Legal 2000 The Nevada Process of Civil Commitment

Some Proposed Amendments
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EXHIBIT C Health Care

Document consists of 8 pages.

Entire document provided

Due to size limitations, pages ____ provided. A copy of the complete document is available through the Research Library (775/684-6827) or e-mail library@lcb.state.nv.us). Meeting Date 6/17/08

LEGAL 2000

The Nevada Process of Civil Commitment

Patient brought to ER by EMS, etc. Page A of Legal 2000 completed

Initial evaluation establishes that patient does not meets criteria

Patient meets criteria and medical evaluation establishes patient is medically clear

Patient meets criteria but medical evaluation determines patient is not medically clear

Patient is discharged or referred to CTC for detox, etc.

Page B of Legal 2000 completed.
Patient transferred to a mental health facility

Patient is admitted to hospital for treatment. Page B of Legal 2000 is not completed

Patient admitted to hospital for medical treatment. Risk management notified. Patient evaluated by psychiatrist.

Risk Management notifies court.

No underlying psychiatric illness.
Cleared by psychiatry and Page B of Legal 2000 not completed.
Legal 2000 discontinued.

Psychiatric symptoms due to a substance use disorder. When medically stable, refer to substance abuse program. Legal 2000 discontinued. Psychiatric diagnosis generates treatment recommendations.
Treatment successful and patient no longer meets commitment criteria. Legal 2000 discontinued.

Psychiatric treatment does not lead to significant improvement by time medically cleared. Page B completed and patient transferred to mental health facility.

Criteria for Commitment

Documented on Page A of Legal 2000

NRS 433A.115 "Person with mental illness" defined.

- 1. A person with mental illness lacks capacity to exercise self-control, judgment and discretion in the conduct of his affairs and social relations or to care for his personal needs and as a result presents a clear and present danger of harm to himself or others. This does not include any person in whom that capacity is diminished by epilepsy, mental retardation, Alzheimer's disease, brief periods of intoxication caused by alcohol or drugs, or dependence upon or addiction to alcohol or drugs, unless a mental illness that can be diagnosed is also present which contributes to the diminished capacity of the person.
- 2. A person presents a clear and present danger of harm to himself if, within the next preceding 30 days, he has, as a result of a mental illness:
- (a) Acted in a manner from which it may reasonably be inferred that, without the care, supervision or continued assistance of others, he will be unable to satisfy his need for nourishment, personal or medical care, shelter, self-protection or safety, and there exists a reasonable probability that his death, serious bodily injury or physical debilitation will occur within the next following 30 days unless he is admitted to a mental health facility and adequate treatment is provided to him;
- (b) Attempted or threatened to commit suicide or committed acts in furtherance of a threat to commit suicide, and there exists a reasonable probability that he will commit suicide unless he is admitted to a mental health facility and adequate treatment is provided to him; or
- (c) Mutilated himself, attempted or threatened to mutilate himself or committed acts in furtherance of a threat to mutilate himself, and there exists a reasonable probability that he will mutilate himself unless he is admitted to a mental health facility and adequate treatment is provided to him.
- 3. A person presents a clear and present danger of harm to others if, within the next preceding 30 days, he has, as a result of a mental illness, inflicted or attempted to inflict serious bodily harm on any other person, or made threats to inflict harm and committed acts in furtherance of those threats, and if there exists a reasonable probability that he will do so again unless he is admitted to a mental health facility and adequate treatment is provided to him.

Medical Clearance

Top Half of Page B of Legal 2000

NRS 433A.165 Examination required before transportation of person to mental health facility

Before a person alleged to be a person with mental illness may be transported to a public or private mental health facility pursuant to NRS 433A.160, the person must:

- (a) First be examined by a licensed physician or a licensed physician assistant or an advanced practitioner of nursing to determine whether the person has a medical problem, other than a psychiatric problem, which requires immediate treatment; and
- (b) If such treatment is required, be admitted for the appropriate medical care:
- (1) To a hospital if the person is in need of emergency services or care; or
 - (2) To another appropriate medical facility if the person is not in need of emergency services or care.

Patients Admitted for Medical Treatment - Problems

- Between 2% and 8% of patients brought to ER's on Legal 2000 have acute medical problems that take precedence. That translates to between 240 and 960 patients of the approximately 12,000 patients seen.
- Since the Legal 2000 cannot be completed, their legal status is uncertain.
- While the medical problem is being addressed, the psychiatric problems may be neglected, particularly since most general hospitals do not have psychiatrists readily available.
- Staff may be unaware of the Legal 2000 status and fail to consider before discharge at the time the patient becomes medically stable. This may also be a problem in the committed patient transferred from a mental facility for treatment of an acute medical problem.

Solutions

- Amend NRS to clarify legal status and assure patients are followed by the court psychiatrists and hospital risk management offices until medically stable and either transferred to a mental health facility or cleared psychiatrically and able to be discharged home or to an alternate level of psychiatric care
- Develop procedures and policies within hospitals to assure the psychiatric and legal status is known to all members of the treatment team and hospital risk management service
- In service training to MD's, RN's, SW's, Ward Clerks and others on the Legal 2000 process
- Require that general hospitals have psychiatric coverage available and encourage financial arrangements that facilitate psychiatric consultation to the medically and/or psychiatrically uninsured

Proposed Amendment to NRS 433A.165 (in blue italics)

- (b) If such treatment is required, be admitted for the appropriate medical care:
 - (1) To a hospital if the person is in need of emergency services or care; or
 - (2) To another appropriate medical facility if the person is not in need of emergency services or care.
- c) If such medical treatment is required at a medical facility prior to transfer to a psychiatric facility, and if the required medical treatments require a duration of treatment in the medical facility greater than 72 hours:
 - (1) the medical facility shall petition the court to advise of such detention by the end of the next business day of which the office of the clerk of district court is open.
 - (2) the medical facility shall notify the office of the clerk of district court every seven days thereafter until the person with mental illness is transferred to a psychiatric facility or released from the medical facility if psychiatrically cleared.
 - (3) this notification shall include the reason the person with mental illness is alleged to be appropriate for civil commitment to a psychiatric facility and the reason continued medical treatment is required before the person with mental illness is transferred to a psychiatric facility

Note: It would be expected that a new or alternate Legal 2000 form be generated that conforms to this Amendment