

Involuntary Hospitalization of the Mentally Ill:

How it works in St. Lawrence County

Reachout of St. Lawrence County, Inc.

Please make sure that your computer speakers are turned on



We will show you:

- The **laws** that cover involuntary hospitalization
- What the **legal terminology** means
- **Who** can invoke involuntary hospitalization
- How Reachout's **Crisis Outreach Team** works
- How to get more **information**

New York Mental Hygiene Law

- **9.27** Involuntary admission on medical certification
- **9.29** Involuntary admission on medical certification; notice of admission to patients and others.
- **9.31** Involuntary admission on medical certification; patient's right to hearing.
- **9.33** Court authorization to retain an involuntary patient.
- **9.35** Review of court authorization to retain an involuntary patient.
- **9.37** Involuntary admission on certificate of a director of community services or his designee.
- **9.39** Emergency admissions for immediate observation, care, and treatment.
- **9.40** Emergency observation, care and treatment in comprehensive psychiatric emergency programs.
- **9.41** Emergency admissions for immediate observation, care, and treatment; powers of certain peace officers and police officers.
- **9.43** Emergency admissions for immediate observation, care, and treatment; powers of courts.
- **9.45** Emergency admissions for immediate observation, care, and treatment; powers of directors of community services.
- **9.47** Duties of local officers in regard to their mentally ill.
- **9.55** Emergency admissions for immediate observation, care and treatment; powers of qualified psychiatrists.
- **9.57** Emergency admissions for immediate observation, care and treatment; powers of emergency room physicians.
- **9.58** Transport for evaluation; powers of approved mobile crisis outreach teams.

“Likelihood to result in serious harm”

1. Substantial risk of physical harm to himself as manifested by **threats of or attempts at suicide or serious bodily harm** or other conduct demonstrating that he is dangerous to himself
2. Substantial risk of physical harm to other persons as manifested by **homicidal or other violent behavior** by which others are placed in reasonable fear of serious physical harm

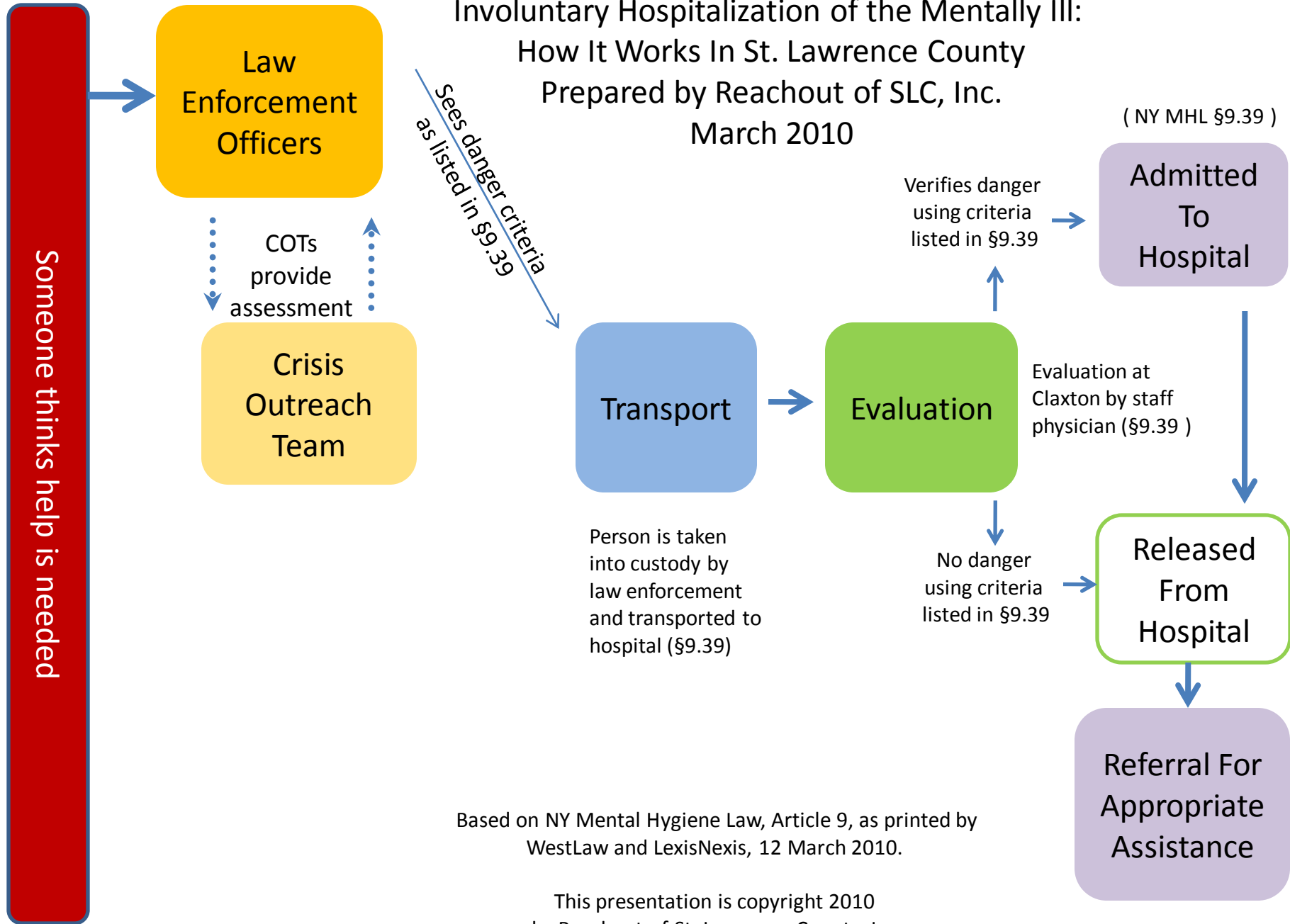
SELF

OTHERS

Powers under NY Mental Hygiene Law §9.41

LAW ENFORCEMENT OFFICERS

Involuntary Hospitalization of the Mentally Ill: How It Works In St. Lawrence County Prepared by Reachout of SLC, Inc. March 2010



Based on NY Mental Hygiene Law, Article 9, as printed by WestLaw and LexisNexis, 12 March 2010.

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(315) 265-2422 or reachout@reachouthotline.org

Powers under NY Mental Hygiene Law §9.45

DIRECTOR OF COMMUNITY SERVICES

Who is a “valid reporter”?

- a licensed physician
- a licensed psychologist, registered professional nurse, or certified social worker currently responsible for providing treatment services to the person
- the health officer
- a police officer
- a peace officer with appropriate special duties
- the supportive case manager of the person
- the intensive case manager of the person
- the spouse of the person
- the child of the person
- the parent of the person
- the adult sibling of the person
- the committee or legal guardian of the person

You might expect significant others, non-married housemates, friends, co-workers, neighbors, or other concerned people to be on this list.

They aren't.

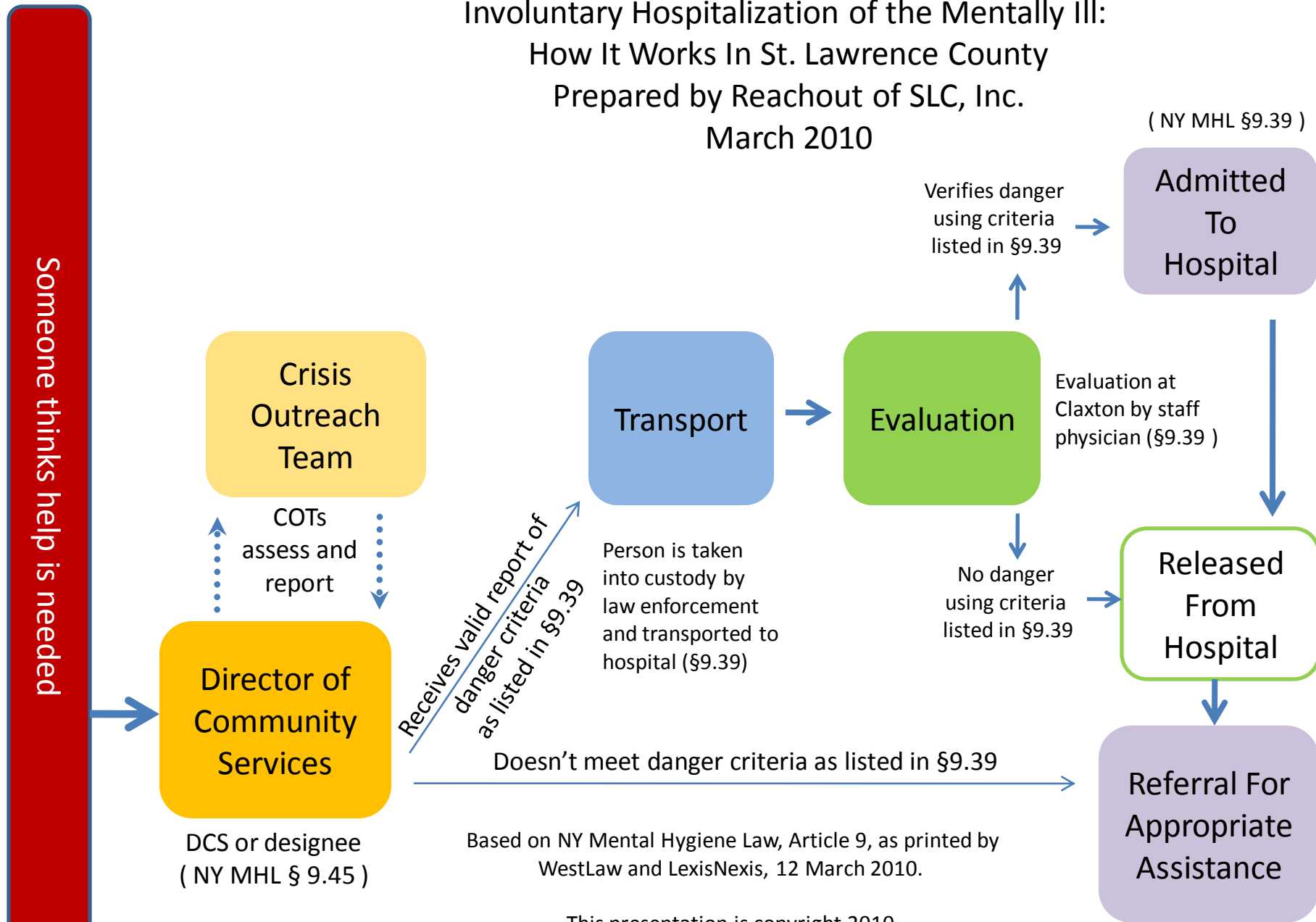
PROFESSIONAL

PERSONAL

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(NY MHL §9.39)



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Highly-trained specialists in field assessment

CRISIS OUTREACH TEAM

What is the Crisis Outreach Team?

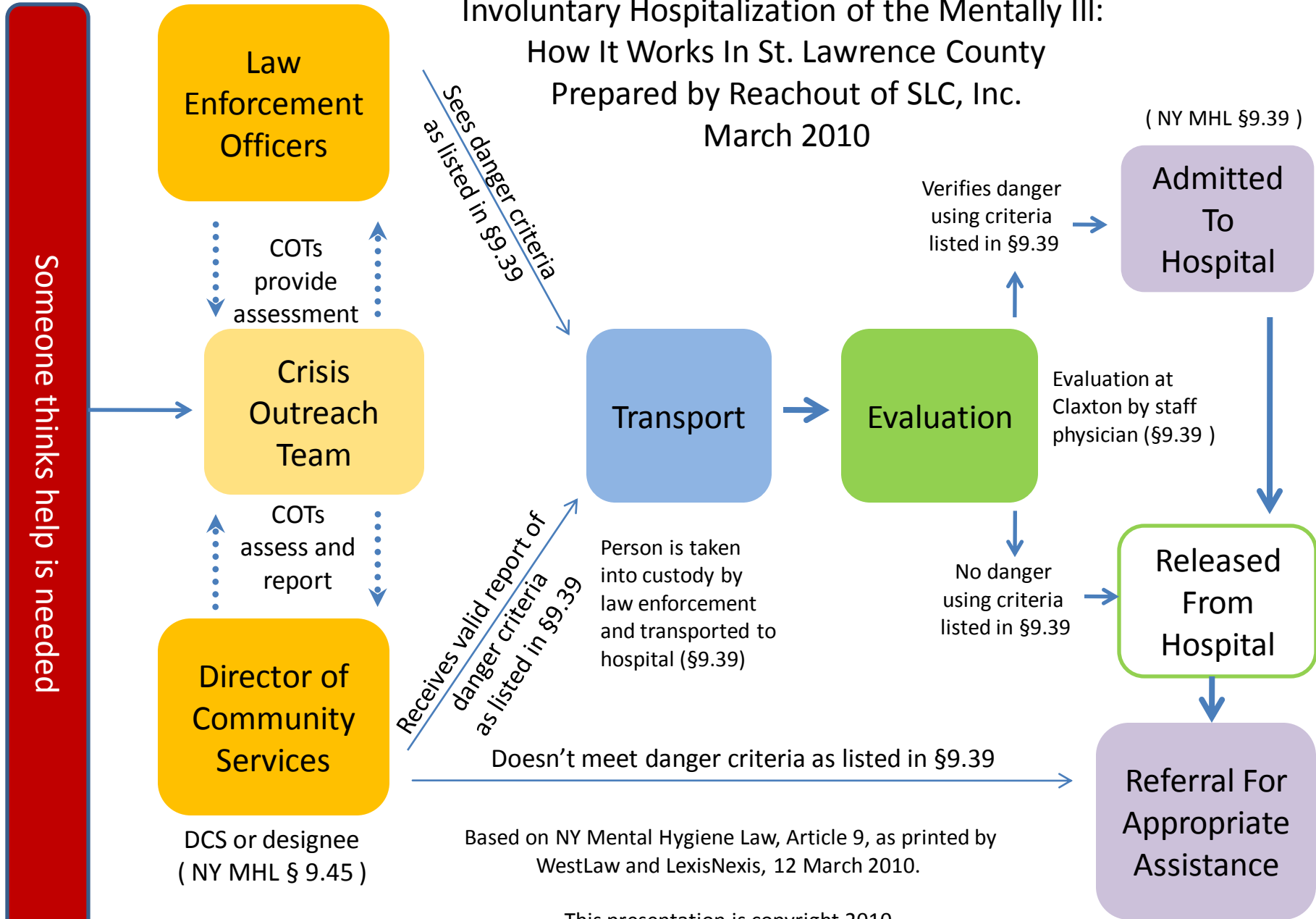
- A team of Master's-level counselors and social workers—all currently have >10 years of experience
- A program operated by Reachout of St. Lawrence County, Inc. since 1995
- State law requires counties to provide COT services (under COPS regulations)
- Specialize in mobile crisis intervention and mental health assessment
- No legal authority to compel involuntary treatment
- May not transport clients
- Work closely with DCS, law enforcement, and other stakeholders

CAPABLE

CARING

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Why is the process so complicated?

- Imagine that this was happening to you . . .
- . . . wouldn't you want it to be *hard* for someone to handcuff you, put you in a police car, and take you to the mental hospital just because someone else said you needed it?
- The process can feel threatening—the constraints help us to establish trust with people in need
- Flexibility in the process is valuable
- The system requires a team of people working together, which helps prevent abuse

For more information:

- Reachout of St. Lawrence County
(315) 265-2422
reachout@reachouthotline.org
- Ruth Ayen, Director of Community Services
(315) 386-2048
rayen@co.st-lawrence.ny.us or
sbeldock@stlawco.org (Administrative Assistant)
- Law enforcement
911 or (315) 379-2222 (County Sheriff)
Other numbers depend on location

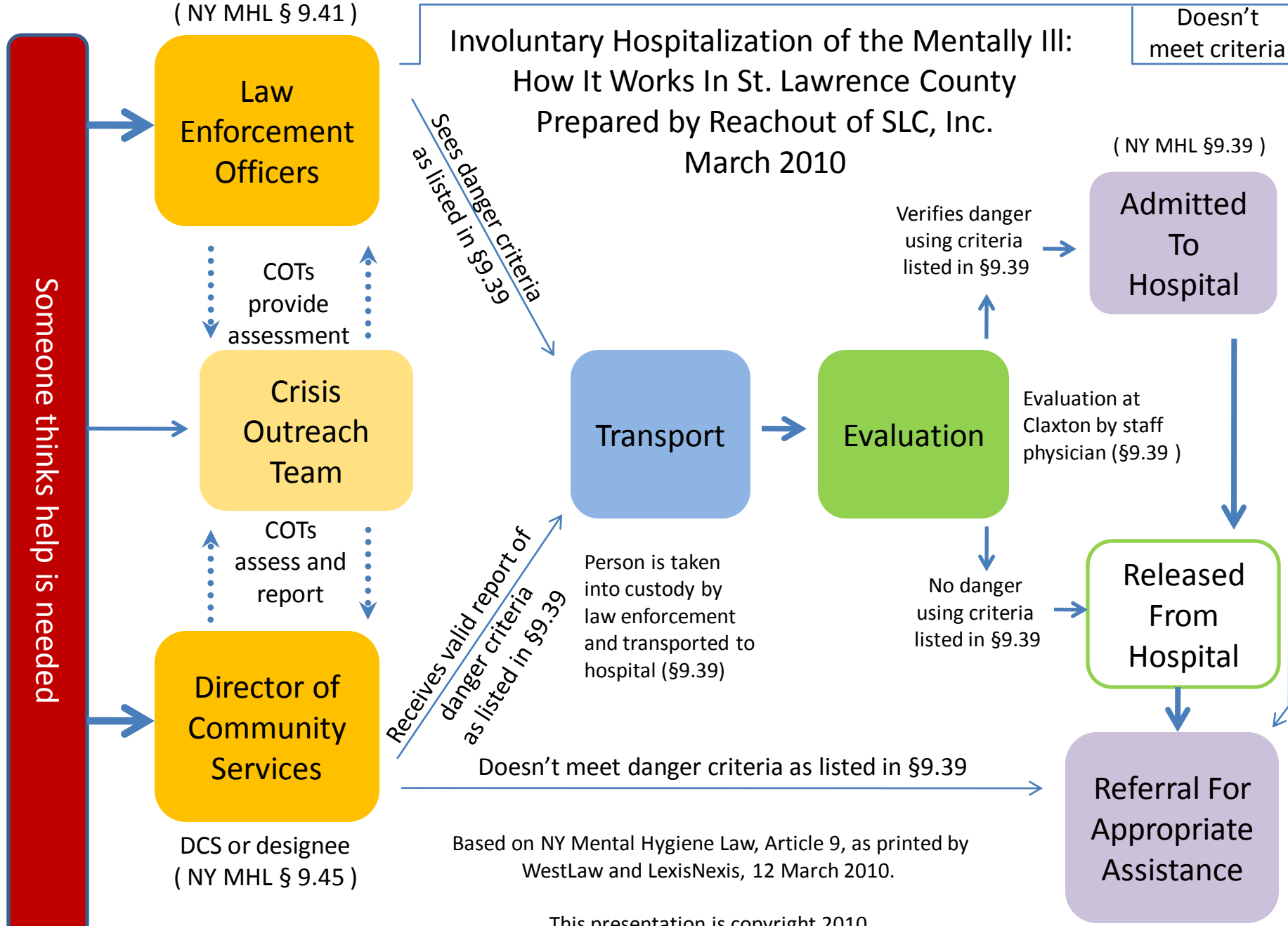
Credits:

- Designed, narrated, and produced by **Hollis Easter**
- Subject matter expertise was provided by **Stephen Easter, Karen Easter, and Ruth Ayen**
- This presentation is based on New York Mental Hygiene Law as published by WestLaw and LexisNexis in March 2010. It is a guide to practice, not a comprehensive legal reference.

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Doesn't meet criteria

(NY MHL § 9.41)

Law Enforcement Officers

COTs provide assessment

Crisis Outreach Team

COTs assess and report

Director of Community Services

DCS or designee
(NY MHL § 9.45)

Transport

Person is taken into custody by law enforcement and transported to hospital (§9.39)

Evaluation

Evaluation at Claxton by staff physician (§9.39)

(NY MHL §9.39)

Admitted To Hospital

Released From Hospital

Referral For Appropriate Assistance

Sees danger criteria as listed in §9.39

Receives valid report of danger criteria as listed in §9.39

Verifies danger using criteria listed in §9.39

No danger using criteria listed in §9.39

Doesn't meet danger criteria as listed in §9.39

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Someone thinks help is needed