SB240 ENGROSSED



- 1 SB240
- 2 7LQ822E-2
- 3 By Senator Barfoot
- 4 RFD: Judiciary
- 5 First Read: 21-Mar-24



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5	A BILL
6	TO BE ENTITLED
7	AN ACT
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9	Relating to the Alabama Department of Mental Health; to
10	amend Sections 22-52-1.1, 22-52-1.2, 22-52-3, 22-52-7,
11	22-52-10.1, as last amended by Act 2023-472 of the 2023
12	Regular Session, 22-52-10.2, 22-52-10.4, 22-52-10.11, and
13	22-52-11 of the Code of Alabama 1975; to authorize a judge of
14	probate to involuntarily commit an individual who suffers from
15	a substance use disorder that occurs secondarily to a primary
16	diagnosis of one or more mental illnesses; to provide for a
17	change in jurisdiction of the sheriff who is required to serve
18	the commitment petition on the respondent; to authorize the
19	judge of probate to establish a procedure for placing
20	limitations on the respondent's liberty, if any, pending a
21	final hearing; to allow the judge of probate to determine the
22	appropriate medical evaluation process, if any, for the
23	respondent prior to final hearing; and to add Section 15-16-26
24	to the Code of Alabama 1975, to provide a process for the
25	committing judge of probate to seek relief for the respondent
26	from temporary criminal confinement, under certain
27	circumstances, to fulfill a pending commitment order; and to
28	provide that mental health providers are not required to



- 29 expand existing services unless its currently available funds
- 30 support the expansion.
- 31 BE IT ENACTED BY THE LEGISLATURE OF ALABAMA:
- 32 Section 1. Sections 22-52-1.1, 22-52-1.2, 22-52-3,
- 33 22-52-7, 22-52-10.1, as last amended by Act 2023-472, of the
- 34 2023 Regular Session, 22-52-10.2, 22-52-10.4, 22-52-10.11 and
- 35 22-52-11, Code of Alabama 1975, are amended to read as
- 36 follows:
- 37 "\$22-52-1.1
- 38 (a) When used in this article, the following terms
- 39 shall have the following meanings, respectively, unless the
- 40 context clearly indicates otherwise:
- 41 (1) COMMISSIONER. The Commissioner of the Alabama State
- 42 Department of Mental Health.
- 43 (2) CO-OCCURRING SUBSTANCE USE DISORDER. A substance
- 44 use disorder that occurs secondarily to a primary diagnosis of
- one or more mental illnesses.
- 46 $\frac{(2)}{(3)}$ DEPARTMENT. The Alabama State Department of
- 47 Mental Health.
- 48 (3)(4) DESIGNATED MENTAL HEALTH FACILITY. A mental
- 49 health facility, other than a state mental health facility,
- 50 which is designated by the State Department of Mental Health
- 51 to receive individuals for evaluation, examination, admission,
- 52 detention, or treatment pursuant to this article.
- $\frac{(4)}{(5)}$ INPATIENT TREATMENT. Treatment being provided to
- 54 an individual at a state mental health facility or a
- 55 designated mental health facility which has been specifically
- designated by the department for inpatient treatment.



- 57 (5) (6) INVOLUNTARY COMMITMENT. Court-ordered mental 58 health services in either an outpatient or inpatient setting. (6) (7) MENTAL ILLNESS. A psychiatric disorder of 59 60 thought or mood which significantly impairs judgment, behavior, capacity to recognize reality, or ability to cope 61 with the ordinary demands of life-, or a diagnosis designated 62 63 as a Serious Mental Illness (SMI), as defined in the then 64 current edition of the Diagnostic and Statistical Manual of Mental Disorders. The term specifically excludes the primary 65 diagnosis of epilepsy, a substance use disorder, an 66 67 intellectual disability, substance abuse, including alcoholism, or a developmental disability. 68 (7) (8) OUTPATIENT TREATMENT. Treatment being provided 69 70 to an individual in a nonresidential setting who is not 71 admitted for 24-hour-a-day care. (8) (9) REAL AND PRESENT THREAT OF SUBSTANTIAL HARM TO 72 SELF OR OTHERS. A significant risk that an individual who is 73 74 exhibiting behavior consistent with a mental illness, as a 75 result of the mental illness, will do either of the following: 76 a. By action or inaction, cause, allow, or inflict 77 serious bodily harm upon himself, herself, or another 78 individual. 79 b. Be unable to satisfy his or her need for 80 nourishment, medical care, shelter, or self-protection so that there is a substantial likelihood of death, serious bodily 81 harm, serious physical debilitation, serious mental 82 debilitation, or life-threatening disease. 83
- 84 $\frac{(9)}{(10)}$ RESPONDENT. An individual for whom a petition



- 85 for commitment to mental health services has been filed.
- 86 (10) (11) STATE MENTAL HEALTH FACILITY. A mental health
- facility operated by the Alabama State Department of Mental
- 88 Health.
- 89 (12) SUBSTANCE USE DISORDER. A cluster of cognitive,
- 90 behavioral, and physiological symptoms indicating that the
- 91 individual continues using a substance despite significant
- 92 substance-related problems, such as impaired control, social
- 93 impairment, risky behaviors, and pharmacological tolerance and
- 94 withdrawal.
- 95 (b) The Legislature finds for purposes of this article
- 96 substance use disorder is commonly associated with mental
- 97 illness and providers who provide these services serve a
- 98 public purpose."
- 99 "\$22-52-1.2
- 100 (a) Any person individual may file a petition seeking
- 101 the involuntary commitment of another person individual. The
- 102 petition shall be filed in the probate court of the county in
- 103 which the respondent is located. The petition shall be in
- 104 writing, executed under oath, and shall include the following
- 105 information:
- 106 (1) The name and address, if known, of the respondent.
- 107 (2) The name and address, if known, of the respondent's
- 108 spouse, legal counsel, or next-of-kin.
- 109 (3) That the petitioner has reason to believe the
- respondent is mentally ill or is mentally ill with a secondary
- 111 diagnosis of co-occurring substance use disorder.
- 112 (4) That the beliefs of the petitioner are based on



- specific behavior, acts, attempts, or threats, which shall be specified and described in detail.
- 115 (5) The names and addresses of other persons

 116 <u>individuals</u> with knowledge of the respondent's mental illness

 117 <u>or mental illness with a secondary diagnosis of co-occurring</u>

 118 substance use disorder who may be called as witnesses.

The petition may be accompanied by any other relevant information.

- (b) The home address and the telephone number of the petitioner shall be excluded from the copy of the petition seeking the involuntary commitment provided to the respondent, however, if there is no other available address to contact the petitioner, then the home address of the petitioner shall be provided."
- 127 "\$22-52-3

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When any petition has been filed seeking the 128 129 involuntary commitment of a respondent and such the petition 130 has been reviewed by the probate judge judge of probate, the 131 probate judge judge of probate shall order the sheriff of the 132 county in which the respondent is was located at the time of 133 the filing to serve a copy of the petition, together with a 134 copy of the order setting the petition for a hearing, upon the 135 respondent. Said The notice shall include the date, time and 136 place of the hearing; a clear statement of the purpose of the 137 proceeding and the possible consequences to the subject 138 thereof; the alleged factual basis for the proposed commitment; a statement of the legal standards upon which 139 140 commitment is authorized; and a list of the names and



141 addresses of the witnesses who may be called to testify in 142 support of the petition. The hearing shall be preceded by 143 adequate notice to the respondent."

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- (a) (1) When a petition has been filed seeking to have limitations placed upon the liberty of a respondent pending the outcome of a final hearing on the merits, the probate iudge judge of probate shall order the sheriff of the county in which the respondent is was located at the time of the filing to serve a copy of the petition upon the respondent and to either bring the respondent before the judge of probate probate judge instanter or be evaluated as provided in subsection (2).
- (2) When any respondent against whom a petition has been filed seeking to have limitations placed upon the respondent's liberty pending the outcome of a full and final 157 hearing on the merits is initially brought before the probate judgejudge of probate, the probate judgejudge of probate shall determine from an interview with the respondent and with other available persons what limitations, if any, shall be imposed upon the respondent's liberty and what temporary treatment, if any, shall be imposed upon the respondent pending further hearings. In making these determinations, the judge of probate may also interview any other available individuals or officers and may consult with or seek an evaluation by a licensed medical physician or qualified mental health professional. If limitations on the respondent's liberty are ordered, the probate judgejudge of probate may order the respondent



detained under the provisions of this section at a designated mental health facility or a hospital.

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- (b) No limitations shall be placed upon the respondent's liberty nor treatment imposed upon the respondent unless such limitations are determined necessary by the judge of probate to prevent the respondent from doing substantial and immediate harm to himself or to others posing a real and present threat of substantial harm to self or others or to prevent the respondent from leaving the jurisdiction of the court. No respondent shall be placed in a jail or other facility for persons individuals accused of or convicted of committing crimes.
- (c) The probate judgejudge of probate shall order the respondent to appear at the times and places set for hearing the petition and may order the respondent to appear at designated times and places to be examined by licensed medical doctors or qualified mental health professionals. If the respondent does not appear as ordered by the probate judge judge of probate, or if the judge of probate determines it is likely the respondent will not appear, the probate judge judge of probate may order the sheriff of the county in which the respondent iswas located at the time of the filing to take the respondent into custody and compel the respondent's attendance as ordered by the probate judgejudge of probate. If temporary treatment or admittance to a hospital is ordered for the respondent, -such the treatment shall be supervised by a licensed medical doctor physician or qualified mental health professional who has willingly consented to treat the



respondent, and admission to a hospital shall be ordered by a licensed medical doctor who has willingly consented to admit and treat the respondent."

200 "\$22-52-10.1

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- (a) If at the final hearing on a petition seeking to involuntarily commit a respondent, the judge of probate finds, based on clear and convincing evidence, that the respondent meets the criteria for involuntary commitment, an order shall be entered for either of the following:
 - (1) Outpatient treatment.
- (2) Inpatient treatment.
- 208 (b) The least restrictive alternative necessary and
 209 available for the treatment of the respondent's mental illness
 210 or mental illness with a secondary diagnosis of co-occurring
 211 substance use disorder shall be ordered.
- 212 (c) The petition for involuntary commitment shall be 213 dismissed if the criteria for commitment is not proved.
- 214 (d) (1) The judge of probate shall immediately report an
 215 order for involuntary commitment to the Alabama State Law
 216 Enforcement Agency, in a manner prescribed by the Alabama
 217 Justice Information Commission, for entry into the state
 218 firearms prohibited person database and the National Instant
 219 Criminal Background Check (NICS) system.
 - (2) The judge of probate shall report to the Alabama State Law Enforcement Agency, in a method determined by the commission, updates to any order for involuntary commitment that was previously forwarded to the Alabama State Law Enforcement Agency under this section, including notice of any



- 225 reversal of petition or appeal."
- 226 "\$22-52-10.2
- 227 (a) A respondent may be committed to outpatient 228 treatment if the probate court, based upon clear and 229 convincing evidence, finds all of the following:
- 230 (1) The respondent has a mental illness or a mental
 231 illness with a secondary diagnosis of co-occurring substance
 232 use disorder.
- 233 (2) As a result of the mental illness, or mental
 234 illness with secondary diagnosis of co-occurring substance use
 235 disorder, the respondent, if not treated, will suffer mental
 236 distress and experience deterioration of the ability to
 237 function independently.
- 238 (3) The respondent is unable to maintain consistent
 239 engagement with outpatient treatment on a voluntary basis, as
 240 demonstrated by either of the following:
- 241 a. The respondent's actions occurring within the 242 two-year period immediately preceding the hearing.
- 243 b. Specific aspects of the respondent's clinical 244 condition that significantly impair the respondent's ability 245 to consistently make rational and informed decisions as to 246 whether to participate in treatment for mental illness.
- (b) Upon a recommendation made by the designated mental health facility currently providing outpatient treatment that the respondent's outpatient commitment order should be renewed, a probate court may enter an order to renew the commitment order upon the expiration of time allotted for treatment by the original outpatient treatment order if the



- 253 judge of probate court finds, based upon clear and convincing
 254 evidence, all of the following:
- 255 (1) The respondent has a mental illness or a mental
 256 <u>illness with a secondary diagnosis of co-occurring substance</u>
 257 use disorder.
- 258 (2) As a result of the mental illness or mental illness

 with a secondary diagnosis of co-occurring substance use

 disorder, the respondent, if treatment is not continued, will

 suffer mental distress and experience deterioration of the

 ability to function independently.
- 263 (3) The respondent remains unable to maintain
 264 consistent engagement with outpatient treatment on a voluntary
 265 basis."
- 266 "\$22-52-10.4
- 267 (a) A respondent may be committed to inpatient
 268 treatment if the <u>judge of probate court</u>, based upon clear and
 269 convincing evidence, finds that all of the following are true:
- 270 (1) The respondent has a mental illness or a mental
 271 <u>illness with a secondary diagnosis of co-occurring substance</u>
 272 use disorder.
- 273 (2) As a result of the mental illness or mental

 274 <u>illness with a secondary diagnosis of co-occurring substance</u>

 275 <u>use disorder</u>, the respondent poses a real and present threat

 276 of substantial harm to self or others.
- 277 (3) The respondent, if not treated, will continue to
 278 suffer mental distress and continue to experience
 279 deterioration of the ability to function independently.
- 280 (4) The respondent is unable to make a rational and



informed decision as to whether or not treatment for mental illness or mental illness with a secondary diagnosis of co-occurring substance use disorder would be desirable.

- (b) If the <u>probate judge of probate</u> finds that no treatment is presently available for the respondent's mental illness or mental illness with a secondary diagnosis of <u>co-occurring substance use disorder</u>, but that confinement is necessary to prevent the respondent from causing substantial harm to himself or herself or to others, the order committing the respondent shall provide that, should treatment for the respondent's mental illness or mental illness with a secondary <u>diagnosis of co-occurring substance use disorder</u> become available at any time during the period of the respondent's confinement, the treatment shall be made available to him or her immediately.
- (c) In determining whether an individual poses a real and present threat of substantial harm to self or others, all available relevant information shall be considered, including any known relevant aspects of the individual's psychosocial, medical, and psychiatric history, in addition to the individual's current behavior.
- 302 (d) Nothing in this section shall be construed as
 303 requiring a mental health provider to expand their current
 304 services if necessary funding is not provided."
- 305 "\$22-52-10.11

306 (a) The director of a state mental health facility or
307 designated mental health facility to which a respondent is
308 currently committed for inpatient treatment, not later than 30



309 days prior to the expiration of the current commitment order, 310 shall assess the appropriateness of transferring the 311 respondent to outpatient treatment as the least restrictive 312 alternative necessary and available for the treatment of the 313 respondent's mental illness or mental illness with a secondary 314 diagnosis of co-occurring substance use disorder. The director 315 may recommend to the probate court in writing that the order 316 be modified to commit the respondent to outpatient treatment.

- 317 (b) A recommendation under subsection (a) shall do both 318 of the following:
- 319 (1) State the grounds for the director's determination
 320 that outpatient treatment is the least restrictive alternative
 321 necessary and available for the treatment of the respondent's
 322 mental illness or mental illness with a secondary diagnosis of
 323 co-occurring substance use disorder.
- 324 (2) Identify the designated mental health facility to
 325 which the director recommends that the respondent be committed
 326 for outpatient treatment.
- 327 (c) Notice of the recommendation under subsection (a)
 328 shall be provided to both of the following:
- 329 (1) The respondent.
- 330 (2) The director of the designated mental health
 331 facility identified under subsection (b), unless the director
 332 is the individual making the recommendation.
- 333 (d) Upon request of the respondent or any other

 334 interested party, the probate court shall hold a hearing on

 335 the recommendation. The probate courtjudge of probate shall

 336 appoint an attorney to represent the respondent at the



- hearing. The hearing shall be conducted in accordance with Section 22-52-9.
 - (e) If a hearing is not requested, the judge of probate court may make a decision regarding the facility director's recommendation based upon both of the following:
 - (1) The grounds stated in the recommendation.
- 343 (2) Consultation with the director of the designated 344 mental health facility, or his or her designee, concerning the 345 availability of resources to treat the respondent as an 346 outpatient.
- (f) If the <u>probate</u> court modifies the order, the
 modified order shall conform to all requirements of an
 original commitment to outpatient treatment under Section
 22-52-10.3, except that the modified order may not extend
 beyond the term of the original order by more than 60 days."
- 352 Section 2. Section 15-16-26 is added to the Code of 353 Alabama 1975, to read as follows:
- 354 \$15-16-26

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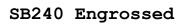
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355 Notwithstanding Section 15-16-20, Code of Alabama 1975, 356 if a commitment order has been issued pursuant to Title 22, 357 Chapter 52, Code of Alabama 1975, but cannot be fulfilled 358 because the respondent is subsequently confined solely for 359 misdemeanor charges or municipal ordinance violations, the judge of probate who issued the commitment order may 360 361 communicate with the judge of the district, municipal or circuit court who ordered the respondent to be confined to 362 discuss whether he or she will issue an order to discharge the 363 364 respondent from confinement and suspend the criminal



365	proceedings temporarily so that the commitment order may be
366	fulfilled. The court shall give the prosecuting attorney an
367	opportunity to object to the discharge order.
368	Section 3. This act shall become effective on January
369	1, 2025.
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373	Senate
374	Read for the first time and referred21-Mar-24
375	to the Senate committee on Judiciary
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377	Read for the second time and placed
378	on the calendar:
379	1 amendment
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381	Read for the third time and passed09-Apr-24
382	as amended
383	Yeas 34
384	Nays 0
385	Abstains 0
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388	Patrick Harris,
389	Secretary.
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