <input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u> <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) or <input type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 0 |
| 4. Authorizes AOT directly from community (5 pts) | | | 0 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | | <input type="checkbox"/> Process specified and reasonable (1 pt) <input type="checkbox"/> Timelines specified and reasonable (1 pt) <input type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Periodic reporting to court required (1 pt) <input type="checkbox"/> Renewal process expressly specified (1 pt) | 0 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | | | 0 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | | | 0 |
| 8. Duration of initial order | | <input type="checkbox"/> = 90 days (2 pts) <u>or</u> <input type="checkbox"/> > 90 days (5 pts) | 0 |
| 9. Duration of continued order | | <input type="checkbox"/> = 180 days (2 pts) <u>or</u> <input type="checkbox"/> > 180 days (5 pts) | 0 |
| SUBTOTAL | | | 0 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | | | |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 0 |
| PART TWO TOTAL | | | 0 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 18 |
| PART TWO TOTAL | | | 0 |
| TOTAL | | | 18 |
| GRADE | | | F |

Massachusetts State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

| PART ONE: Inpatient Commitment Statute (up to 50 points) | | | |
|---------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. Citizen access to court, emergency evaluation (5 pts) | Mass. Gen. Laws Ann. ch. 123, § 12(e) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | Mass. Gen. Laws Ann. ch. 123, § 12 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | Mass. Gen. Laws Ann. ch. 123, § 12(a) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) Three-day period | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | Mass. Gen. Laws Ann. ch. 123, § 7(a) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) Only the superintendent of a facility may petition | 0 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Mass. Gen. Laws Ann. ch. 123, § 1 | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Mass. Gen. Laws Ann. ch. 123, § 1 | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input checked="" type="checkbox"/> Unreasonably severe harm required (-3 pts) Comment: Requires “ <u>very</u> substantial risk of physical impairment or injury” (emphasis added) while other criteria only require a “substantial risk of physical harm.” | 7 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 0 |
| SUBTOTAL | | | 32 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | Mass. Gen. Laws Ann. ch. 123, § 7 | District court | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 33 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|------------------------------------------------------------------------------|----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 0 |
| 2. Citizen access to court for AOT (5 pts) | | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 0 |
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | | Evaluate applicable provision only: <input type="checkbox"/> If inpatient/outpatient criteria are the same: <input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u> <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) or <input type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 0 |
| 4. Authorizes AOT directly from community (5 pts) | | | 0 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | | <input type="checkbox"/> Process specified and reasonable (1 pt) <input type="checkbox"/> Timelines specified and reasonable (1 pt) <input type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Periodic reporting to court required (1 pt) <input type="checkbox"/> Renewal process expressly specified (1 pt) | 0 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | | | 0 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | | | 0 |
| 8. Duration of initial order | | <input type="checkbox"/> = 90 days (2 pts) <u>or</u> <input type="checkbox"/> > 90 days (5 pts) | 0 |
| 9. Duration of continued order | | <input type="checkbox"/> = 180 days (2 pts) <u>or</u> <input type="checkbox"/> > 180 days (5 pts) | 0 |
| SUBTOTAL | | | 0 |

PART TWO: Extra Credit

| | | | |
|----------------------------------------------------------------|--|--|--|
| 1. Specifies court for AOT (1 pt) | | | |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |

Extra Credit 0

PART TWO TOTAL 0

FINAL SCORE

| | |
|----------------|-----------|
| PART ONE TOTAL | 33 |
| PART TWO TOTAL | 0 |
| TOTAL | 33 |
| GRADE | F |

Michigan State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 1. Citizen access to court, emergency evaluation (5 pts) | Mich. Comp. Laws § 330.1434(1) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | Mich. Comp. Laws §§ 330.1434, 1438 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | Mich. Comp. Laws § 330.1429 | <input type="checkbox"/> At least 48-hour hold allowed (3 pts) <input type="checkbox"/> At least 72-hour hold allowed (2 pts) 24 hours | 0 |
| 4. Citizen access to court, inpatient petition (5 pts) | Mich. Comp. Laws § 330.1434(1) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Mich. Comp. Laws § 330.1401(1)(a) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Mich. Comp. Laws § 330.1401(1)(b) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | Mich. Comp. Laws § 330.1401(1)(c) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 10 |
| SUBTOTAL | | | 45 |

PART ONE: Extra Credit

| | | | |
|---------------------------------------------------------------------------------------|--|--|-----------|
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | | | |
| Extra Credit | | | 0 |
| PART ONE TOTAL | | | 45 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------------|-----------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | Mich. Comp. Laws § 330.1468(2)(d) | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | Mich. Comp. Laws § 330.1434(1) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|----------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Mich. Comp. Laws § 330.1401(c) | <p>Evaluate applicable provision only:</p> <input checked="" type="checkbox"/> If inpatient/outpatient criteria are the same: <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u> <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) <p>or</p> <input type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <ul style="list-style-type: none"> <input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 10 |
| 4. Authorizes AOT directly from community (5 pts) | Mich. Comp. Laws § 330.1468(2)(d) | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Mich. Comp. Laws §§ 330.1455, 330.1468 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 5 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | Mich. Comp. Laws § 330.1453(a) | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Mich. Comp. Laws § 330.1468(3) | | 5 |
| 8. Duration of initial order | Mich. Comp. Laws § 330.1472a(1) | <input type="checkbox"/> = 90 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 90 days (5 pts) 180 days | 5 |
| 9. Duration of continued order | Mich. Comp. Laws § 330.1472a(2) | <input type="checkbox"/> = 180 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 180 days (5 pts) One year | 5 |
| SUBTOTAL | | | 50 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | | | |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 0 |
| PART TWO TOTAL | | | 50 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 45 |
| PART TWO TOTAL | | | 50 |
| TOTAL | | | 95 |
| GRADE | | | A |

Minnesota State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

| PART ONE: Inpatient Commitment Statute (up to 50 points) | | | |
|---------------------------------------------------------------------------------------|----------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. Citizen access to court, emergency evaluation (5 pts) | Minn. Stat. § 253B.051(1)(a) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) | 0 |
| 2. Quality of emergency petition process (5 pts) | Minn. Stat. § 253B.051 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) Comment: New emergency evaluation statute effective 8/1/20 removes prior inconsistency between emergency and inpatient criteria. | 5 |
| 3. Emergency hold duration (5 pts) | Minn. Stat. § 253B.051(3) subd. 3 | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) 72 hours | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | Minn. Stat. § 253B.07(2)(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Minn. Stat. § 253B.02 (13)(a) (3) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Minn. Stat. §§ 253B.02 (13)(a) (1)–(2) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | Minn. Stat. §§ 253B.02 (13) (a)(2) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 10 |
| SUBTOTAL | | | 45 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | Minn. Stat. § 253B.07(2)(a) | District court | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 46 |

| PART TWO: Outpatient Commitment Statute (up to 50 points) | | | |
|-----------------------------------------------------------|-----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. AOT explicitly authorized (5 pts) | Minn. Stat. § 253B.09 | <input type="checkbox"/> Requires local government to adopt (-3 pts) Comment: New law effective 8/1/20 | 5 |
| 2. Citizen access to court for AOT (5 pts) | Minn. Stat. § 253B.07(2)(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Minn. Stat. § 253B.09, 253.07(2)(a) | <p>Evaluate applicable provision only:</p> <input checked="" type="checkbox"/> If inpatient/outpatient criteria are the same: <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u> <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) <p>or</p> <input type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <ul style="list-style-type: none"> <input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <ul style="list-style-type: none"> <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 10 |
| 4. Authorizes AOT directly from community (5 pts) | Minn. Stat. § 253B.09 | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Minn. Stat. § 253B.097, § 253B.13 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 5 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | Minn. Stat. § 253B.097(1) | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Minn. Stat. § 253B.097(5) | | 5 |
| 8. Duration of initial order | Minn. Stat. § 253B.09(5) | <input type="checkbox"/> = 90 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 90 days (5 pts) | 5 |
| 9. Duration of continued order | Minn. Stat. § 253B.13 | <input type="checkbox"/> = 180 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 180 days (5 pts) Twelve months maximum | 5 |
| SUBTOTAL | | | 50 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | Minn. Stat. § 253.07(2)(a) | <i>District court</i> | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 51 |
| PART TWO TOTAL | | | 51 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 46 |
| PART TWO TOTAL | | | 51 |
| TOTAL | | | 97 |
| GRADE | | | A+ |

Mississippi State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

| PART ONE: Inpatient Commitment Statute (up to 50 points) | | | |
|---------------------------------------------------------------------------------------|-------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. Citizen access to court, emergency evaluation (5 pts) | Miss. Code Ann. § 41-21-65(5) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | Miss. Code Ann. § 41-21-65(5) | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | Miss. Code Ann. § 41-21-67 | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) 72 hours | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | Miss. Code Ann. § 41-21-65(5) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Miss. Code Ann. § 41-21-61(f) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Miss. Code Ann. § 41-21-61(f) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | Miss. Code Ann. § 41-21-61(f) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 10 |
| SUBTOTAL | | | 50 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | Miss. Code Ann. § 41-21-65(5) | Chancery court | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 51 |

| PART TWO: Outpatient Commitment Statute (up to 50 points) | | | |
|------------------------------------------------------------------|-------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. AOT explicitly authorized (5 pts) | Miss. Code Ann. § 41-21-73(4) | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | Miss. Code Ann. § 41-21-65(5) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|-------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Miss. Code Ann. § 41-21-61(f) | <p>Evaluate applicable provision only:</p> <input checked="" type="checkbox"/> If inpatient/outpatient criteria are the same: <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u> <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) <p>or</p> <input type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <ul style="list-style-type: none"> <input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <ul style="list-style-type: none"> <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 10 |
| 4. Authorizes AOT directly from community (5 pts) | Miss. Code Ann. § 41-21-73(4) | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Miss. Code Ann. § 41-21-73(4) | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Periodic reporting to court required (1 pt) <input type="checkbox"/> Renewal process expressly specified (1 pt) | 3 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | | | 0 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Miss. Code Ann. § 41-21-74 | | 5 |
| 8. Duration of initial order | Miss. Code Ann. § 41-21-73(4) | <input checked="" type="checkbox"/> = 90 days (2 pts) <u>or</u> <input type="checkbox"/> > 90 days (5 pts) Shall not exceed three months | 2 |
| 9. Duration of continued order | Miss. Code Ann. § 41-21-82 | <input type="checkbox"/> = 180 days (2 pts) <u>or</u> <input type="checkbox"/> > 180 days (5 pts) Shall not exceed three months | 0 |
| SUBTOTAL | | | 35 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | Miss. Code Ann. § 41-21-65(5) | Chancery court | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 36 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 51 |
| PART TWO TOTAL | | | 36 |
| TOTAL | | | 87 |
| GRADE | | | B+ |

Missouri State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|---------------------------------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. Citizen access to court, emergency evaluation (5 pts) | Mo. Ann. Stat. § 632.305(1) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | Mo. Ann. Stat. § 632.305, § 632.320 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | Mo. Ann. Stat. § 632.305(2) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) 96 hours | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | Mo. Ann. Stat. § 632.330(1) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) Head of facility must file | 0 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Mo. Ann. Stat. § 632.005(10)(a) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Mo. Ann. Stat. § 632.005(10)(b) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | Mo. Ann. Stat. §§ 632.005(10)(a)–(c) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 10 |
| SUBTOTAL | | | 45 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | | | |
| Extra Credit | | | 0 |
| PART ONE TOTAL | | | 45 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | Mo. Ann. Stat. § 632.350(1) | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | Mo. Ann. Stat. § 632.330(1) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) Head of facility must file | 0 |

| | | | |
|------------------------------------------------------------------------------|-------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Mo. Ann. Stat. §§ 632.005(10) (a)–(c) | <p>Evaluate applicable provision only:</p> <input checked="" type="checkbox"/> If inpatient/outpatient criteria are the same: <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u> <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) <p>or</p> <input type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <ul style="list-style-type: none"> <input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <ul style="list-style-type: none"> <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 10 |
| 4. Authorizes AOT directly from community (5 pts) | Mo. Ann. Stat. § 632.350(1), § 632.330(1) | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Mo. Ann. Stat. § 632.340 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 4 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | Mo. Ann. Stat. § 632.340(2) | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Mo. Ann. Stat. § 632.337(1) | | 5 |
| 8. Duration of initial order | Mo. Ann. Stat. § 632.350(1) | <input type="checkbox"/> = 90 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 90 days (5 pts) | 5 |
| 9. Duration of continued order | Mo. Ann. Stat. § 632.335(1) | <input checked="" type="checkbox"/> = 180 days (2 pts) <u>or</u> <input type="checkbox"/> > 180 days (5 pts) | 2 |
| SUBTOTAL | | | 41 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | | | |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 0 |
| PART TWO TOTAL | | | 41 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 45 |
| PART TWO TOTAL | | | 41 |
| TOTAL | | | 86 |
| GRADE | | | B |

Montana State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

| PART ONE: Inpatient Commitment Statute (up to 50 points) | | | |
|---------------------------------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. Citizen access to court, emergency evaluation (5 pts) | Mont. Code Ann. § 53-21-129(1) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) County attorney files petition on probable cause | 0 |
| 2. Quality of emergency petition process (5 pts) | Mont. Code Ann. § 53-21-129(1) | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | Mont. Code Ann. § 53-21-129(2) | <input type="checkbox"/> At least 48-hour hold allowed (3 pts) <input type="checkbox"/> At least 72-hour hold allowed (2 pts) Next business day | 0 |
| 4. Citizen access to court, inpatient petition (5 pts) | Mont. Code Ann. § 53-21-121(1) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) County attorney files petition on written request of any person | 0 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Mont. Code Ann. § 53-21-126(1)(b)(c) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Mont. Code Ann. § 53-21-126(1)(a) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 0 |
| SUBTOTAL | | | 25 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | | | |
| Extra Credit | | | 0 |
| PART ONE TOTAL | | | 25 |

| PART TWO: Outpatient Commitment Statute (up to 50 points) | | | |
|------------------------------------------------------------------|--------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. AOT explicitly authorized (5 pts) | Mont. Code Ann. § 53-21-127(7) | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | Mont. Code Ann. § 53-21-121(1) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 0 |

| | | | |
|------------------------------------------------------------------------------|-----------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Mont. Code Ann. § 53-21-126(1)(d) | <p>Evaluate applicable provision only:</p> <p><input type="checkbox"/> If inpatient/outpatient criteria are the same:</p> <p style="padding-left: 20px;"><input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u></p> <p style="padding-left: 20px;"><input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts)</p> <p>or</p> <p><input checked="" type="checkbox"/> If outpatient criteria are distinct from inpatient criteria:</p> <p style="padding-left: 20px;"><input checked="" type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts)</p> <p style="padding-left: 40px;"><input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt)</p> <p style="padding-left: 20px;"><input checked="" type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts)</p> <p style="padding-left: 20px;"><input checked="" type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts)</p> <p>Shared definition but requires AOT only if criteria in § 53-21-126(1)(d) are met</p> | 10 |
| 4. Authorizes AOT directly from community (5 pts) | Mont. Code Ann. § 53-21-127(7) | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Mont. Code Ann. § 53-21-127(8) | <input type="checkbox"/> Process specified and reasonable (1 pt) <input type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 2 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | | | 0 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Mont. Code Ann. § 53-21-151 | | 5 |
| 8. Duration of initial order | Mont. Code Ann. § 53-21-127(3)(b) | <input type="checkbox"/> = 90 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 90 days (5 pts) Allows up to six months in the community under certain circumstances | 5 |
| 9. Duration of continued order | Mont. Code Ann. § 53-21-128(1)(d) | <input checked="" type="checkbox"/> = 180 days (2 pts) <u>or</u> <input type="checkbox"/> > 180 days (5 pts) | 2 |
| SUBTOTAL | | | 34 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | | | |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 0 |
| PART TWO TOTAL | | | 34 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 25 |
| PART TWO TOTAL | | | 34 |
| TOTAL | | | 59 |
| GRADE | | | F |

Nebraska State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|---------------------------------------------------------------------------------------|-----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 1. Citizen access to court, emergency evaluation (5 pts) | Neb. Rev. Stat. § 71-921(1) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) County attorney only, but citizens can “communicate concern” | 0 |
| 2. Quality of emergency petition process (5 pts) | Neb. Rev. Stat. § 71-919 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | Neb. Rev. Stat. §§ 71-923 | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) Seven days | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | Neb. Rev. Stat. § 71-921(1) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) | 0 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Neb. Rev. Stat. § 71-908 | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Neb. Rev. Stat. § 71-908 | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 0 |
| SUBTOTAL | | | 30 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | Neb. Rev. Stat. § 71-921(2) | District court | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 31 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------------|-----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | Neb. Rev. Stat. § 71-925 | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | Neb. Rev. Stat. § 71-921(1) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 0 |

| | | | |
|------------------------------------------------------------------------------|-----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Neb. Rev. Stat. § 71-908 | <p>Evaluate applicable provision only:</p> <p><input checked="" type="checkbox"/> If inpatient/outpatient criteria are the same:</p> <p><input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u></p> <p><input checked="" type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts)</p> <p>or</p> <p><input type="checkbox"/> If outpatient criteria are distinct from inpatient criteria:</p> <p><input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts)</p> <p><input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt)</p> <p><input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts)</p> <p><input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts)</p> | 5 |
| 4. Authorizes AOT directly from community (5 pts) | Neb. Rev. Stat. § 71-925 | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Neb. Rev. Stat. §§ 71-931, 71-932, and 71-933 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 5 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | Neb. Rev. Stat. § 71-931(3) | Partial credit; treatment plan shared with county attorney but not the court | 3 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Neb. Rev. Stat. §§ 71-933, 71-934 | | 5 |
| 8. Duration of initial order | Neb. Rev. Stat. § 71-932 | <input checked="" type="checkbox"/> = 90 days (2 pts) <u>or</u> <input type="checkbox"/> > 90 days (5 pts) | 2 |
| 9. Duration of continued order | Neb. Rev. Stat. § 71-932 | <input checked="" type="checkbox"/> = 180 days (2 pts) <u>or</u> <input type="checkbox"/> > 180 days (5 pts) Partial credit; 90 days for first year but six months after that | 1 |
| SUBTOTAL | | | 31 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | Neb. Rev. Stat. § 71-921(2) | District court | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 32 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 31 |
| PART TWO TOTAL | | | 32 |
| TOTAL | | | 63 |
| GRADE | | | D |

Nevada State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

| PART ONE: Inpatient Commitment Statute (up to 50 points) | | | |
|---------------------------------------------------------------------------------------|---------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. Citizen access to court, emergency evaluation (5 pts) | Nev. Rev. Stat. § 433A.160(2) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) Spouse, parent, adult child, or legal guardian | 3 |
| 2. Quality of emergency petition process (5 pts) | Nev. Rev. Stat. § 433A.160 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | Nev. Rev. Stat. § 433A.150(2) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) 72 hours | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | Nev. Rev. Stat. § 433A.200(1) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) Spouse, parent, adult child, or legal guardian | 3 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Nev. Rev. Stat. §§ 433A.0175(1), 433A.0195(1),(2) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Nev. Rev. Stat. §§ 433A.0175(1), 433A.0195(3) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input checked="" type="checkbox"/> Unreasonably severe harm required (-3 pts) Comment: Grave disability standard under Nev. Rev. Stat. § 433A.0195(3) needlessly requires neglect of basic needs to be "complete." | 7 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | Nev. Rev. Stat. §§ 433A.0175(1), 433A.0195(2) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 10 |
| SUBTOTAL | | | 43 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | Nev. Rev. Stat. § 433A.200(1) | District court | 1 |
| Extra Credit | | | 0 |
| PART ONE TOTAL | | | 44 |

| PART TWO: Outpatient Commitment Statute (up to 50 points) | | | |
|-----------------------------------------------------------|----------------------------------|----------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. AOT explicitly authorized (5 pts) | Nev. Rev. Stat. § 433A.310(1)(b) | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|-------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 2. Citizen access to court for AOT (5 pts) | Nev. Rev. Stat. § 433A.200(1) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) Spouse, parent, adult child, or legal guardian | 3 |
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Nev. Rev. Stat. §§ 433A.310(4)(a)–(h) | Evaluate applicable provision only: <input type="checkbox"/> If inpatient/outpatient criteria are the same: <input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) or <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) or <input checked="" type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <input checked="" type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input checked="" type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) Comment: Under Nev. Rev. Stat. § 433A.310, a person is not eligible for AOT unless the court finds them to meet BOTH the criteria required for inpatient commitment AND additional criteria. These additional criteria alone are sufficient to ensure that AOT is appropriately applied. | 6 |
| 4. Authorizes AOT directly from community (5 pts) | Nev. Rev. Stat. §§ 433A.310(4)(a)–(h) | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Nev. Rev. Stat. §§ 433A.310(4)(a)–(h), 433A.315 | <input type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) Comment: Requirements under Nev. Rev. Stat. § 433A.315 for two professionals to develop the treatment plan and for the plan to state specific medications prescribed (as opposed to medication classes) are needlessly burdensome. | 3 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | Nev. Rev. Stat. § 433A.315 | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Nev. Rev. Stat. § 433A.323 | | 5 |
| 8. Duration of initial order | Nev. Rev. Stat. § 433A.310(5) | <input type="checkbox"/> = 90 days (2 pts) or <input checked="" type="checkbox"/> > 90 days (5 pts) | 5 |
| 9. Duration of continued order | Nev. Rev. Stat. § 433A.310(5) | <input checked="" type="checkbox"/> = 180 days (2 pts) or <input type="checkbox"/> > 180 days (5 pts) Must refile every 180 days | 2 |
| SUBTOTAL | | | 39 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | Nev. Rev. Stat. § 433A.200(1) | | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | |
| PART TWO TOTAL | | | 40 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 44 |
| PART TWO TOTAL | | | 40 |
| TOTAL | | | 84 |
| GRADE | | | B |

New Hampshire State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|------------------------------------------------------------------------------|---------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 1. Citizen access to court, emergency evaluation (5 pts) | N.H. Rev. Stat. Ann. § 135-C:28 | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) | 0 |
| 2. Quality of emergency petition process (5 pts) | N.H. Rev. Stat. Ann. § 135-C:28 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | N.H. Rev. Stat. Ann. § 135-C:28(III) | <input type="checkbox"/> At least 48-hour hold allowed (3 pts) <input type="checkbox"/> At least 72-hour hold allowed (2 pts) Six hours | 0 |
| 4. Citizen access to court, inpatient petition (5 pts) | N.H. Rev. Stat. Ann. § 135-C:35 | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | N.H. Rev. Stat. Ann. § 135-C:27 | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | N.H. Rev. Stat. Ann. § 135-C:27(1)(c) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input checked="" type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 7 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | N.H. Rev. Stat. Ann. § 135-C:34 | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input checked="" type="checkbox"/> Language is vague/ambiguous (-3 pts) Comment: Language contained in the emergency evaluation statute includes a deterioration standard but does not explicitly apply it to inpatient petitions. Though the definition is likely intended to apply to both situations, it is ambiguous. The language used in § 135-C:27(1) likewise should be clarified to increase its utility for future deterioration/need for treatment. | 7 |
| SUBTOTAL | | | 34 |

PART ONE: Extra Credit

| | | | |
|---------------------------------------------------------------------------------------|--|--|-----------|
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | | | |
| Extra Credit | | | 0 |
| PART ONE TOTAL | | | 34 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------|---------------------------------|----------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | N.H. Rev. Stat. Ann. § 135-C:45 | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|---------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|
| 2. Citizen access to court for AOT (5 pts) | N.H. Rev. Stat. Ann. § 135-C:35 | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | N.H. Rev. Stat. Ann. § 135-C:45 | Evaluate applicable provision only: <input checked="" type="checkbox"/> If inpatient/outpatient criteria are the same: <input checked="" type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) or <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) or <input type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 10 |
| 4. Authorizes AOT directly from community (5 pts) | N.H. Rev. Stat. Ann. § 135-C:45 | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | | <input type="checkbox"/> Process specified and reasonable (1 pt) <input type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 2 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | | | 0 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | | Language in § 135-C:45 discusses noncompliance but appears to apply only to conditional discharge. To apply to outpatient civil commitment, explicit reference should be made. | 0 |
| 8. Duration of initial order | N.H. Rev. Stat. Ann. § 135-C:46 | <input type="checkbox"/> = 90 days (2 pts) or <input checked="" type="checkbox"/> > 90 days (5 pts) No more than five years | 5 |
| 9. Duration of continued order | N.H. Rev. Stat. Ann. § 135-C:46 | <input type="checkbox"/> = 180 days (2 pts) or <input checked="" type="checkbox"/> > 180 days (5 pts) No more than five years | 5 |
| SUBTOTAL | | | 37 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | | | |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 0 |
| PART TWO TOTAL | | | 37 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 34 |
| PART TWO TOTAL | | | 37 |
| TOTAL | | | 71 |
| GRADE | | | C- |

New Jersey State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|---------------------------------------------------------------------------------------|------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. Citizen access to court, emergency evaluation (5 pts) | N.J. Stat. §§ 30:4-27.10, 30:4-27.16 | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) Law enforcement, screener, outpatient provider | 0 |
| 2. Quality of emergency petition process (5 pts) | N.J. Stat. §§ 30:4-27.6, 30:4-27.10 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 3 |
| 3. Emergency hold duration (5 pts) | N.J. Stat. § 30:4-27.9(c) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) 72 hours | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | N.J. Stat. § 30:4-27.6(b) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) Families may request screening; no court access | 0 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | N.J. Stat. §§ 30:4-27.2(h), 30:4-27.2(i) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | N.J. Stat. § 30:4-27.2(h) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input checked="" type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input checked="" type="checkbox"/> Unreasonably severe harm required (-3 pts) Comment: It must be "probable that substantial bodily injury, serious physical harm or death will result ..." without treatment. | 4 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 0 |
| SUBTOTAL | | | 22 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | | | |
| Extra Credit | | | 0 |
| PART ONE TOTAL | | | 22 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------|---------------------------|----------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | N.J. Stat. § 30:4-27.2(m) | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 2. Citizen access to court for AOT (5 pts) | N.J. Stat. § 30:4-27.10(b) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | N.J. Stat. §§ 30:4-27.2(h), 30:4-27.2(i) | Evaluate applicable provision only: <input checked="" type="checkbox"/> If inpatient/outpatient criteria are the same: <input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u> <input checked="" type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) or <input type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 5 |
| 4. Authorizes AOT directly from community (5 pts) | | Not expressly authorized, but appears possible | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | N.J. Stat. §§ 30:4-27.10, 30:4-27.16 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 5 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | N.J. Stat. § 30:4-27.15(c)(2) | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | N.J. Stat. § 30:4-27.15(c)(3) | | 5 |
| 8. Duration of initial order | N.J. Stat. § 30:4-27.15(c)(2) | <input type="checkbox"/> = 90 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 90 days (5 pts) 90 to 180 days | 5 |
| 9. Duration of continued order | N.J. Stat. § 30:4-27.16 | <input type="checkbox"/> = 180 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 180 days (5 pts) 180 days to 12 months | 5 |
| SUBTOTAL | | | 45 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | | | |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 0 |
| PART TWO TOTAL | | | 45 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 22 |
| PART TWO TOTAL | | | 45 |
| TOTAL | | | 67 |
| GRADE | | | D+ |

New Mexico State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|---------------------------------------------------------------------------------------|---------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 1. Citizen access to court, emergency evaluation (5 pts) | N.M. Stat. Ann. § 43-1-10 | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) Police officer, physician, or psychologist | 0 |
| 2. Quality of emergency petition process (5 pts) | N.M. Stat. Ann. § 43-1-10 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | N.M. Stat. Ann. § 43-1-11 | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) Seven days | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | N.M. Stat. Ann. § 43-1-11(G) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) Citizens may request that district attorney investigate | 0 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | N.M. Stat. Ann. §§ 43-1-11(E), 43-1-3(M), and 43-1-3(N) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | N.M. Stat. Ann. § 43-1-3(M) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 0 |
| SUBTOTAL | | | 30 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | | | |
| Extra Credit | | | 0 |
| PART ONE TOTAL | | | 30 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------|---------------------------|---------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | N.M. Stat. Ann. § 43-1B-4 | <input checked="" type="checkbox"/> Requires local government to adopt (-3 pts) | 2 |

| | | | |
|------------------------------------------------------------------------------|----------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 2. Citizen access to court for AOT (5 pts) | N.M. Stat. Ann. § 43-1B-4 | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) Adult who lives with the individual, parent, spouse, sibling, adult child | 3 |
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | N.M. Stat. Ann. § 43-1B-3 | Evaluate applicable provision only: <input type="checkbox"/> If inpatient/outpatient criteria are the same: <input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u> <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) or <input checked="" type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <input checked="" type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input checked="" type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input checked="" type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 10 |
| 4. Authorizes AOT directly from community (5 pts) | N.M. Stat. Ann. § 43-1B-6 | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | N.M. Stat. Ann. § 43-1B-6 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 4 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | N.M. Stat. Ann. §§ 43-1B-6(H), 43-1B-7 | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | N.M. Stat. Ann. § 43-1B-13 | | 5 |
| 8. Duration of initial order | N.M. Stat. Ann. § 43-1B-8 | <input type="checkbox"/> = 90 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 90 days (5 pts) One year | 5 |
| 9. Duration of continued order | N.M. Stat. Ann. § 43-1B-11 | <input type="checkbox"/> = 180 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 180 days (5 pts) One year | 5 |
| SUBTOTAL | | | 44 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | N.M. Stat. Ann. § 43-1B-4 | District court | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 45 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 30 |
| PART TWO TOTAL | | | 45 |
| TOTAL | | | 75 |
| GRADE | | | C |

New York State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|---------------------------------------------------------------------------------------|---------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 1. Citizen access to court, emergency evaluation (5 pts) | N.Y. Mental Hyg. Law § 9.43(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | N.Y. Mental Hyg. Law § 9.39(a) | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | N.Y. Mental Hyg. Law §§ 9.39(a), 9.40 | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) Up to 15 days in a hospital; up to 72 hours in a crisis center | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | N.Y. Mental Hyg. Law § 9.27(a) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) Must go through hospital director | 0 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | N.Y. Mental Hyg. Law § 9.01 | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 0 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 0 |
| SUBTOTAL | | | 25 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | N.Y. Mental Hyg. Law § 9.31(b) | Supreme or county court | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 26 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------------|--------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | N.Y. Mental Hyg. Law § 9.60 | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | N.Y. Mental Hyg. Law § 9.60(e) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|-----------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | N.Y. Mental Hyg. Law § 9.60 | <p>Evaluate applicable provision only:</p> <p><input type="checkbox"/> If inpatient/outpatient criteria are the same:</p> <p><input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) or</p> <p><input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts)</p> <p>or</p> <p><input checked="" type="checkbox"/> If outpatient criteria are distinct from inpatient criteria:</p> <p><input checked="" type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts)</p> <p><input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt)</p> <p><input checked="" type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts)</p> <p><input checked="" type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts)</p> | 10 |
| 4. Authorizes AOT directly from community (5 pts) | N.Y. Mental Hyg. Law § 9.60 | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | N.Y. Mental Hyg. Law § 9.60 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 4 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | N.Y. Mental Hyg. Law § 9.60(j)(3) | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | N.Y. Mental Hyg. Law § 9.60(n) | | 5 |
| 8. Duration of initial order | N.Y. Mental Hyg. Law § 9.60(j)(2) | <input type="checkbox"/> = 90 days (2 pts) or <input checked="" type="checkbox"/> > 90 days (5 pts) One year | 5 |
| 9. Duration of continued order | N.Y. Mental Hyg. Law § 9.60(k)(2) | <input type="checkbox"/> = 180 days (2 pts) or <input checked="" type="checkbox"/> > 180 days (5 pts) One year | 5 |
| SUBTOTAL | | | 49 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | N.Y. Mental Hyg. Law § 9.60(e) | Supreme court or county court | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 50 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 26 |
| PART TWO TOTAL | | | 50 |
| TOTAL | | | 76 |
| GRADE | | | C |

North Carolina State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|---------------------------------------------------------------------------------------|---------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 1. Citizen access to court, emergency evaluation (5 pts) | N.C. Gen. Stat. § 122C-261 | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | N.C. Gen. Stat. § 122C-261(a) | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | N.C. Gen. Stat. § 122C-263 | <input type="checkbox"/> At least 48-hour hold allowed (3 pts) <input type="checkbox"/> At least 72-hour hold allowed (2 pts) 24 hours | 0 |
| 4. Citizen access to court, inpatient petition (5 pts) | N.C. Gen. Stat. § 122C-266(a)(1) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) Physicians and eligible psychologists only | 0 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | N.C. Gen. Stat. § 122C-3(11) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | N.C. Gen. Stat. § 122C-3(11)(a)(1)(I) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | N.C. Gen. Stat. §§ 122C-3(11)(a)(1)(I)–(II) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 10 |
| SUBTOTAL | | | 40 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | N.C. Gen. Stat. § 122C-261(a) | Superior court | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 41 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------------|----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | N.C. Gen. Stat. § 122C-271(a)(1) | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 0 |

| | | | |
|------------------------------------------------------------------------------|--------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | N.C. Gen. Stat. §§ 122C-271(a)(1), 122C-267(h), and 122C-263(d)(1) | <p>Evaluate applicable provision only:</p> <input type="checkbox"/> If inpatient/outpatient criteria are the same: <ul style="list-style-type: none"> <input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u> <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) <p>or</p> <input checked="" type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <ul style="list-style-type: none"> <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input checked="" type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input checked="" type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 10 |
| 4. Authorizes AOT directly from community (5 pts) | | Not expressly authorized, but appears possible | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | N.C. Gen. Stat. §§ 122C-267, 122C-271, and 122C-275 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 4 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | N.C. Gen. Stat. § 122C-271(b)(4) | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | N.C. Gen. Stat. § 122C-273 | | 5 |
| 8. Duration of initial order | N.C. Gen. Stat. § 122C-271(a)(1) | <input checked="" type="checkbox"/> = 90 days (2 pts) <u>or</u> <input type="checkbox"/> > 90 days (5 pts) | 2 |
| 9. Duration of continued order | N.C. Gen. Stat. § 122C-275 | <input checked="" type="checkbox"/> = 180 days (2 pts) <u>or</u> <input type="checkbox"/> > 180 days (5 pts) | 2 |
| SUBTOTAL | | | 38 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | N.C. Gen. Stat. § 122C-264 | Superior court | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 39 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 41 |
| PART TWO TOTAL | | | 39 |
| TOTAL | | | 80 |
| GRADE | | | B- |

North Dakota State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

| PART ONE: Inpatient Commitment Statute (up to 50 points) | | | |
|---------------------------------------------------------------------------------------|---------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. Citizen access to court, emergency evaluation (5 pts) | N.D. Cent. Code § 25-03.1-08 | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) Individual presents information to state's attorney, who determines whether to file petition. However, state's attorney's declination may be challenged in district court. | 5 |
| 2. Quality of emergency petition process (5 pts) | N.D. Cent. Code § 25-03.1-25(1) | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | N.D. Cent. Code § 25-03.1-26(2) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) Hearing must be held within four business days (extendable for good cause shown). | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | N.D. Cent. Code § 25-03.1-08 | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | N.D. Cent. Code § 25-03.1-02(20)-(21) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | N.D. Cent. Code § 25-03.1-02(20)-(21) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | N.D. Cent. Code § 25-03.1-02(20)-(21) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 10 |
| SUBTOTAL | | | 50 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | N.D. Cent. Code § 25-03.1-2(5) | District court | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 51 |

| PART TWO: Outpatient Commitment Statute (up to 50 points) | | | |
|-----------------------------------------------------------|----------------------------------------------|----------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. AOT explicitly authorized (5 pts) | N.D. Cent. Code §§ 25-03.1-02(2), 25-03.1-21 | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 2. Citizen access to court for AOT (5 pts) | N.D. Cent. Code § 25-03.1-08 | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | N.D. Cent. Code § 25-03.1-02(20)-(21) | Evaluate applicable provision only: <input checked="" type="checkbox"/> If inpatient/outpatient criteria are the same: <input checked="" type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u> <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) or <input type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 10 |
| 4. Authorizes AOT directly from community (5 pts) | N.D. Cent. Code § 25-03.1-21 | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | N.D. Cent. Code § 25-03.1-21 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 4 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | | | 0 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | N.D. Cent. Code § 25-03.1-21(2) | | 5 |
| 8. Duration of initial order | N.D. Cent. Code § 25-03.1-22 | <input checked="" type="checkbox"/> = 90 days (2 pts) <u>or</u> <input type="checkbox"/> > 90 days (5 pts) | 2 |
| 9. Duration of continued order | N.D. Cent. Code § 25-03.1-22 | <input type="checkbox"/> = 180 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 180 days (5 pts) One year | 5 |
| SUBTOTAL | | | 41 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | | | |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 0 |
| PART TWO TOTAL | | | 41 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 51 |
| PART TWO TOTAL | | | 41 |
| TOTAL | | | 92 |
| GRADE | | | A- |

Ohio State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|---------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 1. Citizen access to court, emergency evaluation (5 pts) | Ohio Rev. Code Ann. § 5122.11 | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | Ohio Rev. Code Ann. § 5122.11 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | Ohio Rev. Code Ann. § 5122.10(E) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) Three court days | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | Ohio Rev. Code Ann. § 5122.11 | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Ohio Rev. Code Ann. § 5122.01(B) (1)(2) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Ohio Rev. Code Ann. § 5122.01(B) (3) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input checked="" type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 7 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 0 |
| SUBTOTAL | | | 37 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | Ohio Rev. Code Ann. § 5122.11 | Probate court | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 38 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------------|----------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | Ohio Rev. Code Ann. § 5122.15(C) | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | Ohio Rev. Code Ann. § 5122.11 | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|----------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Ohio Rev. Code Ann. § 5122.01(B) | <p>Evaluate applicable provision only:</p> <p><input type="checkbox"/> If inpatient/outpatient criteria are the same:</p> <p style="padding-left: 20px;"><input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u></p> <p style="padding-left: 20px;"><input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts)</p> <p>or</p> <p><input checked="" type="checkbox"/> If outpatient criteria are distinct from inpatient criteria:</p> <p style="padding-left: 20px;"><input checked="" type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts)</p> <p style="padding-left: 40px;"><input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt)</p> <p style="padding-left: 20px;"><input checked="" type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts)</p> <p style="padding-left: 20px;"><input checked="" type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts)</p> | 10 |
| 4. Authorizes AOT directly from community (5 pts) | Ohio Rev. Code Ann. § 5122.01(B)(5)(b) | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Ohio Rev. Code Ann. § 5122.15 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 5 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | Ohio Rev. Code Ann. § 5122.15(E) | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Ohio Rev. Code Ann. § 5122.15(N) | | 5 |
| 8. Duration of initial order | Ohio Rev. Code Ann. § 5122.15(F) | <input checked="" type="checkbox"/> = 90 days (2 pts) <u>or</u> <input type="checkbox"/> > 90 days (5 pts) 90 days | 2 |
| 9. Duration of continued order | Ohio Rev. Code Ann. § 5122.15(H) | <input type="checkbox"/> = 180 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 180 days (5 pts) Two years | 5 |
| SUBTOTAL | | | 47 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | Ohio Rev. Code Ann. § 5122.11 | Probate court | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 48 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 38 |
| PART TWO TOTAL | | | 48 |
| TOTAL | | | 86 |
| GRADE | | | B |

Oklahoma State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|---------------------------------------------------------------------------------------|----------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 1. Citizen access to court, emergency evaluation (5 pts) | Okla. Stat. tit. 43A § 5-207(G) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) | 0 |
| 2. Quality of emergency petition process (5 pts) | Okla. Stat. tit. 43A §§ 5-207(A)-(C) | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | Okla. Stat. tit. § 43A 5-208(A)(3) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) 12 hours for evaluation followed by 120 hours | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | Okla. Stat. tit. 43A § 5-410(A)(2) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) Any father, mother, husband, wife, grandparent, brother, sister, guardian, or child over 18 | 3 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Okla. Stat. tit. 43A §§ 1-103(13)(a) (1)–(3) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input checked="" type="checkbox"/> Harm must be imminent (-3 pts) | 7 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Okla. Stat. tit. 43A § 1-103(13)(a)(5) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input checked="" type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 7 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | Okla. Stat. tit. 43A § 1-103(13)(a)(4) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input checked="" type="checkbox"/> Language is vague/ambiguous (-3 pts) | 7 |
| SUBTOTAL | | | 34 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | Okla. Stat. tit. 43A § 5-410(A) | | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 35 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------------|----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | Okla. Stat. tit. 43A § 1-103(20) | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | Okla. Stat. tit. 43A § 5-410(C) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 0 |

| | | | |
|------------------------------------------------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Okla. Stat. tit. 43A § 1-103(20) | <p>Evaluate applicable provision only:</p> <input type="checkbox"/> If inpatient/outpatient criteria are the same: <ul style="list-style-type: none"> <input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <i>or</i> <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) <p>or</p> <input checked="" type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <ul style="list-style-type: none"> <input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <ul style="list-style-type: none"> <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <p>Requires two hospitalizations in the past 12 months</p> <input checked="" type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input checked="" type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 8 |
| 4. Authorizes AOT directly from community (5 pts) | Okla. Stat. tit. 43A § 1-103(20)(a) | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Okla. Stat. tit. 43A § 5-416 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 5 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | Okla. Stat. tit. 43A § 5-416(F) | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Okla. Stat. tit. 43A § 5-416(B)(2) | | 5 |
| 8. Duration of initial order | Okla. Stat. tit. 43A § 5-416(M) | <input type="checkbox"/> = 90 days (2 pts) <i>or</i> <input checked="" type="checkbox"/> > 90 days (5 pts) One year | 5 |
| 9. Duration of continued order | Okla. Stat. tit. 43A § 5-416(M) | <input type="checkbox"/> = 180 days (2 pts) <i>or</i> <input checked="" type="checkbox"/> > 180 days (5 pts) One year | 5 |
| SUBTOTAL | | | 43 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | Okla. Stat. tit. 43A § 1-107 | | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 44 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 35 |
| PART TWO TOTAL | | | 44 |
| TOTAL | | | 79 |
| GRADE | | | C+ |

Oregon State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|------------------------------------------------------------------------------|---------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. Citizen access to court, emergency evaluation (5 pts) | Or. Rev. Stat. §§ 426.228(1), 426.233(1)(a) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) Professionals only | 0 |
| 2. Quality of emergency petition process (5 pts) | Or. Rev. Stat. §§ 426.228(1), 426.233(1)(a) | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input checked="" type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) Comments: Emergency custody requires dangerousness, inconsistent with other bases for inpatient commitment. | 0 |
| 3. Emergency hold duration (5 pts) | Or. Rev. Stat. § 426.232(2) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) Five judicial days | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | Or. Rev. Stat. § 426.070(1) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) Any two persons, the county health officer, or any magistrate may initiate procedures | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Or. Rev. Stat. § 426.005(1)(f)(A) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input checked="" type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 7 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Or. Rev. Stat. § 426.005(1)(f)(B) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input checked="" type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) Comment: The imminence requirement was read into the statute by the Oregon Court of Appeals in <i>State v. Bunting</i> , 826 P.2d 1060 (1992). | 7 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | Or. Rev. Stat. § 426.005(1)(f)(C) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 10 |
| SUBTOTAL | | | 34 |

PART ONE: Extra Credit

| | | | |
|---------------------------------------------------------------------------------------|--|--|----|
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | | | |
| Extra Credit | | | 0 |
| PART ONE TOTAL | | | 34 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------|---------------------------------|----------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | Or. Rev. Stat. § 426.133(2)-(3) | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|----------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 2. Citizen access to court for AOT (5 pts) | OR Rev Stat § 426.070(1) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Or. Rev. Stat. §§ 426.133(2)–(3) | Evaluate applicable provision only: <input type="checkbox"/> If inpatient/outpatient criteria are the same: <input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) or <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) or <input checked="" type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <input checked="" type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input checked="" type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input checked="" type="checkbox"/> Does not limit application to those refusing service/lacking insight (4 pts) | 10 |
| 4. Authorizes AOT directly from community (5 pts) | Or. Rev. Stat. §§ 426.133(2)–(3) | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Or. Rev. Stat. § 426.130 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 5 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | Or. Rev. Stat. § 426.133(4) | Statutory language is “may” rather than “shall” and thus doesn’t require treatment plan submission, but it signals that integration of court order and treatment plan is advisable. | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Or. Rev. Stat. § 426.275(2) | | 5 |
| 8. Duration of initial order | Or. Rev. Stat. § 426.130(2) | <input type="checkbox"/> = 90 days (2 pts) or <input checked="" type="checkbox"/> > 90 days (5 pts) 12 months | 5 |
| 9. Duration of continued order | Or. Rev. Stat. § 426.130(2) | <input type="checkbox"/> = 180 days (2 pts) or <input checked="" type="checkbox"/> > 180 days (5 pts) 12 months | 5 |
| SUBTOTAL | | | 50 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | | | |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 0 |
| PART TWO TOTAL | | | 50 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 34 |
| PART TWO TOTAL | | | 50 |
| TOTAL | | | 84 |
| GRADE | | | B |

Pennsylvania State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|------------------------------------------------------------------------------|----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 1. Citizen access to court, emergency evaluation (5 pts) | 50 P.S. § 7302(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | 50 P.S. § 7302 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | 50 P.S. § 7302 | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) 120 hours or five days | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | 50 P.S. § 7304(c)(1) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | 50 P.S. §§ 7301(b)(1), (2) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input checked="" type="checkbox"/> Harm must be imminent (-3 pts) | 7 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | 50 P.S. § 7301(b)(2)(i) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input checked="" type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input checked="" type="checkbox"/> Unreasonably severe harm required (-3 pts) Comment: The statute is ambiguous in that it seeks a finding on the probability of future dangerousness based exclusively on whether or not certain types of harm occurred within the past 30 days, without reference to treatment history. The degree of harm required is extreme, calling for a reasonable probability that death, serious bodily injury or serious physical debilitation ensue within 30 days. | 4 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 0 |
| SUBTOTAL | | | 31 |
| PART ONE: Extra Credit | | | |
| 1. Specifies court to petition for inpatient commitment (1 pt) | 50 P.S. § 7304(c)(1) | Court of common pleas | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 32 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------|----------------|----------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | 50 P.S. § 7304 | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|--------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|
| 2. Citizen access to court for AOT (5 pts) | 50 P.S. § 7304(c)(1) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | 50 P.S. § 7301(c) | Evaluate applicable provision only: <input type="checkbox"/> If inpatient/outpatient criteria are the same: <input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u> <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) (See comments below) or <input checked="" type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <input checked="" type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input checked="" type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input checked="" type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 10 |
| 4. Authorizes AOT directly from community (5 pts) | 50 P.S. § 7304(c.2) | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | 50 P.S. § 7304(c.1), (c.2); 50 P.S. § 7305 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 4 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | 50 P.S. § 7304(e)(8)(i) | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | 50 P.S. § 7304(f)(5),(6) | | 5 |
| 8. Duration of initial order | 50 P.S. § 7304(g)(1)(ii) | <input type="checkbox"/> = 90 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 90 days (5 pts) | 5 |
| 9. Duration of continued order | 50 P.S. § 7305(c) | <input checked="" type="checkbox"/> = 180 days (2 pts) <u>or</u> <input type="checkbox"/> > 180 days (5 pts) | 2 |
| SUBTOTAL | | | 46 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | 50 P.S. § 7304(c)(1) | <i>Court of common pleas</i> | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 47 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 32 |
| PART TWO TOTAL | | | 47 |
| TOTAL | | | 79 |
| GRADE | | | C+ |

Rhode Island State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|------------------------------------------------------------------------------|----------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 1. Citizen access to court, emergency evaluation (5 pts) | R.I. Gen. Laws § 40.1-5-7(a)(1) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) | 0 |
| 2. Quality of emergency petition process (5 pts) | R.I. Gen. Laws § 40.1-5-7 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) Comment: Some inconsistency between the emergency and inpatient standards: the emergency standard requires <i>imminent</i> likelihood of substantial harm, but the inpatient standard requires only likelihood of substantial harm. | 5 |
| 3. Emergency hold duration (5 pts) | R.I. Gen. Laws § 40.1-5-7(f) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) 72 hours for evaluation, maximum of 10 days without court order | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | R.I. Gen. Laws § 40.1-5-8(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) | 3 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | R.I. Gen. Laws §§ 40.1-5-2(7)(i), (ii) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | R.I. Gen. Laws § 40.1-5-2(7)(iii) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input checked="" type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 7 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (up to 10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 0 |
| SUBTOTAL | | | 30 |
| PART ONE: Extra Credit | | | |
| 1. Specifies court to petition for inpatient commitment (1 pt) | R.I. Gen. Laws § 40.1-5-8 | District court | 1 |
| PART ONE TOTAL | | | 31 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------------|------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | R.I. Gen. Laws § 40.1-5-2(1) | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | R.I. Gen. Laws § 40.1-5-8(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 3 |

| | | | |
|----------------------------------------------------------------------------------------|------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | R.I. Gen. Laws § 40.1-5-2(7) | <p>Evaluate applicable provision only:</p> <p><input checked="" type="checkbox"/> If inpatient/outpatient criteria are the same:</p> <p><input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts)</p> <p><u>or</u></p> <p><input checked="" type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts)</p> <p><u>or</u></p> <p><input type="checkbox"/> If outpatient criteria are distinct from inpatient criteria:</p> <p><input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts)</p> <p><input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt)</p> <p><input type="checkbox"/> Does not limit application to individuals who are currently dangerous or unstable (4 pts)</p> <p><input type="checkbox"/> Does not limit application to patients who are refusing service or currently lacking insight (4 pts)</p> <p>Comment: Grave disability language requires “present” danger, making it challenging to impose AOT upon discharge when ready for release.</p> | 5 |
| 4. Authorizes AOT directly from community (5 pts) | R.I. Gen. Laws § 40.1-5-8 | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | | <input type="checkbox"/> Process specified and reasonable (1 pt) <input type="checkbox"/> Timelines specified and reasonable (1 pt) <input type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Periodic reporting to court required (1 pt) <input type="checkbox"/> Renewal process expressly specified (1 pt) | 0 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | | | 0 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | | | 0 |
| 8. Duration of initial order | R.I. Gen. Laws § 40.1-5-8(j) | <input type="checkbox"/> = 90 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 90 days (5 pts) Six months | 5 |
| 9. Duration of continued order | R.I. Gen. Laws § 40.1-5-8(j) | <input checked="" type="checkbox"/> = 180 days (2 pts) <u>or</u> <input type="checkbox"/> > 180 days (5 pts) | 2 |
| SUBTOTAL | | | 25 |
| PART TWO: Extra Credit | | | |
| 1. Specifies in which court a petition for outpatient commitment shall be filed (1 pt) | R.I. Gen. Laws § 40.1-5-8 | District court | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 26 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 31 |
| PART TWO TOTAL | | | 26 |
| TOTAL | | | 57 |
| GRADE | | | F |

South Carolina State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|---------------------------------------------------------------------------------------|----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 1. Citizen access to court, emergency evaluation (5 pts) | S.C. Code Ann. § 44-17-510 | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | S.C. Code Ann. § 44-17-410 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input checked="" type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) Comment: Emergency hold requires likelihood of serious harm and is not available for individual who "lacks sufficient insight or capacity to make responsible [treatment] decisions." | 0 |
| 3. Emergency hold duration (5 pts) | S.C. Code Ann. § 44-17-410(3) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input type="checkbox"/> At least 72-hour hold allowed (2 pts) 48 hours | 3 |
| 4. Citizen access to court, inpatient petition (5 pts) | S.C. Code Ann. § 44-17-510 | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | S.C. Code Ann. §§ 44-17-580(A), 44-23-10(13) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | S.C. Code Ann. § 44-23-10(7) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | S.C. Code Ann. § 44-17-580(A)(1) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 10 |
| SUBTOTAL | | | 43 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | S.C. Code Ann. § 44-17-510 | Probate court | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 44 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------------|-------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | S.C. Code Ann. § 44-17-580(A) | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | S.C. Code Ann. § 44-17-510 | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|----------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | S.C. Code Ann. §§ 44-17-580(A), 44-23-10(13) | <p>Evaluate applicable provision only:</p> <input checked="" type="checkbox"/> If inpatient/outpatient criteria are the same: <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) or <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) <p>or</p> <input type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <ul style="list-style-type: none"> <input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <ul style="list-style-type: none"> <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 10 |
| 4. Authorize AOT directly from community (5 pts) | S.C. Code Ann. § 44-17-580(A) | The initial petition is for involuntary hospitalization; the court may decide to issue an outpatient order in lieu of inpatient | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | S.C. Code Ann. §§ 44-17-580(A), (B) | <input type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 3 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | | | 0 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | S.C. Code Ann. § 44-17-580(B) | | 5 |
| 8. Duration of initial order | S.C. Code Ann. § 44-17-630 | <input type="checkbox"/> = 90 days (2 pts) or <input checked="" type="checkbox"/> > 90 days (5 pts) | 5 |
| 9. Duration of continued order | S.C. Code Ann. § 44-17-630 | <input type="checkbox"/> = 180 days (2 pts) or <input checked="" type="checkbox"/> > 180 days (5 pts) | 5 |
| SUBTOTAL | | | 43 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | S.C. Code Ann. § 44-17-510 | Probate court | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 44 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 44 |
| PART TWO TOTAL | | | 44 |
| TOTAL | | | 88 |
| GRADE | | | B+ |

South Dakota State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|---------------------------------------------------------------------------------------|-------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. Citizen access to court, emergency evaluation (5 pts) | S.D. Codified Laws § 27A-10-1 | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) Petition must be filed with chair of county board of mental illness. The board serves as an administrative court. | 5 |
| 2. Quality of emergency petition process (5 pts) | S.D. Codified Laws § 27A-10-1 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | S.D. Codified Laws § 27A-10-8 | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) Right to hearing within five business days | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | S.D. Codified Laws § 27A-10-1 | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) Authority to petition for evaluation is fused with authority to petition for inpatient commitment | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | S.D. Codified Laws §§ 27A-1-1(6), 27A-1-1(7)(a) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | S.D. Codified Laws § 27A-1-1(7)(b) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 0 |
| SUBTOTAL | | | 40 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | S.D. Codified Laws § 27A-10-1 | County board of mental illness (serves as administrative court) | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 41 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------|-------------------------------|----------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | S.D. Codified Laws § 27A-10-9 | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|
| 2. Citizen access to court for AOT (5 pts) | S.D. Codified Laws § 27A-10-1 | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | S.D. Codified Laws § 27A-1-1(7)(b) | Evaluate applicable provision only: <input checked="" type="checkbox"/> If inpatient/outpatient criteria are the same: <input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u> <input checked="" type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) or <input type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 5 |
| 4. Authorizes AOT directly from community (5 pts) | S.D. Codified Laws § 27A-10-9 | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | S.D. Codified Laws § 27A-10-14 | <input type="checkbox"/> Process specified and reasonable (1 pt) <input type="checkbox"/> Timelines specified and reasonable (1 pt) <input type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 1 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | | | 0 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | S.D. Codified Laws §§ 27A-10-9.4, 9.5 | | 5 |
| 8. Duration of initial order | S.D. Codified Laws § 27A-10-9.1 | <input checked="" type="checkbox"/> = 90 days (2 pts) <u>or</u> <input type="checkbox"/> > 90 days (5 pts) 90 days | 2 |
| 9. Duration of continued order | S.D. Codified Laws § 27A-10-14 | <input checked="" type="checkbox"/> = 180 days (2 pts) <u>or</u> <input type="checkbox"/> > 180 days (5 pts) 180 days | 2 |
| SUBTOTAL | | | 30 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | S.D. Codified Laws § 27A-10-1 | County board of mental illness (serves as administrative court) | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 31 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 41 |
| PART TWO TOTAL | | | 31 |
| TOTAL | | | 72 |
| GRADE | | | C- |

Tennessee State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|---------------------------------------------------------------------------------------|---------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 1. Citizen access to court, emergency evaluation (5 pts) | Tenn. Code Ann. §§ 33-6-402, 33-6-404 | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) | 0 |
| 2. Quality of emergency petition process (5 pts) | Tenn. Code Ann. §§ 33-6-413, 33-6-414 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | Tenn. Code Ann. § 33-6-413 | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) Five days following certification by court | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | Tenn. Code Ann. § 33-6-504 | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) Professionals plus a parent, legal guardian, legal custodian, conservator, spouse, or responsible relative | 3 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Tenn. Code Ann. § 33-6-501 | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input checked="" type="checkbox"/> Harm must be imminent (-3 pts) | 7 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Tenn. Code Ann. § 33-6-501(1)(d) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input checked="" type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 7 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 0 |
| SUBTOTAL | | | 27 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | | | |
| Extra Credit | | | 0 |
| PART ONE TOTAL | | | 27 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------|----------------------------|----------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | Tenn. Code Ann. § 33-6-602 | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 2. Citizen access to court for AOT (5 pts) | Tenn. Code Ann. § 33-6-602 | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) No statutory authority for citizen petition | 0 |
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Tenn. Code Ann. § 33-6-602 | Evaluate applicable provision only: <input type="checkbox"/> If inpatient/outpatient criteria are the same: <input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u> <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) or <input checked="" type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <input checked="" type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input checked="" type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input checked="" type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 10 |
| 4. Authorizes AOT directly from community (5 pts) | | AOT, known as mandatory outpatient treatment, is available only at discharge from inpatient | 0 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Tenn. Code Ann. § 33-6-604 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Periodic reporting to court required (1 pt) <input type="checkbox"/> Renewal process expressly specified (1 pt) | 3 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | Tenn. Code Ann. § 33-6-603 | Written treatment plan is developed by provider; no current requirement for court hearing before discharge unless requested | 0 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Tenn. Code Ann. § 33-6-608-9 | | 5 |
| 8. Duration of initial order | Tenn. Code Ann. § 33-6-623 | <input type="checkbox"/> = 90 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 90 days (5 pts) Six months | 5 |
| 9. Duration of continued order | Tenn. Code Ann. § 33-6-623 | <input checked="" type="checkbox"/> = 180 days (2 pts) <u>or</u> <input type="checkbox"/> > 180 days (5 pts) | 2 |
| SUBTOTAL | | | 30 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | | | |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 0 |
| PART TWO TOTAL | | | 30 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 27 |
| PART TWO TOTAL | | | 30 |
| TOTAL | | | 57 |
| GRADE | | | F |

Texas State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center’s values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state’s assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|------------------------------------------------------------------------------|---------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 1. Citizen access to court, emergency evaluation (5 pts) | Tex. Health & Safety Code Ann. § 573.011(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | Tex. Health & Safety Code Ann. § 573.012 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input checked="" type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) Comment: While the inpatient standard requires “like[li]hood” of serious harm to self/others, the emergency evaluation standard requires “substantial risk” of such harm. | 0 |
| 3. Emergency hold duration (5 pts) | Tex. Health & Safety Code Ann. § 573.021(b) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input type="checkbox"/> At least 72-hour hold allowed (2 pts) No longer than 48 hours | 3 |
| 4. Citizen access to court, inpatient petition (5 pts) | Tex. Health & Safety Code Ann. § 574.001(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Tex. Health & Safety Code Ann. § 574.034(a) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input checked="" type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 7 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Tex. Health & Safety Code Ann. § 574.034(a) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 0 |
| SUBTOTAL | | | 30 |
| PART ONE: Extra Credit | | | |
| 1. Specifies court to petition for inpatient commitment (1 pt) | | | |
| Extra Credit | | | 0 |
| PART ONE TOTAL | | | 30 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------|------------------------------------------------------------|----------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | Tex. Health & Safety Code Ann. §§ 574.0345(a), 574.0355(a) | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|-------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 2. Citizen access to court for AOT (5 pts) | Tex. Health & Safety Code Ann. § 574.001(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Tex. Health & Safety Code Ann. §§ 574.0345(a) , 574.0355(a) | Evaluate applicable provision only: <input type="checkbox"/> If inpatient/outpatient criteria are the same: <input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u> <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) or <input checked="" type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <input checked="" type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input checked="" type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input checked="" type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 10 |
| 4. Authorizes AOT directly from community (5 pts) | Tex. Health & Safety Code Ann. § 574.0345(a) | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Tex. Health & Safety Code Ann. § 574.037 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 5 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | Tex. Health & Safety Code Ann. § 574.037(b) | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Tex. Health & Safety Code Ann. § 574.037(c), (c-3) | | 5 |
| 8. Duration of initial order | Tex. Health & Safety Code Ann. § 574.0345(c) | <input checked="" type="checkbox"/> = 90 days (2 pts) <u>or</u> <input type="checkbox"/> > 90 days (5 pts) 90 days | 2 |
| 9. Duration of continued order | Tex. Health & Safety Code Ann. §§ 574.0355(d) | <input type="checkbox"/> = 180 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 180 days (5 pts) Up to 12 months | 5 |
| SUBTOTAL | | | 47 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | | | |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 0 |
| PART TWO TOTAL | | | 47 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 30 |
| PART TWO TOTAL | | | 47 |
| TOTAL | | | 77 |
| GRADE | | | C+ |

Utah State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|---------------------------------------------------------------------------------------|---------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 1. Citizen access to court, emergency evaluation (5 pts) | Utah Code § 62A-15-629(1)(a)(i) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | Utah Code § 62A-15-629(1) | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) Comment: For a layperson an emergency petition requires the likelihood that the individual will be a substantial danger "if not restrained." This does not apply to law enforcement and is otherwise aligned with the inpatient standard. | 5 |
| 3. Emergency hold duration (5 pts) | Utah Code § 62A-15-629(3) | <input type="checkbox"/> At least 48-hour hold allowed (3 pts) <input type="checkbox"/> At least 72-hour hold allowed (2 pts) 24 hours | 0 |
| 4. Citizen access to court, inpatient petition (5 pts) | Utah Code § 62A-15-631(1) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Utah Code §§ 62A-15-602(18) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Utah Code § 62A-15-602(18)(c) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 0 |
| SUBTOTAL | | | 35 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | Utah Code § 62A-15-631(1) | District court | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 36 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------|--------------------------|----------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | Utah Code § 62A-15-630.5 | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|-------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|
| 2. Citizen access to court for AOT (5 pts) | Utah Code § 62A-15-630.5(1) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Utah Code §§ 62A-15-630.5(14) | Evaluate applicable provision only: <input type="checkbox"/> If inpatient/outpatient criteria are the same: <input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u> <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) or <input checked="" type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <input checked="" type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input checked="" type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input checked="" type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 10 |
| 4. Authorizes AOT directly from community (5 pts) | Utah Code § 62A-15-630.5 | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Utah Code § 62A-15-630.5 | <input type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) Comment: Requirements in AOT law of two physicians to examine, the reading of “Miranda”-type rights, and submission of clinical records to the court are unduly burdensome. | 4 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | | | 0 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | | | 0 |
| 8. Duration of initial order | Utah Code § 62A-15-630.5(17) | <input type="checkbox"/> = 90 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 90 days (5 pts) Six months | 5 |
| 9. Duration of continued order | Utah Code § 62A-15-630.5(17) | <input checked="" type="checkbox"/> = 180 days (2 pts) <u>or</u> <input type="checkbox"/> > 180 days (5 pts) | 2 |
| SUBTOTAL | | | 36 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | Utah Code § 62A-15-631(1) | District court in the county where the proposed patient resides or is found | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 37 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 36 |
| PART TWO TOTAL | | | 37 |
| TOTAL | | | 73 |
| GRADE | | | C |

Vermont State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

| PART ONE: Inpatient Commitment Statute (up to 50 points) | | | |
|------------------------------------------------------------------------------|--------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| Criterion | Citation | Specifications | Points |
| 1. Citizen access to court, emergency evaluation (5 pts) | Vt. Stat. Ann. tit. 18 §§ 7504(a), 7101(9) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | Vt. Stat. Ann. tit. 18 §§ 7504, 7505 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) Comment: The emergency criteria differ from inpatient criteria when a physician cannot immediately evaluate. In those cases, law enforcement and mental health professionals may make application for a warrant of emergency evaluation if they believe an individual “presents an immediate risk of serious injury to himself or herself or others if not restrained.” Otherwise, the criteria are consistent. | 5 |
| 3. Emergency hold duration (5 pts) | Vt. Stat. Ann. tit. 18 § 7508 | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) 24 hours for examination plus 72 hours after second certification | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | Vt. Stat. Ann. tit. 18 §§ 7612(a), 7101(9) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Vt. Stat. Ann. tit. 18 § 7101(17) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Vt. Stat. Ann. tit. 18 § 7101(17) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | Vt. Stat. Ann. tit. 18 § 7101(16) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 10 |
| SUBTOTAL | | | 50 |
| PART ONE: Extra Credit | | | |
| 1. Specifies which court to petition for inpatient commitment (1 pt) | Vt. Stat. Ann. tit. 18 § 7612(b) | Family division of the superior court | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 51 |

| PART TWO: Outpatient Commitment Statute (up to 50 points) | | | |
|-----------------------------------------------------------|-------------------------------|------------------------------------------------------------------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. AOT explicitly authorized (5 pts) | Vt. Stat. Ann. tit. 18 § 7618 | <input type="checkbox"/> Requires local government to adopt (-3 pts) Referred to as “order for nonhospitalization” | 5 |

| | | | |
|------------------------------------------------------------------------------|--------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 2. Citizen access to court for AOT (5 pts) | Vt. Stat. Ann. tit. 18 §§ 7612(a), 7101(9) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Vt. Stat. Ann. tit. 18 §§ 7618, 7101(16) | Evaluate applicable provision only: <input checked="" type="checkbox"/> If inpatient/outpatient criteria are the same: <input checked="" type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u> <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) or <input type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 10 |
| 4. Authorizes AOT directly from community (5 pts) | Vt. Stat. Ann. tit. 18 § 7618 | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Vt. Stat. Ann. tit. 18 § 7621 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 3 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | | | 0 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Vt. Stat. Ann. tit. 18 § 7618(b) | | 5 |
| 8. Duration of initial order | Vt. Stat. Ann. tit. 18 § 7618(a) | <input checked="" type="checkbox"/> = 90 days (2 pts) <u>or</u> <input type="checkbox"/> > 90 days (5 pts) | 2 |
| 9. Duration of continued order | Vt. Stat. Ann. tit. 18 § 7621(c) | <input type="checkbox"/> = 180 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 180 days (5 pts) One year | 5 |
| SUBTOTAL | | | 40 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | Vt. Stat. Ann. tit. 18 § 7612(b) | Family division of the superior court | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 41 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 51 |
| PART TWO TOTAL | | | 41 |
| TOTAL | | | 92 |
| GRADE | | | A- |

Virginia State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

| PART ONE: Inpatient Commitment Statute (up to 50 points) | | | |
|---------------------------------------------------------------------------------------|-----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. Citizen access to court, emergency evaluation (5 pts) | Va. Code Ann. § 37.2-808(A) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | Va. Code Ann. §§ 37.2-808(A), (B) | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | Va. Code Ann. § 37.2-809(H) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) 72 hours | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | Va. Code Ann. §§ 37.2-808(A) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) Explicitly stated on District Court Form DC-4001 | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Va. Code Ann. § 37.2-817(C)(a)(1) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Va. Code Ann. § 37.2-817(C)(a)(2) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | | <input type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 0 |
| SUBTOTAL | | | 40 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | Va. Code Ann. § 37.2-817 | District court | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 41 |

| PART TWO: Outpatient Commitment Statute (up to 50 points) | | | |
|------------------------------------------------------------------|---------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. AOT explicitly authorized (5 pts) | Va. Code Ann. §§ 37.2-817(C), (C1), and (D) | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | Va. Code Ann. § 37.2-817(C) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|---------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Va. Code Ann. §§ 37.2-817(C), (C1), and (D) | <p>Evaluate applicable provision only:</p> <input type="checkbox"/> If inpatient/outpatient criteria are the same: <ul style="list-style-type: none"> <input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u> <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) <p>or</p> <input checked="" type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <ul style="list-style-type: none"> <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input checked="" type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) <p>Comment: Statute actually requires that the individual agree to participate, rendering the legal obligation illusory.</p> | 6 |
| 4. Authorizes AOT directly from community (5 pts) | Va. Code Ann. §§ 37.2-817(C), (C1), and (D) | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Va. Code Ann. §§ 37.2-817, 817.1 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 5 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | Va. Code Ann. §§ 37.2-817(F), 817.2 | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Va. Code Ann. §§ 37.2-817.1(B), (C) | | 5 |
| 8. Duration of initial order | Va. Code Ann. §§ 37.2-817 (C1), (E) | <input checked="" type="checkbox"/> = 90 days (2 pts) <u>or</u> <input type="checkbox"/> > 90 days (5 pts) | 2 |
| 9. Duration of continued order | Va. Code Ann. §37.2-817.4 | <input checked="" type="checkbox"/> = 180 days (2 pts) <u>or</u> <input type="checkbox"/> > 180 days (5 pts) | 2 |
| SUBTOTAL | | | 40 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | Va. Code Ann. §37.2-817 | District court | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 41 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 41 |
| PART TWO TOTAL | | | 41 |
| TOTAL | | | 82 |
| GRADE | | | B- |

Washington State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center’s values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state’s assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|------------------------------------------------------------------------------|----------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 1. Citizen access to court, emergency evaluation (5 pts) | Wash. Rev. Code §§ 71.05.150(1), 71.05.153(1) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) Designated crisis responder only | 0 |
| 2. Quality of emergency petition process (5 pts) | Wash. Rev. Code §§ 71.05.150(1), 71.05.153(1) | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | Wash. Rev. Code § 71.05.153(1) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) 72 hours Comment: The maximum duration of emergency custody will increase from 72 hours to 120 hours, effective July 2, 2026. | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | Wash. Rev. Code § 71.05.230(4)(a) | <input type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input type="checkbox"/> Authorizes any responsible adult (2 pts) | 0 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Wash. Rev. Code §§ 71.05.280(1)–(2), 71.05.020(33) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Wash. Rev. Code § 71.05.020(21)(a) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | Wash. Rev. Code § 71.05.020(21)(b) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 10 |
| SUBTOTAL | | | 40 |

PART ONE: Extra Credit

| | | | |
|---------------------------------------------------------------------------------------|--|--|-----------|
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | | | |
| Extra Credit | | | 0 |
| PART ONE TOTAL | | | 40 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------|----------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | Wash. Rev. Code § 71.05.240(4)(d); § 71.05.020(26) | <input type="checkbox"/> Requires local government to adopt (-3 pts) Comment: When Washington enacted civil commitment reforms in 2016, a new legal process for “assisted outpatient treatment” was established but the state’s longstanding “less restrictive alternative” (shared criteria) form of outpatient commitment was left in place. Having two available pathways to outpatient commitment, with distinct criteria and remedies, has caused confusion and uncertainty. Further legislative action to unify the current processes for AOT and LRA civil commitment is recommended. | 5 |

| | | | |
|------------------------------------------------------------------------------|----------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 2. Citizen access to court for AOT (5 pts) | Wash. Rev. Code §§ 71.05.203, 71.05.230(4)(a)(i) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input checked="" type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 3 |
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Wash. Rev. Code §§ 71.05.240(4)(d), 71.05.020(26) | Evaluate applicable provision only: <input type="checkbox"/> If inpatient/outpatient criteria are the same: <input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u> <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) or <input checked="" type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <input checked="" type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input checked="" type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input checked="" type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 10 |
| 4. Authorizes AOT directly from community (5 pts) | Wash. Rev. Code § 71.05.240(4)(d) | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Wash. Rev. Code § 71.05.300 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) | 5 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | Wash. Rev. Code § 71.05.585(4) | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Wash. Rev. Code § 71.05.590 | | 5 |
| 8. Duration of initial order | Wash. Rev. Code §§ 71.05.240(4)(d), 320(2) | <input type="checkbox"/> = 90 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 90 days (5 pts) | 5 |
| 9. Duration of continued order | Wash. Rev. Code §§ 71.05.240(4)(d), 320(2), 320(6) | <input type="checkbox"/> = 180 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 180 days (5 pts) | 5 |
| SUBTOTAL | | | 48 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | Wash. Rev. Code § 71.05.320(5), et. al. | <i>Superior court</i> | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 49 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 38 |
| PART TWO TOTAL | | | 49 |
| TOTAL | | | 87 |
| GRADE | | | B+ |

West Virginia State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

PART ONE: Inpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|------------------------------------------------------------------------------|-----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. Citizen access to court, emergency evaluation (5 pts) | W. Va. Code § 27-5-2(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | W. Va. Code § 27-5-2 | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | W. Va. Code § 27-5-2a(b) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) 72 hours, examination required within 24 hours | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | W. Va. Code § 27-5-4(b) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | W. Va. Code § 27-1-12(a) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | W. Va. Code § 27-1-12(a)(5) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 10 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | W. Va. Code § 27-1-12(a)(5) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 10 |
| SUBTOTAL | | | 50 |

PART ONE: Extra Credit

| | | | |
|---------------------------------------------------------------------------------------|-------------------------|----------------------|----|
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | W. Va. Code § 27-5-2(c) | Circuit court | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 51 |

PART TWO: Outpatient Commitment Statute (up to 50 points)

| Criterion | Citation | Specifications | Points |
|--------------------------------------------|-------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. AOT explicitly authorized (5 pts) | W. Va. Code § 27-5-2(h) | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | W. Va. Code § 27-5-2(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | W. Va. Code § 27-1-12(a)(5) | <p>Evaluate applicable provision only:</p> <p><input checked="" type="checkbox"/> If inpatient/outpatient criteria are the same:</p> <p><input checked="" type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts); <u>or</u></p> <p><input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts)</p> <p>or</p> <p><input type="checkbox"/> If outpatient criteria are distinct from inpatient criteria:</p> <p><input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts)</p> <p><input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt)</p> <p><input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts)</p> <p><input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts)</p> | 10 |
| 4. Authorizes AOT directly from community (5 pts) | W. Va. Code § 27-5-2(h) | After a period of short-term detention | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | W. Va. Code § 27-5-2(h) | <input type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Periodic reporting to court required (1 pt) <input type="checkbox"/> Renewal process expressly specified (1 pt) | 2 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | | | 0 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | W. Va. Code § 27-5-2(h) | | 5 |
| 8. Duration of initial order | W. Va. Code § 27-5-2(h) | <input checked="" type="checkbox"/> = 90 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 90 days (5 pts) Six months if no other commitments within two years, two years if prior commitments | 5 |
| 9. Duration of continued order | W. Va. Code § 27-5-4(l)(5) | <input type="checkbox"/> = 180 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 180 days (5 pts) Two years | 5 |
| SUBTOTAL | | | 42 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | W. Va. Code § 27-5-2(a) | Circuit court | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 43 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 51 |
| PART TWO TOTAL | | | 43 |
| TOTAL | | | 94 |
| GRADE | | | A |

Wisconsin State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

| PART ONE: Inpatient Commitment Statute (up to 50 points) | | | |
|---------------------------------------------------------------------------------------|------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. Citizen access to court, emergency evaluation (5 pts) | Wis. Stat. Ann. § 51.20(1)(b) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) Three adults | 5 |
| 2. Quality of emergency petition process (5 pts) | Wis. Stat. Ann. § 51.20(1)(a) | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | Wis. Stat. Ann. § 51.20(2)(b) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) 72 hours | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | Wis. Stat. Ann. § 51.20(1)(b) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Wis. Stat. Ann. §§ 51.20(1)(a)(2)(a)–(c) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Wis. Stat. Ann. § 51.20(1)(a)(2)(d) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input checked="" type="checkbox"/> Endangerment must be imminent (-3 pts) <input type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 7 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | Wis. Stat. Ann. § 51.20(1)(a)(2)(e) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 10 |
| SUBTOTAL | | | 47 |
| PART ONE: Extra Credit | | | |
| 1. Specifies in which court a petition for inpatient commitment shall be filed (1 pt) | | | |
| Extra Credit | | | 0 |
| PART ONE TOTAL | | | 47 |

| PART TWO: Outpatient Commitment Statute (up to 50 points) | | | |
|-----------------------------------------------------------|-----------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. AOT explicitly authorized (5 pts) | Wis. Stat. Ann. § 51.20(13)(a)(3) | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | Wis. Stat. Ann. § 51.20(1)(b) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) Three adults | 5 |

| | | | |
|------------------------------------------------------------------------------|---------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Wis. Stat. Ann. § 51.20(1)(a)(2)(e) | <p>Evaluate applicable provision only:</p> <input checked="" type="checkbox"/> If inpatient/outpatient criteria are the same: <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u> <input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts) <p>or</p> <input type="checkbox"/> If outpatient criteria are distinct from inpatient criteria: <ul style="list-style-type: none"> <input type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts) <ul style="list-style-type: none"> <input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt) <input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts) <input type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts) | 10 |
| 4. Authorizes AOT directly from community (5 pts) | Wis. Stat. Ann. § 51.20(13)(a)(3) | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Wis. Stat. Ann. § 51.20(10) | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input checked="" type="checkbox"/> Periodic reporting to court required (1 pt) <input checked="" type="checkbox"/> Renewal process expressly specified (1 pt) <i>"Within a reasonable time"</i> | 4 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | Wis. Stat. Ann. § 51.20(10)(cm) | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Wis. Stat. Ann. § 51.20(13)(g)(2d)(b) | | 5 |
| 8. Duration of initial order | Wis. Stat. Ann. § 51.20(13)(g)(1) | <input type="checkbox"/> = 90 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 90 days (5 pts) Six months | 5 |
| 9. Duration of continued order | Wis. Stat. Ann. § 51.20(13)(g)(1) | <input type="checkbox"/> = 180 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 180 days (5 pts) One year | 5 |
| SUBTOTAL | | | 49 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | | | |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 0 |
| PART TWO TOTAL | | | 49 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 47 |
| PART TWO TOTAL | | | 49 |
| TOTAL | | | 96 |
| GRADE | | | A |

Wyoming State Report Card

Last Updated: September 22, 2020

Method and scoring: State involuntary civil commitment laws are evaluated using a 100-point grading scale. The scoring criteria are in accordance with the Treatment Advocacy Center's values and policy preferences. Up to 50 points are awarded to a state based on the quality of its inpatient commitment law, and up to 50 points are awarded based on the state's assisted outpatient treatment (AOT) law. Final letter grades are computed using the following scale:

| | | | | | | | | | |
|-------------|----|-------|----|-------|----|-------|----|-------------|---|
| 97 or above | A+ | 87–89 | B+ | 77–79 | C+ | 67–69 | D+ | 59 or below | F |
| 93–96 | A | 83–86 | B | 73–76 | C | 63–66 | D | | |
| 90–92 | A- | 80–82 | B- | 70–72 | C- | 60–62 | D- | | |

| PART ONE: Inpatient Commitment Statute (up to 50 points) | | | |
|------------------------------------------------------------------------------|---------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. Citizen access to court, emergency evaluation (5 pts) | Wyo. Stat. Ann. § 25-10-110(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 2. Quality of emergency petition process (5 pts) | Wyo. Stat. Ann. § 25-10-110(a)(ii) (e) | <input checked="" type="checkbox"/> Process specified and reasonable (2 pts) <input checked="" type="checkbox"/> Timelines specified and reasonable (2 pts) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Requires certification by more than one professional (-2 pts) <input type="checkbox"/> Emergency evaluation criteria inconsistent with inpatient commitment criteria (-5 pts) | 5 |
| 3. Emergency hold duration (5 pts) | Wyo. Stat. Ann. § 25-10-109(c) | <input checked="" type="checkbox"/> At least 48-hour hold allowed (3 pts) <input checked="" type="checkbox"/> At least 72-hour hold allowed (2 pts) 24 hours for examination, 72 hours after second certification | 5 |
| 4. Citizen access to court, inpatient petition (5 pts) | Wyo. Stat. Ann. § 25-10-110(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) | 5 |
| 5. Quality of criteria for harm or violence to self or others (up to 10 pts) | Wyo. Stat. Ann. §§ 25-10-101(a)(ii) (A)–(B) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input type="checkbox"/> Harm must be imminent (-3 pts) | 10 |
| 6. Quality of criteria for grave disability/basic needs (up to 10 pts) | Wyo. Stat. Ann. § 25-10-101(a)(ii) (C) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) <input checked="" type="checkbox"/> Endangerment must be imminent (-3 pts) <input checked="" type="checkbox"/> Criteria require family to turn person out of home to receive treatment (-3 pts) <input type="checkbox"/> Unreasonably severe harm required (-3 pts) | 4 |
| 7. Quality of criteria for psychiatric deterioration (up to 10 pts) | Wyo. Stat. Ann. § 25-10-101(a)(ii) (C) | <input checked="" type="checkbox"/> Contains explicit criteria (10 pts) <input type="checkbox"/> Language is vague/ambiguous (-3 pts) | 10 |
| SUBTOTAL | | | 44 |
| PART ONE: Extra Credit | | | |
| 1. Specifies court to file petition for inpatient commitment (1 pt) | Wyo. Stat. Ann. § 25-10-110(a) | <i>“The court in the county in which the person is initially detained”</i> | 1 |
| Extra Credit | | | 1 |
| PART ONE TOTAL | | | 45 |

| PART TWO: Outpatient Commitment Statute (up to 50 points) | | | |
|-----------------------------------------------------------|----------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| Criterion | Citation | Specifications | Points |
| 1. AOT explicitly authorized (5 pts) | Wyo. Stat. Ann. §§ 25-10-110(j), 25-10-110.1 | <input type="checkbox"/> Requires local government to adopt (-3 pts) | 5 |
| 2. Citizen access to court for AOT (5 pts) | Wyo. Stat. Ann. § 25-10-110(a) | <input checked="" type="checkbox"/> Authorizes family/enumerated adults (3 pts) <input checked="" type="checkbox"/> Authorizes any responsible adult (2 pts) <input type="checkbox"/> Authorizes citizen petition to mental health system only (-2 pts) | 5 |

| | | | |
|------------------------------------------------------------------------------|----------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 3. Criteria sufficiently broad to provide actual access (up to 10 pts) | Wyo. Stat. Ann. § 25-10-110.1 | <p>Evaluate applicable provision only:</p> <p><input type="checkbox"/> If inpatient/outpatient criteria are the same:</p> <p><input type="checkbox"/> Inpatient criteria include psychiatric deterioration standard (10 pts) <u>or</u></p> <p><input type="checkbox"/> No psychiatric deterioration standard, adequate grave disability standard (5 pts)</p> <p>or</p> <p><input checked="" type="checkbox"/> If outpatient criteria are distinct from inpatient criteria:</p> <p><input checked="" type="checkbox"/> Allows consideration of length of treatment history ≥ 36 months (2 pts)</p> <p><input type="checkbox"/> Does not exclude periods of incarceration or hospitalization (-1 pt)</p> <p><input type="checkbox"/> Does not limit application to those currently dangerous or unstable (4 pts)</p> <p><input checked="" type="checkbox"/> Does not limit application to those refusing service or currently lacking insight (4 pts)</p> <p>Comment: Requires court to find that individual meets threshold of current dangerousness before considering additional criteria for outpatient commitment.</p> | 6 |
| 4. Authorizes AOT directly from community (5 pts) | Wyo. Stat. Ann. § 25-10-110.1 | | 5 |
| 5. Procedures sufficiently detailed to guide practitioners (up to 5 pts) | Wyo. Stat. Ann. § 25-10-110.1 | <input checked="" type="checkbox"/> Process specified and reasonable (1 pt) <input checked="" type="checkbox"/> Timelines specified and reasonable (1 pt) <input checked="" type="checkbox"/> Responsible entities identified (1 pt) <input type="checkbox"/> Periodic reporting to court required (1 pt) <input type="checkbox"/> Renewal process expressly specified (1 pt) | 3 |
| 6. Procedures require the treatment plan to be shared with the court (5 pts) | Wyo. Stat. Ann. § 25-10-110.1(c) | | 5 |
| 7. Specifies procedures and consequences for nonadherence (5 pts) | Wyo. Stat. Ann. § 25-10-110.1(g) | Following a hearing, there may be modifications to the order or any other disposition consistent with the best interests of the individual | 5 |
| 8. Duration of initial order | Wyo. Stat. Ann. § 25-10-110.1(a) | <input type="checkbox"/> = 90 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 90 days (5 pts) Two years maximum with review every six months | 5 |
| 9. Duration of continued order | Wyo. Stat. Ann. § 25-10-110.1(a) | <input type="checkbox"/> = 180 days (2 pts) <u>or</u> <input checked="" type="checkbox"/> > 180 days (5 pts) Two years maximum with review every six months | 5 |
| SUBTOTAL | | | 44 |
| PART TWO: Extra Credit | | | |
| 1. Specifies court for AOT (1 pt) | Wyo. Stat. Ann. § 25-10-110(a) | "The court in the county in which the person is initially detained" | 1 |
| 2. Court monitoring of voluntary settlement agreements (5 pts) | | | |
| Extra Credit | | | 1 |
| PART TWO TOTAL | | | 45 |
| FINAL SCORE | | | |
| PART ONE TOTAL | | | 45 |
| PART TWO TOTAL | | | 45 |
| TOTAL | | | 90 |
| GRADE | | | A- |

Appendix B: Recommended State Statutory Changes

Alabama:

- Amend Ala. Code § 22-52-91(a) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for emergency evaluation
- Amend Ala. Code § 22-52-91 to remove requirement for certification by two professionals for emergency evaluation
- Amend Ala. Code § 22-52-91 to eliminate inconsistency between inpatient and emergency criteria
- Amend Ala. Code § 22-52- 10.4(a) to provide an adequate definition of danger to self or others and to remove requirement for imminent harm
- Add grave disability criteria
- Add psychiatric deterioration criteria
- Amend Ala. Code § 22-52-10.2 to remove requirement for *present* lack of capacity for outpatient criteria

Alaska:

- Amend Alaska Stat. § 47.30.710(a) to remove requirement for certification by two professionals for emergency evaluation
- Amend Alaska Stat. § 47.30.730(a) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for inpatient commitment
- Amend Alaska Stat. § 47.30.915(9)(B) to provide practice guidance for psychiatric deterioration standard
- Amend Alaska Stat. § 47.30.730(a) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for outpatient commitment
- Amend Alaska Stat. §§ 47.30.915(12), 47.30.755(b) to clarify that eligibility for outpatient commitment does not require current refusal, and may include foreseeable future refusal
- Adopt procedural detail for outpatient commitment including provisions establishing timelines, responsible entities, periodic reporting to court, renewal of orders, procedures for nonadherence and a requirement to submit a written treatment plan to the court
- Amend Alaska Stat. § 47.30.730(5) to extend duration of outpatient order beyond 90 days
- Amend Alaska Stat. §§ 47.30.755(b) and 47.30.770 to extend duration of continued outpatient order beyond 180 days

Arizona:

- Amend Ariz. Rev. Stat. §§ 36-524(C), 36-525(B) and 36-501 to add all bases for inpatient commitment to emergency criteria to eliminate inconsistency

- Amend Ariz. Rev. Stat. § 36-520(D) to extend duration of emergency evaluation hold to 72 hours or more
- Amend Ariz. Rev. Stat. § 36-531(B) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for inpatient commitment
- Amend Ariz. Rev. Stat. § 36-531(B) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for outpatient commitment

Arkansas:

- Amend Ark. Code Ann. § 20-47-207(c)(2)(D)(ii) to remove requirement for history of noncompliance
- Amend Ark. Code Ann. § 20-47-214 to extend duration of original order beyond 90 days
- Amend Ark. Code Ann. § 20-47-215 to extend duration of continued order beyond 180 days

California:

- Amend Cal. Welf. & Inst. Code § 5150 to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for emergency evaluation
- Amend Cal. Welf. & Inst. Code § 5150 to remove requirement for certification by two professionals for emergency evaluation
- Amend Cal. Welf. & Inst. Code § 5251 to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for inpatient commitment
- Amend Cal. Welf. & Inst. Code § 5250 to provide adequate definition for danger to self or others
- Add psychiatric deterioration criteria or amend grave disability criteria to include one
- Amend Cal. Welf. & Inst. Code § 5346(b) to authorize citizen right of petition directly to court (currently allows a petition only to the department of health) for at least enumerated citizens, preferably any responsible adult, for outpatient commitment
- Amend Cal. Welf. & Inst. Code § 5346(a)(4) to remove language excluding only periods of hospitalization or incarceration that “immediately precede” the filing of the petition; remove language requiring that condition be “currently deteriorating” at the time of petition
- Amend Cal. Welf. & Inst. Code § 5346(g) to extend duration of continued orders to or beyond 180 days

Colorado:

- Amend Colo. Rev. Stat. §§ 27-65-107 and 27-65-108 to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for inpatient commitment
- Amend Colo. Rev. Stat. § 27-65-107 to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for outpatient commitment

- Adopt procedural detail for outpatient commitment including provisions establishing timelines, responsible entities, periodic reporting to court, renewal of orders, procedures for nonadherence and a requirement to submit a written treatment plan to the court
- Consider statutory amendment to address procedural hurdles to use of the shared inpatient criteria for AOT
- Amend Colo. Rev. Stat. § 27-65-107 to extend duration of outpatient order beyond 90 days
- Amend Colo. Rev. Stat. §§ 27-65-108 and 27-65-109 to extend duration of continued outpatient order beyond 180 days

Connecticut:

- Add psychiatric deterioration criteria or amend grave disability criteria to include it
- Adopt statutory authority for outpatient civil commitment

Delaware:

- Amend 16 Del. C. § 5004 to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for emergency evaluation
- Amend 16 Del. C. § 5004 to include reasonable timelines for filing a petition for emergency evaluation
- Amend 16 Del. C. § 5005(e) to extend duration of emergency evaluation hold to 72 hours or more
- Amend 16 Del. C. §§ 5007 and 5008 to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for inpatient commitment
- Amend 16 Del. C. § 5001(3) and 5001(4) to remove requirement if imminence to meet criteria for danger to self or others
- Add psychiatric deterioration criteria
- Amend 16 Del. C. § 5007 to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for outpatient commitment
- Amend 16 Del. C. § 5013 to remove requirement for either refusal of voluntary services or current incapacity to meet criteria for outpatient commitment
- Adopt procedural detail for outpatient commitment, including provisions establishing timelines, responsible entities, periodic reporting to court, renewal of orders and a requirement to submit a written treatment plan to the court
- Amend 16 Del. C. § 5013(c) to extend duration of outpatient order beyond 90 days
- Amend 16 Del. C. § 5013(c) to extend duration of continued orders to or beyond 180 days

District of Columbia:

- Amend D.C. Code Ann. § 21-521 to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for emergency evaluation
- Amend D.C. Code Ann. § 21-523 to extend duration of emergency hold to 72 hours or more
- Amend D.C. Code Ann. § 21-541(a) to authorize citizen right of petition for any responsible adult for inpatient commitment
- Amend D.C. Code Ann. § 21-521 to provide adequate definition for danger to self or others
- Add grave disability criteria
- Add psychiatric deterioration criteria
- Amend D.C. Code Ann. § 21-541(a) to authorize citizen right of petition for any responsible adult for outpatient commitment
- Amend D.C. Code Ann. §§ 21-545 to add a requirement that a written treatment plan be submitted to the court

Florida:

- Amend Fla. Stat. § 394.463(2)(g)(4) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for inpatient commitment
- Amend Fla. Stat. § 394.467(1)(a)(2)(a) to remove requirement that family/friends refuse assistance for eligibility
- Add psychiatric deterioration criteria or amend grave disability criteria to include it
- Amend Fla. Stat. § 394.4655 to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for outpatient commitment
- Amend Fla. Stat. § 394.4655 to require periodic reporting to the court for outpatient orders
- Amend Fla. Stat. § 394.4655(7)(b)(1) to extend duration of outpatient order beyond 90 days
- Amend Fla. Stat. § 394.4655(8) to extend duration of continued orders to or beyond 180 days

Georgia:

- Amend Ga. Code Ann. § 37-3-43 to extend duration of emergency hold to 72 hours or more
- Amend Ga. Code Ann. § 37-3-1(9.1)(A)(i) to remove the imminence requirement to meet criteria for danger to self or others
- Amend Ga. Code Ann. § 37-3-1(9.1)(A)(ii) to remove the imminence requirement to meet criteria for grave disability
- Add psychiatric deterioration criteria or amend grave disability criteria to include it

Hawaii:

- Amend Haw. Rev. Stat. § 334-59(a) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for emergency evaluation
- Amend Haw. Rev. Stat. § 334-59 to include reasonable timelines for filing a petition for emergency evaluation
- Amend Haw. Rev. Stat. § 334-59(e) to extend duration of emergency hold to 72 hours or more
- Adopt a requirement of periodic reporting to the court for outpatient orders

Idaho:

- Amend Idaho Code § 66-326(1) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for emergency evaluation
- Amend Idaho Code § 66-329(13)(b) to remove the right to receive “treatment by spiritual means alone” in lieu of necessary medical treatment
- Amend Idaho Code § 66-329(13)(c) to clarify that private care by friends and family may not replace inpatient commitment unless such care is clinically equivalent to the physical and psychiatric care it is intended to replace
- Amend Idaho Code § 66-326 to remove requirement for certification by two professionals for emergency evaluation
- Amend Idaho Code § 66-337(a) to include a provision for renewal of order and a requirement that a written treatment plan be submitted to the court

Illinois:

- Amend 405 ILCS 5/3-601 to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for emergency evaluation
- Amend 405 ILCS 5/3-701 to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for inpatient commitment
- Amend 405 ILCS 5/3-751 to authorize citizen right of petition directly to court (currently allows only a petition to the department of health) for at least enumerated citizens, preferably any responsible adult, for outpatient commitment
- Adopt specific procedures to guide practice for nonadherence
- Amend 405 ILCS 5/3-813(a) to extend duration of outpatient order beyond 90 days
- Amend 405 ILCS 5/3-813(a) to extend duration of all continued orders to or beyond 180 days

Indiana:

- Amend Ind. Code Ann. § 12-26-5-1 to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for emergency evaluation

- Amend Ind. Code Ann. § 12-26-6-8(a)(2) to extend duration of outpatient order beyond 90 days
- Amend Ind. Code Ann. § 12-26-6-10 to extend continued orders to or beyond 180 days

Iowa:

- Amend Iowa Code §§ 229.11(1) and 229.22 to remove inconsistency (“likely to injure” language) between emergency and inpatient standards
- Amend Iowa Code § 229.22(3) to extend duration of emergency hold to 72 hours or more
- Add psychiatric deterioration criteria or amend grave disability criteria to include it
- Amend Iowa Code § 229.1(20)(d) to clarify that the provision should apply only to outpatient commitment
- Amend Iowa Code § 229.14 to include a requirement that a written treatment plan be submitted to the court

Kansas:

- Amend Kan. Stat. Ann. § 59-2958(e) to extend duration of emergency hold to 72 hours or more
- Add psychiatric deterioration criteria or amend grave disability criteria to include it
- Amend Kan. Stat. Ann. § 59-2967 to include a requirement that a written treatment plan be submitted to the court
- Amend Kan. Stat. Ann. § 59-2966(a) to extend duration of outpatient order beyond 90 days
- Amend Kan. Stat. Ann. § 59-2969(f) to extend duration of continued orders to or beyond 180 days

Kentucky:

- Amend Ky. Rev. Stat. Ann. § 202A.041(1) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for emergency evaluation
- Add psychiatric deterioration criteria or amend grave disability criteria to include it
- Amend Ky. Rev. Stat. § 202A.0815 in order to (1) extend lookback period to at least 36 months and (2) revise language requiring *present* lack of insight to make outpatient civil commitment available to appropriate candidates stable at discharge

Louisiana:

- Add psychiatric deterioration criteria or amend grave disability criteria to include it

Maine:

- Amend Me. Rev. Stat. tit. 34-B, § 3863(3)(B), to extend duration of emergency hold to 72 hours or more
- Amend Me. Rev. Stat. tit. 34-B, § 3863(5A), to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for inpatient commitment
- Add psychiatric deterioration criteria or amend grave disability criteria to include it
- Amend Me. Rev. Stat. tit. 34-B, § 3873(A)(1), to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for outpatient commitment

Maryland:

- Amend Md. Code Ann., Health-General § 10-624(b)(4), to extend duration of emergency hold to 72 hours or more
- Amend Md. Code Ann., Health-General § 10-632, to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for inpatient commitment
- Amend Md. Code Ann., Health-General § 10-622(a)(2), to provide adequate definition of danger to self or others
- Add grave disability criteria
- Add psychiatric deterioration criteria
- Adopt statutory authority for outpatient civil commitment

Massachusetts:

- Amend Mass. Gen. Laws Ann. ch. 123, § 7(a), to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for emergency evaluation
- Amend Mass. Gen. Laws Ann. ch. 123, § 1, to remove or revise unreasonably severe harm required to meet grave disability criteria (currently requires “very substantial risk of physical impairment or injury”)
- Add psychiatric deterioration criteria or amend grave disability criteria to include it
- Adopt statutory authority for outpatient civil commitment

Michigan:

- Amend Mich. Comp. Laws § 330.1429 to extend duration of emergency hold to a minimum of 72 hours

Minnesota:

- Amend Minn. Stat. § 253B.051(1)(a) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for emergency evaluation

Mississippi:

- Amend Miss. Code Ann. § 41-21-73(4) in order to (1) require periodic reporting to the court and procedures for renewal of order, and (2) include a requirement that a written treatment plan be submitted to the court
- Amend Miss. Code Ann. § 41-21-73(4) to extend duration of outpatient order beyond 90 days
- Amend Miss. Code Ann. § 41-21-82 to extend duration of continued outpatient order to or beyond 180 days

Missouri:

- Amend Mo. Ann. Stat. § 632.330(1) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for inpatient commitment
- Amend Mo. Ann. Stat. § 632.330(1) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for outpatient commitment
- Amend Mo. Ann. Stat. § 632.340 to require periodic reporting to the court
- Amend Mo. Ann. Stat. § 632.335(1) to extend duration of continued outpatient order beyond 180 days

Montana:

- Amend Mont. Code Ann. § 53-21-129(1) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for emergency evaluation
- Amend Mont. Code Ann. § 53-21-129(2) to extend duration of emergency hold to a minimum of 72 hours
- Amend Mont. Code Ann. § 53-21-121(1) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for inpatient commitment
- Add psychiatric deterioration criteria or amend grave disability criteria to include it
- Amend Mont. Code Ann. § 53-21-121(1) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for outpatient commitment
- Amend Mont. Code Ann. § 53-21-127(8) in order to (1) provide additional procedural detail, including timelines, (2) require periodic reporting to the court, and (3) include a requirement that a written treatment plan be submitted to the court
- Amend Mont. Code Ann. § 53-21-128(1)(d) to extend duration of continued outpatient order beyond 180 days

Nebraska:

- Amend Neb. Rev. Stat. § 71-921(1) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for emergency evaluation

- Amend Neb. Rev. Stat. § 71-921(1) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for inpatient commitment
- Add psychiatric deterioration criteria
- Amend Neb. Rev. Stat. § 71-921(1) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for outpatient commitment
- Amend Neb. Rev. Stat. § 71-931(3) to require a that written treatment plan be submitted to the court (current requirement is that plan be submitted to county attorney)
- Amend Neb. Rev. Stat. § 71-932 to extend duration of outpatient order beyond 90 days
- Amend Neb. Rev. Stat. § 71-932 to extend duration of all continued orders for outpatient treatment to or beyond 180 days

Nevada:

- Amend Nev. Rev. Stat. § 433A.160(2) to authorize citizen right of petition for any responsible adult for emergency evaluation
- Amend Nev. Rev. Stat. § 433A.200(1) to authorize citizen right of petition for any responsible adult for inpatient commitment
- Amend Nev. Rev. Stat. § 433A.115 (2)(a) to remove the requirement of unreasonably severe harm to meet criteria for grave disability
- Amend Nev. Rev. Stat. § 433A.200(1) to authorize citizen right of petition for any responsible adult for outpatient commitment
- Amend Nev. Rev. Stat. § 433A.315 to incorporate a requirement for periodic reporting to the court
- Amend Nev. Rev. Stat. § 433A.310(5) to extend duration of continued outpatient order beyond 180 days

New Hampshire:

- Amend N.H. Rev. Stat. Ann. § 135-C:28 to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for emergency evaluation
- Amend N.H. Rev. Stat. Ann. § 135-C:28 to extend duration of emergency hold to a minimum of 72 hours
- Amend N.H. Rev. Stat. Ann. § 135-C:27(1)(c) to provide sufficient detail to guide practice for grave disability standard
- Amend N.H. Rev. Stat. Ann. § 135-C:34 to address ambiguity in psychiatric deterioration standard (definition in emergency evaluation statute is not explicitly applied to inpatient petitions, though it is likely intended to apply to both). Clarify N.H. Rev. Stat. Ann. § 135-C:27(1)(d)(6) to increase its utility for future deterioration and continued treatment

- Amend N.H. Rev. Stat. Ann. § 135-C:45 in order to (1) provide additional procedural detail, including timelines; (2) require periodic reporting to the court; (3) codify process for renewal of order; (4) include a requirement that a written treatment plan be submitted to the court; and (5) provide procedural detail for consequences of nonadherence

New Jersey:

- Amend N.J. Stat. § 30:4-27.6 to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for emergency evaluation
- Amend N.J. Stat. §§ 30:4-27.6 and 30:4-27.10 to remove requirement for certification by two professionals for emergency evaluation
- Amend N.J. Stat. § 30:4-27.6(b) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for inpatient commitment
- Amend N.J. Stat. § 30:4-27.2(h) to remove requirement that family/friends refuse assistance and requirement of probability that substantial bodily injury, serious physical harm or death will result to meet criteria for grave disability
- Add psychiatric deterioration criteria or amend grave disability criteria to include it

New Mexico:

- Amend N.M. Stat. Ann. § 43-1-10 to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for emergency evaluation
- Amend N.M. Stat. Ann. § 43-1-11(G) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for inpatient commitment
- Add psychiatric deterioration criteria or amend grave disability criteria to include it
- Amend N.M. Stat. Ann. § 43-1B-4 to eliminate the requirement for local adoption
- Amend N.M. Stat. Ann. § 43-1B-4 to authorize citizen right of petition for any responsible adult for outpatient commitment
- Amend N.M. Stat. Ann. § 43-1B-6 to add a requirement for periodic reporting to the court

New York:

- Amend N.Y. Mental Hyg. Law § 9.27(a) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for inpatient commitment
- Add grave disability criteria
- Add psychiatric deterioration criteria
- Amend N.Y. Mental Hyg. Law § 9.60 to add a requirement for periodic reporting to the court

North Carolina:

- Amend N.C. Gen. Stat. § 122C-263 to extend duration of emergency hold to a minimum of 72 hours
- Amend N.C. Gen. Stat. § 122C-266(a)(1) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for inpatient commitment
- Adopt authorization for citizen right of petition for at least enumerated citizens, preferably any responsible adult, for outpatient commitment
- Amend N.C. Gen. Stat. §§ 122C-272 to add a requirement for periodic reporting to the court
- Amend N.C. Gen. Stat. § 122C-271(a)(1) to extend duration of outpatient order beyond 90 days
- Amend N.C. Gen. Stat. § 122C-275 to extend duration of continued outpatient order beyond 180 days

North Dakota:

- Amend N.D. Cent. Code § 25-03.1-21 to include a requirement for periodic reporting to the court and a requirement that a written treatment plan be submitted to the court
- Amend N.D. Cent. Code § 25-03.1-22 to extend duration of outpatient order beyond 90 days

Ohio:

- Amend Ohio Rev. Code Ann. § 5122.01(B)(3) to remove the imminence requirement to meet criteria for grave disability
- Add psychiatric deterioration criteria or amend grave disability criteria to include it
- Amend Ohio Rev. Code Ann. § 5122.15(F) to extend duration of initial outpatient order beyond 90 days

Oklahoma:

- Amend Okla. Stat. tit. 43A § 5-207(G) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for emergency evaluation
- Amend Okla. Stat. tit. 43A § 5-410(A)(2) to authorize any responsible adult to petition for inpatient commitment
- Amend Okla. Stat. tit. 43A §§ 1-103(13)(a)(1)–(3) to remove the imminence requirement to meet criteria for danger to self or others
- Amend Okla. Stat. tit. 43A § 1-103(13)(a)(5) to remove the imminence requirement to meet criteria for grave disability and language requiring threat of serious physical injury
- Amend Okla. Stat. tit. 43A § 1-103(13)(a)(4) to remove language requiring that impairment be severe and that injury will result without immediate intervention

- Amend Okla. Stat. tit. 43A § 5-410 to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for outpatient commitment
- Amend Okla. Stat. tit. 43A § 1-103(20)(d) to enable courts to consider at least 36 months of treatment history

Oregon:

- Amend Or. Rev. Stat. §§ 426.228(1) and 426.233(1)(a) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for emergency evaluation
- Amend Or. Rev. Stat. §§ 426.228(1) and 426.233(1)(a) to remove inconsistency between emergency and inpatient criteria by expressly adding other bases for inpatient commitment to emergency standard
- Amend Or. Rev. Stat. § 426.005(1)(f)(A) to provide adequate definition of danger to self or others
- Amend Or. Rev. Stat. § 426.005(1)(f)(B) to remove imminence requirement to meet criteria for grave disability

Pennsylvania:

- Amend 50 P.S. §§ 7301(b)(1) and 7301(b)(2) to remove requirement that harm be ‘clear and present’ (imminent) and requirement of unreasonably severe harm
- Amend 50 P.S. § 7301(b)(2)(i) to clarify ambiguity created by requiring a finding on the probability of future dangerousness based exclusively on whether or not certain types of harm have occurred within the past 30 days, without reference to treatment history; remove requirement for unreasonably severe harm to meet criteria for grave disability
- Add psychiatric deterioration criteria or amend grave disability criteria to include it
- Amend 50 P.S. § 7304(c.1) to require periodic reporting to the court
- Amend 50 P.S. § 7305(c) to extend duration of continued outpatient order beyond 180 days

Rhode Island:

- Amend R.I. Gen. Laws § 40.1-5-7(a)(1) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for emergency evaluation
- Amend R.I. Gen. Laws § 40.1-5-8(a) to authorize citizen right of petition for any responsible adult, for inpatient commitment and outpatient commitment
- Amend R.I. Gen. Laws § 40.1-5-2(7)(iii) to remove imminence requirement to meet criteria for grave disability
- Add psychiatric deterioration criteria or amend grave disability criteria to include it
- Amend R.I. Gen. Laws § 40.1-5-8 in order to (1) provide additional procedural detail, including timelines and responsible parties; (2) require periodic reporting to the court; (3) codify process

for renewal of order; (4) include a requirement that a written treatment plan be submitted to the court; and (5) provide procedural detail for consequences of nonadherence

- Amend R.I. Gen. Laws § 40.1-5-8(j) to extend duration of continued order beyond 180 days

South Carolina:

- Amend S.C. Code Ann. § 44-17-410 to make emergency evaluation standard consistent with inpatient standard by incorporating other inpatient criteria as bases for emergency evaluation
- Amend S.C. Code Ann. § 44-17-410(3) to extend duration of emergency hold to at least 72 hours
- Amend S.C. Code Ann. §§ 44-17-580 in order to (1) provide procedural detail including responsible parties and (2) add a requirement that a written treatment plan be submitted to the court

South Dakota:

- Amend S.D. Codified Laws § 27A-10-1 to provide more direct access to court for citizen petitioners for emergency evaluation
- Add psychiatric deterioration criteria or amend grave disability criteria to include it
- Amend S.D. Codified Laws § 27A-10-14 in order to (1) provide procedural detail, including timelines and responsible parties; (2) require periodic reporting to the court; and (3) include a requirement that a written treatment plan be submitted to the court
- Amend S.D. Codified Laws § 27A-10-9.1 to extend duration of outpatient order beyond 90 days
- Amend S.D. Codified Laws § 27A-10-14 to extend duration of renewed order beyond 180 days

Tennessee:

- Amend Tenn. Code Ann. §§ 33-6-402 and 33-6-404 to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for emergency evaluation
- Amend Tenn. Code Ann. § 33-6-504 to authorize citizen right of petition for any responsible adult for inpatient commitment
- Amend Tenn. Code Ann. § 33-6-501 to remove imminence requirement to meet criteria for danger to self or others
- Amend Tenn. Code Ann. § 33-6-501(1)(d) to clarify grave disability standard and remove language requiring *severe* impairment to meet criteria
- Add psychiatric deterioration criteria or amend grave disability criteria to include it
- Amend Tenn. Code Ann. § 33-6-602 to 1) enable referral directly from the community and 2) authorize citizen right of petition directly to court for at least enumerated citizens, preferably any responsible adult, for outpatient commitment
- Amend Tenn. Code Ann. § 33-6-604 in order to (1) provide for periodic reporting to court, (2) provide express procedures for renewal of order, and (3) include a requirement that a written treatment plan be submitted to the court

- Amend Tenn. Code Ann. § 33-6-623 to extend duration of continued order for outpatient treatment beyond 180 days

Texas:

- Amend Tex. Health & Safety Code Ann. § 573.012 to make emergency evaluation criteria consistent with inpatient criteria by requiring likelihood of serious harm to self or others for both
- Amend Tex. Health & Safety Code Ann. § 573.021(b) to extend duration of emergency hold period to a minimum of 72 hours
- Amend Tex. Health & Safety Code Ann. § 574.034(a) to provide adequate definition of danger to self or others
- Add psychiatric deterioration criteria or amend grave disability criteria to include it
- Amend Tex. Health & Safety Code Ann. § 574.034(g) to extend duration of initial outpatient order beyond 90 days

Utah:

- Amend Utah Code § 62A-15-629(3) to extend duration of emergency hold period to a minimum of 72 hours
- Add psychiatric deterioration criteria or amend grave disability criteria to include it
- Amend Utah Code § 62A-15-630.5 in order to address procedural barriers to AOT, include a requirement that a written treatment plan be submitted to the court, and specify procedures and consequences for nonadherence
- Amend Utah Code § 62A-15-630.5(17) to extend duration of continued order beyond 180 days
- Vermont:
- Amend Vt. Stat. Ann. tit. 18 § 7621 in order to (1) provide specific timelines for filing, (2) require periodic reporting to the court, and (3) include a requirement that a written treatment plan be submitted to the court
- Amend Vt. Stat. Ann. tit. 18 § 7618(a) to extend duration of outpatient order beyond 90 days

Virginia:

- Add psychiatric deterioration criteria or amend grave disability criteria to include it
- Amend Va. Code Ann. §§ 37.2-817(C), (C1) and (D) to eliminate requirement of voluntary agreement for mandatory outpatient treatment orders
- Amend Va. Code Ann. § 37.2-817(C1) and (E) to extend initial commitment beyond 90 days
- Amend Va. Code Ann. § 37.2-817.2 to extend renewed mandatory outpatient treatment order beyond 180 days

Washington:

- Amend Wash. Rev. Code §§ 71.05.150(1) and 71.05.153(1) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for emergency evaluation
- Amend Wash. Rev. Code § 71.05.230(4)(a) to authorize citizen right of petition for at least enumerated citizens, preferably any responsible adult, for inpatient commitment
- Amend Wash. Rev. Code § 71.05.203 to authorize citizen right of petition directly to court (currently allows petition only to department of health) for at least enumerated citizens, preferably any responsible adult, for outpatient commitment

West Virginia:

- Amend W. Va. Code § 27-5-2(h) in order to (1) provide additional procedural detail, (2) require periodic reporting to the court, (3) codify the process for renewal of an order, and (4) include a requirement that a written treatment plan be submitted to the court
- Adopt a provision to authorize assisted outpatient treatment directly from the community without mandatory prior hospitalization and remove language requiring outpatient commitment be based solely on voluntary agreement

Wisconsin:

- Amend Wis. Stat. Ann. § 51.20(1)(a)(2)(d) to remove the imminence requirement to meet criteria for grave disability

Wyoming:

- Amend Wyo. Stat. Ann. § 25-10-101(a)(ii)(C) to remove imminence requirement to meet criteria for grave disability
- Amend Wyo. Stat. Ann. § 25-10-101(a)(ii)(C) to remove requirement that family/friends refuse assistance for an individual to meet criteria for grave disability
- Amend Wyo. Stat. Ann. § 25-10-110.1 to remove requirement of current instability before additional criteria can be considered for outpatient commitment