

PROCEDURE FOR: Commitment: Involuntary Commitment Application

- POLICY:**
1. An Involuntary Commitment Hearing will be arranged when a formal voluntary patient wishes to leave the hospital, or the term of a Physician's Emergency Certificate (PEC) for a patient is due to expire, and the patient remains gravely disabled or a danger to him/herself or others.
 2. The team social worker coordinates arrangements with the Probate Court of Farmington to schedule all Involuntary Commitment hearings.

REQUIRED

DOCUMENTS: Court of Probate Forms: PC801, PC184-A
Department of Mental Health Form: MHCC-11
Statement of Electing Voluntary Status Form
Current Medications Listing and Side Effects Form

PROCEDURE:

ACTION

POINTS OF EMPHASIS

1. The attending physician documents in the medical record the circumstances that necessitate an involuntary commitment hearing.
2. The Team Social Worker documents status of PEC and filing of commitment paperwork.
3. The following actions then take place:
 - a. The team Social Worker alerts the Clerk of Court regarding the unit's intention to request the hearing.
 - b. The team Social Worker will ensure that the following process occurs:
 - 1) Inform the patient that there will be a hearing.
 - 2) Inform the patient that a probate judge will be coming to hear his/her case and make a decision as to whether he/she may be discharged, or remain in the hospital as a committed patient.
 - 3) Educate the patient regarding their right to be represented by an attorney at the hearing, including options for a court-appointed lawyer provided at the state's expense.
 - 4) Inform the patient of his/her right to elect voluntary status and offer a voluntary application.
- 4) If a patient applies for voluntary status, an opinion of competency to apply should be given by a

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At any time during the process, the patient may choose to sign in on a voluntary status (form MHCC-2). If the patient is competent to make that decision, the proceedings will be stopped. The Social worker contacts the Probate Clerk concerning the patient's status. A Request to Withdraw Letter along with the signed Voluntary Status form is faxed to the Probate Court followed by mailing the original copy of the Request to Withdraw letter and a copy of signed Voluntary Status form. A copy of the Request to Withdraw Letter is filed in chart. physician.

- 5) The team Social Worker informs Attorney General's office of the commitment application and provides him copies of all paperwork sent to court to the Attorney General.
4. If the patient expresses wishes to transfer to another hospital on a voluntary basis, the team, and the Case Manager or designee attempts to locate an alternative treatment facility.
5. If the patient is not willing to remain at John Dempsey Hospital or another hospital on a voluntary basis, the following will occur:
 - a. Form PC801 (probate court form) is completed by the team Social Worker and MD. The form is signed by the unit manager (or designee). This form is witnessed by a notary public upon completion.
 - b. Form MHCC-11 (State of CT form) Appointment of Counsel Request is completed. This form is signed by the team Social Worker.
 - c. If the patient cannot afford to pay for an attorney, a request/order waiver of fees PC184-A (probate court form) is completed by the team social worker.
6. Complete forms PC801, MHCC-11, PC184-A Involuntary Commitment Proceeding,

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Current Medications Listing and Side Effects Form, Statement of Electing Voluntary Status Form, copy of PEC, and demographic sheet.

7. In addition, a copy of Conservatorship, Power of Attorney, Health Care Agent, Legal Guardian of Title 19 Card if applicable is provided. All above documents will be delivered to the Clerk of Probate Court, Monteith Drive, Farmington, CT 06032 by Courier. A copy is placed in the chart.
8. The team member coordinating the hearing will inform the patient and other team members of the time and date of the hearing so he/she can arrange to be present.
9. The Clerk of the Probate Court will contact all interested parties, including court appointed outside MDs, one of which must be a psychiatrist, informing them of the time and date of the hearing.
10. The patient and their attorney will meet in the hospital prior to the hearing. The attorney may review the patient's hospital chart.
11. The team Social Worker will arrange for a room on the unit in which the hearing will take place along with a tape recorder and tape to record the proceedings.
12. If the judge decides that the patient is committable:
 - a. The patient remains at JDH for the duration of the commitment (not to exceed one year) or until the MD determines the patient may be discharged.

OR:

- b. If the patient must be transferred to another hospital due to insurance or other administrative reasons, arrangements will be made for transfer.

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13. The team Social Worker or designee will arrange for an ambulance and contact the prearranged facility and coordinate transfer of the patient.
 - a. The team Social Worker will facilitate the transfer by providing the following forms: three copies of the Transportation/Authorization form, the judge's (original) order of commitment, (a copy will remain in the patient's medical chart) a copy of the discharge summary, and a W-10 as needed.
14. If the judge finds the patient not committable:
 - a. The patient will be discharged. Follow-up care may be provided.
 - b. The patient may leave AMA.
 - c. The patient may elect Formal Voluntary Status.

Follow up required when a patient remains on Commitment Status at JDH:

1. A monthly list of court-committed patients is sent to the Probate Court by the Unit Social Worker with a copy to the Manager.
2. When a patient is discharged, the Commitment status is terminated.

APPROVAL: Nursing Standards Committee

EFFECTIVE DATE: 12/95

REVISION DATES: 8/97, 10/00, 10/03, 6/06, 7/08