

SUBJECT: Procedures for court-ordered mental health services

COMMITTEE: Public Health — favorable, without amendment

VOTE: 7 ayes — Berlanga, Hirschi, Coleman, Glaze, Janek, Maxey, Rodriguez
0 nays
2 absent — McDonald, Delisi

SENATE VOTE: On final passage, April 3 — 29-0

WITNESSES: For — Guy Herman, Judge, Travis County Probate Court; Bob McFarland, Texas Society of Psychiatric Physicians; Deborah C. Hiser, Advocacy, Inc.; Jacqueline Shannon, Texas Association of the Mentally Ill
Against — none
On — Karen Hale, Texas Department of Mental Health and Mental Retardation

DIGEST: SB 572 would amend statutes relating to court-ordered mental health care and county responsibilities. SB 572 would take immediate effect if approved by two thirds of the membership of each house.
SB 572 would allow the state to be represented by a criminal district attorney or a court-appointed special prosecutor if the county did not have a county attorney. All applications for court-ordered services would be required to be styled "The State of Texas for the Best Interest and Protection of (Name) the (patient or proposed patient)."
Hearing costs would be paid by the county that initiated emergency detention procedures, accepted an application for court-ordered mental health services or issued protective custody or temporary services orders. Counties would be responsible for the costs of all subsequent hearings or proceedings until the person was discharged.

An application for court-ordered services could be transferred to the county in which the person was being detained under protective custody if the receiving county approved the transfer.

An order for outpatient services designating services to be provided in a county other than the county initiating the order would be required to be referred to the appropriate court in the county that would provide the outpatient services. That county would thereafter have exclusive continuing jurisdiction of the case.

Hearings for physician-initiated applications to authorize the administration of psychoactive medications when the patient refused would have to be held not later than 30 days after the filing of the application. If the hearing was not held on the same day as the application for court-ordered mental health services and the patient was transferred to a mental health facility in another county, the court could transfer to the county where the patient has been transferred the application for an order to authorize psychoactive medication.

A court could authorize the administration of psychoactive medication if an application for court-ordered mental health services was pending for the patient as an alternative to the requirement that the patient already be under court orders for mental health services. A magistrate or master who heard the case instead of a judge could set hearing dates and appoint attorneys, and a record would not be required.

Mental health code laws relating to the administration of medication to patients under order for mental health services would apply to all patients subject to court ordered services, in private as well as public mental health facilities.

**SUPPORTERS
SAY:**

SB 572 would iron-out technical problems and clarify responsibilities in court-order mental health proceedings, some of which arose from the enactment last session of SB 207 by C. Harris, Moncrief, et al. related to patient rights in court-ordered mental health proceedings and medication. Currently court-ordered cases or applications for court-ordered care are stalled due to questions surrounding who is to represent the state and who is to pay for the patient's case. Appropriate patient treatment is also

delayed because an application for court-ordered administration of medication cannot be filed until after a court order for mental health services is granted.

SB 572 reflects the work and agreements formed by an ad-hoc group of probate judges, patient advocates, mental health workers and county attorneys and judges.

OPPONENTS
SAY:

No apparent opposition.