# Assisted Outpatient Treatment

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EXHIBIT R Health Care
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Entire exhibit provided.
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## Assisted Outpatient Treatment (AOT):

**Definition:** Court-ordered community-based or outpatient services for:

 individuals diagnosed with severe and persistent mental illness and...

 who have a recent, repeated history of medication noncompliance and/or incarceration as a condition of their remaining in the community.

## Assisted Outpatient Treatment (AOT):

- 1. Originated in New York with "Kendra's Law" (1999)
- 2. 2013: Nevada Legislation authorizes AOT (AB 287)
- 3. Nevada: 45<sup>th</sup> state to implement AOT
- Southern Nevada Adult Mental Health develops and introduces the State's first formal AOT program (2013-2014)

## Assisted Outpatient Treatment: Does it Work?

 A 2005 study by the New York State Office of Mental Health found that individuals diagnosed with mental illness were 87% less likely to be incarcerated during six months after issuance of a Kendra's Law-type court order.

83% less likely to be arrested.

77% less likely to be hospitalized.

74% less likely to be homeless.

# AOT and Assembly Bill 287

Criteria for admission into the AOT program as defined in AB 287:

- 1. The person is 18 years of age or older
- 2. The person has a history of non-compliance with treatment for mental illness
- 3. A program of community-based or outpatient services (AOT) is available in the community in which the person resides (or is otherwise made available to the person)
- 4. The person is capable of *surviving safely* in the community in which he or she resides *with available supervision*

# AOT and Assembly Bill 287 (cont.)

- 5. Based on the person's treatment history, AOT is required to prevent further disability or deterioration of the person which is likely to result in harm to himself or herself or others
- 6. The current mental status of the person or the nature of the person's illness limits or negates his or her ability to make an informed decision to seek treatment for mental illness *voluntarily*.
- 7. The program of community-based or outpatient services is the *least restrictive treatment* which is in the best interest of the person
- 8. The court has approved a plan of treatment developed for the person .

## SNAMHS Current /Other Criteria for Admission:

Several criteria established in AB 287 have been interpreted as follows:

- Three or more instances of hospitalization and/or incarceration within the past year specifically due to non-compliance with psychiatric treatment.
- 2. Other less-restrictive options have been considered or attempted (e.g. Traditional Case Management) prior to AOT and either the client has refused or the program has been unsuccessful at maintaining stability.
- AOT can provide the most appropriate and least restrictive service for the individual.

## **AOT** in Southern Nevada

1. SNAMHS' current AOT team was developed using the PACT ("Program for Assertive Community Treatment") model:

Emphasis on community outreach

Evidence Based

Nationally recognized

2. The AOT team at SNAMHS currently consists of 10 staff:

- 1 Psychiatrist
- 1 Licensed Psychologist (team lead)
- 1 Licensed Clinical Social Worker
- 1 Registered Nurse
- 5 Psychiatric Caseworkers
- 1 Administrative Assistant

- 3. Admission into AOT begins with a referral:
  - Referrals currently originate from within the hospital:
    - The individual meets admission criteria
    - High recidivism/ utilizers of inpatient services
  - AOT team completes and submits formal petition for AOT to the Family/District Court
  - Hearing is held; order for treatment is either approved or denied.

#### "Petition for Assisted Outpatient Treatment" (Sample):

1. Petition for Assisted Outpatient Treatment	
	<ol><li>The individual:</li></ol>
Definition of Mental Hacus, NRS 433A-115:	□ is 15 yo
As used in NRS 433A, 120 to 433A, 330, Sektative, unless the context otherwise requires, "immtally ill person" meins any person whose capacity to exercise salf-centrol, judgment and discretion in the conduct of his/her affairs and social relations or to care for personal mode, is distributed as a result of mental libration to the extent that (sign presents a clear and present danger of human to self-	© Sp. not 13
or others, but does not include any person in whom that capacity is diminished by opilepsy, moreal standation, dementa, delirium, brief periods of intercipation caused by alcehol or drugs or dependence upon or addiction to alcohol or drugs unless a mental illness	4. The above statements
that can be diagnosed is also present which contributes to the diminished capacity of the person.	a. the person deine the fe
L. I	
a person with a serious mental illness and is requiring assisted countrardiered outpetient treatment.	
The person was born on(D.05) and is currently located at	
	i), conduct and statement
2. I belove that the person identified above mosts the entire for someone with a mental illness and that (check all that apply ):	
<ul> <li>Secouse of mental finess and without assisted output lent treatment, there is clear and convincing ovidence that</li> </ul>	l
the person is unlikely to understand or participate in treatment valuntarily and that, if allowed his or her liberty <sub>the</sub> .  Observation of the person.	Syc
Secourse of mental illness and without assisted outpatient treatment, there is clear and convincing avidence that the person is unlikely to understand or particle ate in treatment valunts rily and that this non-reproclained would	5. The essen D a D a
result in further disability or deterioration of the person which is likely to result in horm to ξέρφος, herself or	hejshe has exemined the himself, herself or others i
offen.	nimali, nead or over i
Ο <sub>νν</sub> ιξορομος of the individual's current mental filmess the person is not capable of surviving in the community in which	6. The person ID has per
he or she resides without evallable supervision/assisted autpetient treatment	psychologist
This individual is currently receiving treatment for mental illness but has been nonreampliant with said treatment.	
as provided by:	7. I request that the court
	Person completing form:
The individual has demonstrated a history of noncompliance with treatment which has played a factor in the	Address:
porsor's:	Relationship:
Residential placement	Sign ature:
	(Relationship = spouse, pa
Q., Campiling and an manuscrip, eliteratives thereigned periods an absorption of blockers within the periods as	

our high transition.

🗆 is 15 years or older Q 8x not 15 years or older e statements are based on: n doing the following acts and saying the following things nd statements that others have seen or heard and have told me about: ion 🗆 is 🗇 is qui, quipopopopo, io, 4 by a contificate of a physician, paychistrist or lecrated psychologist stating that xomined the person alleged to be a person with mentally illness and, because of that illness, is likely to harm of or others if allowed his or her liberty. □ has agreed (a, @ has refused to \_submit to examination or treatment by a physician, psychiatrist or learned that the court determine the individual to be a present who requires assisted outpatient treatment Relationship 💌 spouse, parent, adult children, legal guardian, physician, psychologist, social worker, registered nurse, occredited agent of the Department of Human resources, officer outhorised to make arrests)

For each individual admitted into the program, assessment and, if needed enrollment is completed for the following rehabilitative services. These are typically provided by various community service providers:

- a. Treatment of substance abuse disorders
- b. Basic skills training
- c. Psychosocial Rehabilitation
- d. Housing (e.g. group home)
- e. Medication administration
- f. Vocational training

AOT team performs the following critical functions:

- a. Medication prescription and monitoring
- b. Counseling or therapy
- Coordination and linking with needed other services and benefits

#### As of 05/06/2014:

- Program officially launched: March 15, 2014
- 48 referrals submitted
- 10 petitioned to the program by AOT; 7 ordered (approved)
- 1 denied admission to the program by the Family Court
- 2 awaiting hearing

- Primary reasons for AOT denying admission into program:
  - Individual does not meet criteria for admission
    - e.g. Appropriate less-restrictive options have not yet been attempted
    - e.g. Individual not able to survive safely in the community despite AOT
  - Individual discharged from hospital prior to AOT initial evaluation

#### **Current Challenges:**

- Training/educating new team on AOT, AB 287, etc.
- Expanding to include referrals from jail/detention center
- Training/educating new team on SNAMHS-specific programs, policies and procedures
- Training hospital staff (e.g. social workers, physicians, Mobile Crisis) on AOT; appropriate admission criteria for AOT
- Team Psychiatrist

 Educating and coordinating brand-new and unique program procedures with other involved community service providers:

- Las Vegas Metro Police Department
- Group Homes
- Family/District Court
- On-call 24/7 AOT access options
- Refining program procedures and policies to reflect ethical and pragmatic "realities" in the community

# Assisted Outpatient Treatment (AOT):

Questions?