

FIRST REGULAR SESSION

SENATE BILL NO. 226

97TH GENERAL ASSEMBLY

INTRODUCED BY SENATOR SCHAEFER.

Read 1st time January 28, 2013, and ordered printed.

TERRY L. SPIELER, Secretary.

1032S.01I

AN ACT

To repeal sections 631.005, 632.005, 632.150, 632.155, 632.300, 632.305, 632.325, 632.330, 632.335, 632.337, 632.340, 632.350, 632.355, 632.375, 632.380, 632.390, and 632.430, RSMo, and to enact in lieu thereof seventeen new sections relating to mental health services.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Sections 631.005, 632.005, 632.150, 632.155, 632.300, 632.305, 632.325, 632.330, 632.335, 632.337, 632.340, 632.350, 632.355, 632.375, 632.380, 632.390, and 632.430, RSMo, are repealed and seventeen new sections enacted in lieu thereof, to be known as sections 631.005, 632.005, 632.150, 632.155, 632.300, 632.305, 632.325, 632.330, 632.335, 632.337, 632.340, 632.350, 632.355, 632.375, 632.380, 632.390, and 632.430, to read as follows:

631.005. 1. In addition to the definitions in section 632.005 which are applicable to this chapter, the following terms as used in this chapter mean:

(1) "Alcohol or drug abuse facility", a place providing treatment and rehabilitation to persons engaged in alcohol or drug abuse, or both, which is recognized as such a place by the department of mental health;

(2) "Division", the division of alcohol and drug abuse of the department of mental health;

(3) "Division director", the director of the division of alcohol and drug abuse of the department of mental health, or his designee;

(4) "Qualified counselor", a person who provides substance abuse counseling and who meets the qualifications prescribed in the standards for certification of alcohol and drug abuse programs under rules promulgated by the department of mental health, as authorized by sections 630.050 and 630.655;

EXPLANATION—Matter enclosed in bold-faced brackets [thus] in this bill is not enacted and is intended to be omitted in the law.

14 (5) "Respondent", an individual who is the subject of involuntary civil
15 detention proceedings instituted under this chapter.

16 **2. As used in this chapter, the term "likelihood of serious harm"**
17 **shall mean any one or more of the following but does not require actual**
18 **physical injury to have occurred:**

19 (1) **A substantial risk that serious physical harm will be inflicted**
20 **by a person upon his own person, as evidenced by recent threats,**
21 **including verbal threats, or attempts to commit suicide or inflict**
22 **physical harm on himself. Evidence of substantial risk may also**
23 **include information about patterns of behavior that historically have**
24 **resulted in serious harm previously being inflicted by a person upon**
25 **himself; or**

26 (2) **A substantial risk that serious physical harm to a person will**
27 **result or is occurring because of an impairment in his capacity to make**
28 **decisions with respect to his hospitalization and need for treatment as**
29 **evidenced by his current mental disorder or mental illness which**
30 **results in an inability to provide for his own basic necessities of food,**
31 **clothing, shelter, safety or medical care or his inability to provide for**
32 **his own mental health care which may result in a substantial risk of**
33 **serious physical harm. Evidence of that substantial risk may also**
34 **include information about patterns of behavior that historically have**
35 **resulted in serious harm to the person previously taking place because**
36 **of a mental disorder or mental illness which resulted in his inability to**
37 **provide for his basic necessities of food, clothing, shelter, safety or**
38 **medical or mental health care; or**

39 (3) **A substantial risk that serious physical harm will be inflicted**
40 **by a person upon another as evidenced by recent overt acts, behavior**
41 **or threats, including verbal threats, which have caused such harm or**
42 **which would place a reasonable person in reasonable fear of sustaining**
43 **such harm. Evidence of that substantial risk may also include**
44 **information about patterns of behavior that historically have resulted**
45 **in physical harm previously being inflicted by a person upon another**
46 **person.**

632.005. As used in chapter 631 and this chapter, unless the context
2 clearly requires otherwise, the following terms shall mean:

3 (1) "Comprehensive psychiatric services", any one, or any combination of
4 two or more, of the following services to persons affected by mental disorders

5 other than intellectual disabilities or developmental disabilities: inpatient,
6 outpatient, day program or other partial hospitalization, emergency, diagnostic,
7 treatment, liaison, follow-up, consultation, education, rehabilitation, prevention,
8 screening, transitional living, medical prevention and treatment for alcohol abuse,
9 and medical prevention and treatment for drug abuse;

10 (2) "Council", the Missouri advisory council for comprehensive psychiatric
11 services;

12 (3) "Court", the court which has jurisdiction over the respondent or
13 patient;

14 (4) "Division", the division of comprehensive psychiatric services of the
15 department of mental health;

16 (5) "Division director", director of the division of comprehensive
17 psychiatric services of the department of mental health, or his designee;

18 (6) **"Gravely disabled", a condition in which a person, as a result**
19 **of mental illness or disorder, causes a substantial risk that serious**
20 **physical harm to a person will result or is occurring because of an**
21 **impairment in his or her capacity to make decisions with respect to his**
22 **or her hospitalization and need for treatment as evidenced by his or**
23 **her current mental disorder or mental illness which results in an**
24 **inability to provide for his or her own basic necessities of food,**
25 **clothing, shelter, safety, or medical care or his or her inability to**
26 **provide for his or her own mental health care which may result in a**
27 **substantial risk of serious physical harm. Evidence of that substantial**
28 **risk may also include information about patterns of behavior that**
29 **historically have resulted in serious harm to the person previously**
30 **taking place because of a mental disorder or mental illness which**
31 **resulted in his or her inability to provide for his or her basic**
32 **necessities of food, clothing, shelter, safety, or medical or mental health**
33 **care;**

34 (7) "Head of mental health facility", superintendent or other chief
35 administrative officer of a mental health facility, or his designee;

36 [(7)] (8) "Judicial day", any Monday, Tuesday, Wednesday, Thursday or
37 Friday when the court is open for business, but excluding Saturdays, Sundays
38 and legal holidays;

39 [(8)] (9) "Licensed physician", a physician licensed pursuant to the
40 provisions of chapter 334 or a person authorized to practice medicine in this state

41 pursuant to the provisions of section 334.150;

42 **[(9)] (10)** "Licensed professional counselor", a person licensed as a
43 professional counselor under chapter 337 and with a minimum of one year
44 training or experience in providing psychiatric care, treatment, or services in a
45 psychiatric setting to individuals suffering from a mental disorder;

46 **[(10)] (11)** "Likelihood of serious harm" means any one or more of the
47 following but does not require actual physical injury to have occurred:

48 (a) A substantial risk that serious physical harm will be inflicted by a
49 person upon his own person, as evidenced by recent threats, including verbal
50 threats, or attempts to commit suicide or inflict physical harm on
51 himself. Evidence of substantial risk may also include information about
52 patterns of behavior that historically have resulted in serious harm previously
53 being inflicted by a person upon himself; **or**

54 (b) **[A** substantial risk that serious physical harm to a person will result
55 or is occurring because of an impairment in his capacity to make decisions with
56 respect to his hospitalization and need for treatment as evidenced by his current
57 mental disorder or mental illness which results in an inability to provide for his
58 own basic necessities of food, clothing, shelter, safety or medical care or his
59 inability to provide for his own mental health care which may result in a
60 substantial risk of serious physical harm. Evidence of that substantial risk may
61 also include information about patterns of behavior that historically have resulted
62 in serious harm to the person previously taking place because of a mental
63 disorder or mental illness which resulted in his inability to provide for his basic
64 necessities of food, clothing, shelter, safety or medical or mental health care; **or**

65 **(c)]** A substantial risk that serious physical harm will be inflicted by a
66 person upon another as evidenced by recent overt acts, behavior or threats,
67 including verbal threats, which have caused such harm or which would place a
68 reasonable person in reasonable fear of sustaining such harm. Evidence of that
69 substantial risk may also include information about patterns of behavior that
70 historically have resulted in physical harm previously being inflicted by a person
71 upon another person;

72 **[(11)] (12)** "Mental health coordinator", a mental health professional who
73 has knowledge of the laws relating to hospital admissions and civil commitment
74 and who is authorized by the director of the department, or his designee, to serve
75 a designated geographic area or mental health facility and who has the powers,
76 duties and responsibilities provided in this chapter;

77 [(12)] **(13)** "Mental health facility", any residential facility, public or
78 private, or any public or private hospital, which can provide evaluation,
79 treatment and, inpatient care to persons suffering from a mental disorder or
80 mental illness and which is recognized as such by the department or any
81 outpatient treatment program certified by the department of mental health. No
82 correctional institution or facility, jail, regional center or developmental disability
83 facility shall be a mental health facility within the meaning of this chapter;

84 [(13)] **(14)** "Mental health professional", a psychiatrist, resident in
85 psychiatry, psychologist, psychiatric nurse, licensed professional counselor, or
86 psychiatric social worker;

87 [(14)] **(15)** "Mental health program", any public or private residential
88 facility, public or private hospital, public or private specialized service or public
89 or private day program that can provide care, treatment, rehabilitation or
90 services, either through its own staff or through contracted providers, in an
91 inpatient or outpatient setting to persons with a mental disorder or mental illness
92 or with a diagnosis of alcohol abuse or drug abuse which is recognized as such by
93 the department. No correctional institution or facility or jail may be a mental
94 health program within the meaning of this chapter;

95 [(15)] **(16)** "Ninety-six hours" shall be construed and computed to exclude
96 Saturdays, Sundays and legal holidays which are observed either by the court or
97 by the mental health facility where the respondent is detained;

98 [(16)] **(17)** "Peace officer", a sheriff, deputy sheriff, county or municipal
99 police officer or highway patrolman;

100 [(17)] **(18)** "Psychiatric nurse", a registered professional nurse who is
101 licensed under chapter 335 and who has had at least two years of experience as
102 a registered professional nurse in providing psychiatric nursing treatment to
103 individuals suffering from mental disorders;

104 [(18)] **(19)** "Psychiatric social worker", a person with a master's or
105 further advanced degree from an accredited school of social work, practicing
106 pursuant to chapter 337, and with a minimum of one year training or experience
107 in providing psychiatric care, treatment or services in a psychiatric setting to
108 individuals suffering from a mental disorder;

109 [(19)] **(20)** "Psychiatrist", a licensed physician who in addition has
110 successfully completed a training program in psychiatry approved by the
111 American Medical Association, the American Osteopathic Association or other
112 training program certified as equivalent by the department;

113 [(20)] (21) "Psychologist", a person licensed to practice psychology under
114 chapter 337 with a minimum of one year training or experience in providing
115 treatment or services to mentally disordered or mentally ill individuals;

116 [(21)] (22) "Resident in psychiatry", a licensed physician who is in a
117 training program in psychiatry approved by the American Medical Association,
118 the American Osteopathic Association or other training program certified as
119 equivalent by the department;

120 [(22)] (23) "Respondent", an individual against whom involuntary civil
121 detention proceedings are instituted pursuant to this chapter;

122 [(23)] (24) "Treatment", any effort to accomplish a significant change in
123 the mental or emotional conditions or the behavior of the patient consistent with
124 generally recognized principles or standards in the mental health professions.

632.150. 1. A voluntary patient who has applied for his own admission
2 may request his release either orally or in writing to the head of the mental
3 health facility and shall be released immediately; except, that if the head of the
4 facility determines that he is mentally disordered and, as a result, presents a
5 likelihood of serious physical harm to himself or others **or is gravely disabled**,
6 the head of the facility may refuse the request for release.

7 2. If the request for release is refused, the mental health facility may
8 detain the person only if a mental health coordinator, a licensed physician, a
9 registered professional nurse designated by the facility and approved by the
10 department, a mental health professional or a peace officer completes an
11 application for detention for evaluation and treatment to begin the involuntary
12 detention of the patient under this chapter.

632.155. 1. A voluntary patient who is a minor and who requests his
2 release either orally or in writing, or whose release is requested in writing to the
3 head of the facility by his parent, spouse, adult next of kin, or person entitled to
4 his custody, shall be released immediately; except, that if the patient was
5 admitted on the application of another person, his release shall be conditioned
6 upon receiving the consent of the person applying for his admission.

7 2. If the head of the mental health facility determines that the minor is
8 mentally disordered and, as a result, presents a likelihood of serious physical
9 harm to himself or others **or is gravely disabled**, the head of the facility may
10 refuse the release. The mental health facility may detain the minor only if a
11 mental health coordinator, a licensed physician, a mental health professional or
12 a registered professional nurse designated by the facility and approved by the

13 department completes an application for detention for evaluation and treatment
14 to begin the involuntary detention of the minor under this chapter or, if
15 appropriate, the minor is detained in the facility under the provisions of chapter
16 211.

632.300. 1. When a mental health coordinator receives information
2 alleging that a person, as the result of a mental disorder, presents a likelihood
3 of serious harm to himself or others **or is gravely disabled**, he shall:

- 4 (1) Conduct an investigation;
- 5 (2) Evaluate the allegations and the data developed by investigation; and
- 6 (3) Evaluate the reliability and credibility of all sources of information.

7 2. If, as the result of personal observation or investigation, the mental
8 health coordinator has reasonable cause to believe that such person is mentally
9 disordered and, as a result, presents a likelihood of serious harm to himself or
10 others **or is gravely disabled**, the mental health coordinator may file an
11 application with the court having probate jurisdiction pursuant to the provisions
12 of section 632.305; provided, however, that should the mental health coordinator
13 have reasonable cause to believe, as the result of personal observation or
14 investigation, that **he is gravely disabled or that** the likelihood of serious
15 harm by such person to himself or others as a result of a mental disorder is
16 imminent unless the person is immediately taken into custody, the mental health
17 coordinator shall request a peace officer to take or cause such person to be taken
18 into custody and transported to a mental health facility in accordance with the
19 provisions of subsection 3 of section 632.305.

20 3. If the mental health coordinator determines that involuntary
21 commitment is not appropriate, he should inform either the person, his family or
22 friends about those public and private agencies and courts which might be of
23 assistance.

632.305. 1. An application for detention for evaluation and treatment
2 may be executed by any adult person, who need not be an attorney or represented
3 by an attorney, including the mental health coordinator, on a form provided by
4 the court for such purpose, and must allege under oath that the applicant has
5 reason to believe that the respondent is suffering from a mental disorder and
6 presents a likelihood of serious harm to himself or to others **or is gravely**
7 **disabled**. The application must specify the factual information on which such
8 belief is based and should contain the names and addresses of all persons known
9 to the applicant who have knowledge of such facts through personal observation.

10 2. The filing of a written application in court by any adult person, who
11 need not be an attorney or represented by an attorney, including the mental
12 health coordinator, shall authorize the applicant to bring the matter before the
13 court on an ex parte basis to determine whether the respondent should be taken
14 into custody and transported to a mental health facility. The application may be
15 filed in the court having probate jurisdiction in any county where the respondent
16 may be found. If the court finds that there is probable cause, either upon
17 testimony under oath or upon a review of affidavits, to believe that the
18 respondent may be suffering from a mental disorder and presents a likelihood of
19 serious harm to himself or others **or is gravely disabled**, it shall direct a peace
20 officer to take the respondent into custody and transport him to a mental health
21 facility for detention for evaluation and treatment for a period not to exceed
22 ninety-six hours unless further detention and treatment is authorized pursuant
23 to this chapter. Nothing herein shall be construed to prohibit the court, in the
24 exercise of its discretion, from giving the respondent an opportunity to be heard.

25 3. A mental health coordinator may request a peace officer to take or a
26 peace officer may take a person into custody for detention for evaluation and
27 treatment for a period not to exceed ninety-six hours only when such mental
28 health coordinator or peace officer has reasonable cause to believe that such
29 person is suffering from a mental disorder and **is gravely disabled or** that the
30 likelihood of serious harm by such person to himself or others is imminent unless
31 such person is immediately taken into custody. Upon arrival at the mental
32 health facility, the peace officer or mental health coordinator who conveyed such
33 person or caused him to be conveyed shall either present the application for
34 detention for evaluation and treatment upon which the court has issued a finding
35 of probable cause and the respondent was taken into custody or complete an
36 application for initial detention for evaluation and treatment for a period not to
37 exceed ninety-six hours which shall be based upon his own personal observations
38 or investigations and shall contain the information required in subsection 1 of
39 this section.

40 4. If a person presents himself or is presented by others to a mental
41 health facility and a licensed physician, a registered professional nurse or a
42 mental health professional designated by the head of the facility and approved
43 by the department for such purpose has reasonable cause to believe that the
44 person is mentally disordered and **is gravely disabled or** presents an imminent
45 likelihood of serious harm to himself or others unless he is accepted for detention,

46 the licensed physician, the mental health professional or the registered
47 professional nurse designated by the facility and approved by the department
48 may complete an application for detention for evaluation and treatment for a
49 period not to exceed ninety-six hours. The application shall be based on his own
50 personal observations or investigation and shall contain the information required
51 in subsection 1 of this section.

632.325. If the respondent is accepted for evaluation or for evaluation and
2 treatment pursuant to this chapter, he shall be advised, orally and in writing, of
3 the information contained in subdivisions (1) through (11) of this section. The
4 respondent's guardian and, if possible and the respondent consents, a responsible
5 member of his immediate family shall be advised, within eight hours either orally
6 or in writing, of the information contained in subdivisions (1) through (11) of this
7 section. The personnel of the mental health facility to which the respondent is
8 taken or the mental health coordinator shall advise the aforementioned
9 individuals that unless the respondent is released or voluntarily admits himself
10 within ninety-six hours of the initial detention:

11 (1) He may be detained for ninety-six hours from the time of his initial
12 detention to be evaluated and treated;

13 (2) Within the ninety-six hours, the head of the mental health facility or
14 the mental health coordinator may file a petition to have him detained for an
15 additional period not to exceed twenty-one days, after a court hearing;

16 (3) He will be given a judicial hearing within two judicial days after the
17 day the petition for additional detention is filed;

18 (4) An attorney has been appointed who will represent him before and
19 after the hearing and who will be notified as soon as possible; provided, however,
20 that he also has the right to private counsel of his own choosing and at his own
21 expense;

22 (5) He has the right to communicate with counsel at all reasonable times
23 and to have assistance in contacting such counsel;

24 (6) The purpose of the evaluation is to determine whether he meets the
25 criteria for civil detention under this chapter and that anything he says to
26 personnel at the mental health facility may be used in making that
27 determination, may result in involuntary detention proceedings being filed
28 against him and may be used at the court hearing;

29 (7) He has the right to present evidence and to cross-examine witnesses
30 who testify against him at the hearing;

31 (8) During the period prior to being examined by a licensed physician, he
32 may refuse medication unless he presents an imminent likelihood of serious
33 physical injury to himself or others **or is gravely disabled**;

34 (9) He has the right to refuse medication except for lifesaving treatment
35 beginning twenty-four hours prior to the hearing for twenty-one-day detention;

36 (10) He has the right to request that the hearing be held in his county of
37 residence if he is a resident of this state;

38 (11) He has the right to have an interpreter assist him to communicate,
39 at the facility or during the hearing, or both, if he has impaired hearing or does
40 not speak English.

632.330. 1. At the expiration of the ninety-six hour period, the respondent
2 may be detained and treated involuntarily for an additional two judicial days only
3 if the head of the mental health facility or a mental health coordinator either has
4 filed a petition for additional inpatient detention and treatment not to exceed
5 twenty-one days or has filed a petition for outpatient detention and treatment for
6 a period not to exceed one hundred eighty days.

7 2. Within ninety-six hours following initial detention, the head of the
8 facility or the mental health coordinator may file or cause to be filed either a
9 petition for a twenty-one-day inpatient involuntary detention and treatment
10 period or a petition for outpatient detention and treatment for a period not to
11 exceed one hundred eighty days, provided he has reasonable cause to believe that
12 the person is mentally ill and as a result presents a likelihood of serious harm to
13 himself or others **or is gravely disabled**. The court shall serve the petition and
14 list of prospective witnesses for the petitioner upon the respondent and his
15 attorney at least twenty-four hours before the hearing. The head of the facility
16 shall also notify the mental health coordinator if the petition is not filed by the
17 mental health coordinator. The petition shall:

18 (1) Allege that the respondent, by reason of mental illness, presents a
19 likelihood of serious harm to himself or to others **or is gravely disabled**;

20 (2) Allege that the respondent is in need of continued detention and
21 treatment either on an inpatient basis or on an outpatient basis;

22 (3) Allege the specific behavior of the respondent or the facts which
23 support such conclusion;

24 (4) Affirm that attempts were made to provide necessary care, treatment
25 and services in the least restrictive environment to the respondent on a voluntary
26 basis, but either the petitioner believes that the respondent lacks the capacity to

27 voluntarily consent to care, treatment and services or the respondent refuses to
28 voluntarily consent to care, treatment and services such that proceeding with a
29 petition for the respondent's civil detention in the least restrictive environment
30 is necessary;

31 (5) Allege that there will be appropriate support from family, friends, case
32 managers or others during the period of outpatient detention and treatment in
33 the community if such commitment is sought;

34 (6) Specify the mental health program that is appropriate to handle the
35 respondent's condition and that has agreed to accept the respondent;

36 (7) Specify the range of care, treatment and services that shall be
37 provided to the respondent if the petition for further detention is sustained by the
38 court;

39 (8) Name the entities that have agreed to fund and provide the specified
40 interventions; and

41 (9) Be verified by a psychiatrist or by a licensed physician and a mental
42 health professional who have examined the respondent.

43 3. The petitioner shall consider whether based on the respondent's
44 condition and treatment history, the respondent meets the criteria in chapter 475,
45 so that appointment of a full or limited guardian or conservator is appropriate for
46 the court to consider, and if deemed so, the petitioner then shall proceed as
47 specified in subsection 4 of this section.

48 4. If the head of the mental health facility, or his designee, or the mental
49 health coordinator believes that the respondent, because of a mental illness or
50 mental disorder, may be incapacitated or disabled as defined in chapter 475, the
51 head of the mental health facility or mental health coordinator shall cause a
52 petition to be filed pursuant to section 475.060 and section 475.061, if applicable,
53 with the court having probate jurisdiction as determined by section 475.035. In
54 addition, if the head of the mental health facility, his designee or the mental
55 health coordinator believes it appropriate, he shall proceed with obtaining an
56 order for the respondent's temporary emergency detention as provided for in
57 section 475.355. Furthermore, the hearing on the petition filed pursuant to
58 chapter 475 shall be conducted pursuant to the requirements of section 475.075
59 and other appropriate sections of chapter 475, and shall be held within two
60 judicial days after termination of the ninety-six-hour civil detention period unless
61 continued for good cause shown. Nothing contained in this subsection shall
62 restrict or prohibit the head of the mental health facility, his designee or the

63 mental health coordinator from proceeding under the appropriate provisions of
64 this chapter if the petition for guardianship or conservatorship is denied.

632.335. 1. The petition for additional inpatient detention and treatment
2 not to exceed twenty-one days or the petition for outpatient detention and
3 treatment not to exceed one hundred eighty days shall be filed with the court
4 having probate jurisdiction. At the time of filing the petition, the court clerk
5 shall set a date and time for the hearing which shall take place within two
6 judicial days of the filing of the petition. The clerk shall promptly notify the
7 respondent, his attorney, the petitioner and the petitioner's attorney of the date
8 and time for the hearing. The court shall not grant continuances except upon a
9 showing of good and sufficient cause. If a continuance is granted, the court, in
10 its discretion, may order the person released pending the hearing upon conditions
11 prescribed by the court. The court may order the continued detention and
12 treatment of the person at a mental health facility pending the continued
13 hearing, and a copy of such order shall be furnished to the facility.

14 2. The hearing shall be conducted in as informal a manner as may be
15 consistent with orderly procedure and in a physical setting not likely to have a
16 harmful effect on the respondent. Due consideration shall be given by the court
17 to holding a hearing at the mental health facility. The respondent shall have the
18 following rights in addition to those specified elsewhere:

- 19 (1) To be represented by an attorney;
- 20 (2) To present evidence on his own behalf;
- 21 (3) To cross-examine witnesses who testify against him;
- 22 (4) To remain silent;
- 23 (5) To view and copy all petitions and reports in the court file of his case;
- 24 (6) To have the hearing open or closed to the public as he elects;
- 25 (7) To be proceeded against according to the rules of evidence applicable
26 to civil judicial proceedings;
- 27 (8) A hearing before a jury if requested by the patient or his attorney.

28 3. The respondent shall be present at the hearing, unless the respondent's
29 physical condition is such that he cannot be present in the courtroom or if the
30 court determines that the respondent's conduct in the courtroom is so disruptive
31 that the proceedings cannot reasonably continue.

32 4. At the conclusion of the hearing, if the court finds, based upon clear
33 and convincing evidence, that respondent, as the result of mental illness, presents
34 a likelihood of serious harm to himself or to others **or is gravely disabled**, and

35 that a mental health program appropriate to handle the respondent's condition
36 has agreed to accept him, the court shall order either that the respondent be
37 detained for inpatient involuntary treatment in the least restrictive environment
38 for a period not to exceed twenty-one days or be detained for outpatient detention
39 and treatment under the supervision of a mental health program in the least
40 restrictive environment for a period not to exceed one hundred eighty days.

632.337. 1. When the court has ordered up to one hundred eighty days
2 of outpatient detention and treatment pursuant to section 632.335 or 632.350 or
3 632.355, and the supervisory mental health program has good cause to believe
4 that immediate detention in a more appropriate least restrictive environment is
5 required because the respondent presents a likelihood of serious harm **or is**
6 **gravely disabled** due to mental illness, the supervisory mental health program
7 may direct that the respondent be detained for up to ninety-six hours at an
8 appropriate mental health program that has agreed to accept the respondent and
9 may authorize the sheriff to detain and transport the respondent to that mental
10 health program. Detention for more than ninety-six hours shall be pursuant to
11 section 632.330.

12 2. Evidence of detention for ninety-six-hour periods during the one
13 hundred eighty-day outpatient detention and treatment may be considered by the
14 court in determining additional periods of detention and treatment.

632.340. 1. Before the expiration of the twenty-one-day inpatient
2 detention and treatment period ordered pursuant to section 632.335, the court
3 may order the respondent to be detained and treated involuntarily for an
4 additional period not to exceed ninety inpatient days or may order the respondent
5 to be detained for outpatient detention and treatment for a period not to exceed
6 one hundred eighty days; provided, that:

7 (1) The respondent is mentally ill and continues to present a likelihood
8 of serious harm to himself or others **or is gravely disabled**; and

9 (2) The court, after a hearing, orders the respondent detained and treated
10 for the additional period.

11 2. If, within seventeen days of the court hearing described in section
12 632.335, the head of the mental health program or the mental health coordinator
13 has reasonable cause to believe that the respondent is mentally ill and as a result
14 presents a likelihood of serious harm to himself or others **or is gravely**
15 **disabled**, and believes that further detention and treatment is necessary, he
16 shall file, or cause to be filed, with the court a petition for ninety days additional

17 detention and treatment or a petition for outpatient detention and treatment for
18 a period not to exceed one hundred eighty days. The court shall immediately set
19 a date and time for a hearing on the petition, which shall take place within four
20 judicial days of the date of the filing of the petition. The court shall serve a copy
21 of the petition and the notice of the date and time of the hearing upon the
22 petitioner, the respondent, and their attorneys as promptly as possible, but not
23 later than two judicial days after the filing of the petition. The petitioner shall
24 also file with the court, for the court to serve upon the respondent's attorney not
25 later than two judicial days after the filing of the petition, a list of the proposed
26 witnesses for the petitioner. The head of the mental health program shall notify
27 the mental health coordinator if the petition is not filed by the mental health
28 coordinator. The petition shall comply with the requirements of section 632.330,
29 and an individualized treatment plan for the respondent shall be attached
30 thereto.

632.350. 1. The hearing for a ninety-day inpatient detention and
2 treatment period or for outpatient detention and treatment for a period not to
3 exceed one hundred eighty days shall be conducted in as informal a manner as
4 may be consistent with orderly procedure and in a physical setting not likely to
5 have a harmful effect on the mental health of the respondent. If a jury trial is
6 not requested, due consideration shall be given by the court to holding a hearing
7 at the mental health program. The hearing shall be held in accordance with the
8 provisions set forth in section 632.335.

9 2. The burden of proof at the hearing shall be by clear and convincing
10 evidence and shall be upon the petitioner.

11 3. If the matter is tried before a jury, the jury shall determine and shall
12 be instructed only upon the issues of whether or not the respondent is mentally
13 ill and, as a result, presents a likelihood of serious harm to himself or others **or**
14 **is gravely disabled**. The remaining procedures for the jury trial shall be as in
15 other civil matters.

16 4. The respondent shall not be required to file an answer or other
17 responsive pleading.

18 5. At the conclusion of the hearing, if the court or jury finds that the
19 respondent, as the result of mental illness, presents a likelihood of serious harm
20 to himself or to others **or is gravely disabled**, and the court finds that a
21 program appropriate to handle the respondent's condition has agreed to accept
22 him, the court shall order the respondent to be detained for involuntary

23 treatment in the least restrictive environment for a period not to exceed ninety
24 days or for outpatient detention and treatment under the supervision of a mental
25 health program in the least restrictive environment for a period not to exceed one
26 hundred eighty days.

632.355. 1. At the expiration of the ninety-day inpatient commitment
2 period ordered by the court pursuant to section 632.350, the respondent may be
3 detained and treated as an involuntarily inpatient for an additional period of
4 time not to exceed one year or such lesser period of time as determined by the
5 court or may be detained for outpatient detention and treatment for a period of
6 time not to exceed one hundred eighty days; provided, that:

7 (1) The respondent is mentally ill and continues to present a likelihood
8 of serious harm to himself or to others **or is gravely disabled**; and

9 (2) The court after a hearing orders the person detained and treated for
10 the additional period.

11 2. Within the ninety-day commitment period, the head of the mental
12 health program or the mental health coordinator may file or cause to be filed, in
13 compliance with the requirements of section 632.330, a petition for a one-year
14 inpatient detention and treatment period or a petition for outpatient detention
15 and treatment for a period not to exceed one hundred eighty days if he has
16 reasonable cause to believe that the respondent is mentally ill and as a result
17 presents a likelihood of serious harm to himself or others **or is gravely**
18 **disabled**, and that further detention and treatment is necessary pursuant to an
19 individualized treatment plan prepared by the program and filed with the
20 court. Procedures specified in sections 632.340, 632.345 and 632.350 shall be
21 followed.

22 3. At the conclusion of the hearing, if the court or jury finds that the
23 respondent, as the result of mental illness, presents a likelihood of serious harm
24 to himself or others **or is gravely disabled**, and the court finds that a program
25 appropriate to handle the respondent's condition has agreed to accept him, the
26 court shall order that the respondent be detained for involuntary treatment in the
27 least restrictive environment for a period not to exceed one year or for outpatient
28 detention and treatment under the supervision of a mental health program in the
29 least restrictive environment for a period not to exceed one hundred eighty days.

632.375. 1. At least once every one hundred eighty days, the head of each
2 mental health program shall have each respondent who is detained at the
3 program for a one-year period under this chapter examined and evaluated to

4 determine if the respondent continues to be mentally ill, and as a result presents
5 a likelihood of serious harm to himself or others **or is gravely disabled**. The
6 court, the mental health coordinator for the region, the respondent and the
7 respondent's attorney shall be provided copies of the report of the examination
8 and evaluation described by this section and the respondent's individualized
9 treatment plan.

10 2. Upon receipt of the report, the court may, upon its own motion, or shall,
11 upon the motion of the respondent, order a hearing to be held as to the need for
12 continued detention and involuntary treatment. At the conclusion of the hearing,
13 the court may order:

14 (1) The discharge of the respondent; or

15 (2) An appropriate least restrictive course of detention and involuntary
16 treatment; or

17 (3) The respondent to be remanded to the mental health program for the
18 unexpired portion of the original commitment order.

632.380. Persons with an intellectual disability or a developmental
2 disability or who are senile or impaired by alcoholism or drug abuse shall not be
3 detained judicially under this chapter, unless they are also mentally ill and as a
4 result present likelihood of serious harm to themselves or to others **or are**
5 **gravely disabled**. Such persons may, however, be committed upon court order
6 under this chapter and the provisions of chapter 475 relating to incapacitated
7 persons, pursuant to chapter 211 relating to juveniles, or may be admitted as
8 voluntary patients under section 632.105 or 632.120.

632.390. 1. The head of a mental health program shall release any person
2 who is involuntarily detained under this chapter when, in his opinion, the person
3 is no longer mentally ill or, although mentally ill, does not present a likelihood
4 of serious harm to himself or others **or is not gravely disabled**, even though
5 the detention period has not expired.

6 2. Whenever the head of a mental health program discharges a person
7 prior to the expiration of the detention order, he shall notify in writing the court
8 and the mental health coordinator.

9 3. Whenever a respondent voluntarily admits himself and the head of a
10 mental health program accepts the admission application submitted by
11 respondent in good faith under section 632.105, the respondent's involuntary
12 detention shall cease, and the head of the program shall notify, in writing, the
13 court and the mental health coordinator.

632.430. 1. Appeals from court orders made under this chapter may be
2 made by the respondent or by the petitioner to the appropriate appellate court
3 pursuant to the rules of civil procedure of the supreme court of Missouri
4 pertaining to appeals. Such appeal shall have priority on the docket of the
5 appellate court and shall be expedited in all respects. The court shall notify the
6 attorney general's office whenever an appeal is filed under this subsection, and
7 the attorney general shall represent the state when it is a party to such appeal.
8 2. A motion to stay any order restricting an individual's liberty may be
9 filed in either the court or the appropriate appellate court. A stay order shall not
10 be granted in any case where the court finds that the person is so mentally ill
11 that **he is gravely disabled or** there is an imminent likelihood of serious
12 physical harm to himself or others if he is not detained or treated pending
13 appeal. Any refusal to grant a stay by the court may be reviewed by the
14 appropriate appellate court on motion.

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Bill

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