As Reported by the House Health Committee

132nd General Assembly

Regular Session

H. B. No. 111

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Representatives Carfagna, Ryan

Cosponsors: Representatives Brenner, Butler, Cupp, Dever, Duffey, Goodman, Hambley, LaTourette, Riedel, Schaffer, Seitz, Stein, Wiggam, Young, Holmes, O'Brien, Bishoff

A BILL

То	amend sections 5122.01 and 5122.10 of the	1
	Revised Code to authorize certain advanced	2
	practice registered nurses to have a person	3
	involuntarily transported to a hospital for a	4
	mental health examination.	<u></u>

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:

Section 1. That sections 5122.01 and 5122.10 of the	6
Revised Code be amended to read as follows:	7
Sec. 5122.01. As used in this chapter and Chapter 5119. of	8
the Revised Code:	9
(A) "Mental illness" means a substantial disorder of	10
thought, mood, perception, orientation, or memory that grossly	11
impairs judgment, behavior, capacity to recognize reality, or	12
ability to meet the ordinary demands of life.	13
(B) "Mentally ill person subject to court order" means a	14
mentally ill person who, because of the person's illness:	15
(1) Represents a substantial risk of physical harm to self	16

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as manifested by evidence of threats of, or attempts at, suicide	17
or serious self-inflicted bodily harm;	18
(2) Represents a substantial risk of physical harm to	19
others as manifested by evidence of recent homicidal or other	20
violent behavior, evidence of recent threats that place another	21
in reasonable fear of violent behavior and serious physical	22
harm, or other evidence of present dangerousness;	23
(3) Represents a substantial and immediate risk of serious	24
physical impairment or injury to self as manifested by evidence	25
that the person is unable to provide for and is not providing	26
for the person's basic physical needs because of the person's	27
mental illness and that appropriate provision for those needs	28
cannot be made immediately available in the community;	29
(4) Would benefit from treatment for the person's mental	30
illness and is in need of such treatment as manifested by	31
evidence of behavior that creates a grave and imminent risk to	32
substantial rights of others or the person;	33
(5)(a) Would benefit from treatment as manifested by	34
evidence of behavior that indicates all of the following:	35
(i) The person is unlikely to survive safely in the	36
community without supervision, based on a clinical	37
determination.	38
(ii) The person has a history of lack of compliance with	39
treatment for mental illness and one of the following applies:	40
(I) At least twice within the thirty-six months prior to	41
the filing of an affidavit seeking court-ordered treatment of	42
the person under section 5122.111 of the Revised Code, the lack	43
of compliance has been a significant factor in necessitating	44
hospitalization in a hospital or receipt of services in a	45

forensic or other mental health unit of a correctional facility,
provided that the thirty-six-month period shall be extended by
the length of any hospitalization or incarceration of the person
that occurred within the thirty-six-month period.

- (II) Within the forty-eight months prior to the filing of an affidavit seeking court-ordered treatment of the person under section 5122.111 of the Revised Code, the lack of compliance resulted in one or more acts of serious violent behavior toward self or others or threats of, or attempts at, serious physical harm to self or others, provided that the forty-eight-month period shall be extended by the length of any hospitalization or incarceration of the person that occurred within the forty-eight-month period.
- (iii) The person, as a result of the person's mental
 illness, is unlikely to voluntarily participate in necessary
 treatment.
- (iv) In view of the person's treatment history and current behavior, the person is in need of treatment in order to prevent a relapse or deterioration that would be likely to result in substantial risk of serious harm to the person or others.
- (b) An individual who meets only the criteria described in division (B)(5)(a) of this section is not subject to hospitalization.
- (C) (1) "Patient" means, subject to division (C) (2) of this 69 section, a person who is admitted either voluntarily or 70 involuntarily to a hospital or other place under section 71 2945.39, 2945.40, 2945.401, or 2945.402 of the Revised Code 72 subsequent to a finding of not guilty by reason of insanity or 73 incompetence to stand trial or under this chapter, who is under 74

observation or receiving treatment in such place.

sections 2945.37 to 2945.402 of the Revised Code.

- (2) "Patient" does not include a person admitted to a 76 hospital or other place under section 2945.39, 2945.40, 77 2945.401, or 2945.402 of the Revised Code to the extent that the 78 reference in this chapter to patient, or the context in which 79 the reference occurs, is in conflict with any provision of 80
- (D) "Licensed physician" means a person licensed under the 82 laws of this state to practice medicine or a medical officer of 83

the government of the United States while in this state in the

performance of the person's official duties.

- (E) "Psychiatrist" means a licensed physician who has satisfactorily completed a residency training program in psychiatry, as approved by the residency review committee of the American medical association, the committee on post-graduate education of the American osteopathic association, or the American osteopathic board of neurology and psychiatry, or who on July 1, 1989, has been recognized as a psychiatrist by the Ohio state medical association or the Ohio osteopathic association on the basis of formal training and five or more years of medical practice limited to psychiatry.
- (F) "Hospital" means a hospital or inpatient unit licensed by the department of mental health and addiction services under section 5119.33 of the Revised Code, and any institution, hospital, or other place established, controlled, or supervised by the department under Chapter 5119. of the Revised Code.
- (G) "Public hospital" means a facility that is tax- 101 supported and under the jurisdiction of the department of mental 102 health and addiction services. 103

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- (H) "Community mental health services provider" means an 104 agency, association, corporation, individual, or program that 105 provides community mental health services that are certified by 106 the director of mental health and addiction services under 107 section 5119.36 of the Revised Code. 108
- (I) "Licensed clinical psychologist" means a person who 109 holds a current $_{L}$ valid psychologist license issued under section 110 4732.12 of the Revised Code, and in addition, meets the 111 educational requirements set forth in division (B) of section 112 4732.10 of the Revised Code and has a minimum of two years' 113 full-time professional experience, or the equivalent as 114 determined by rule of the state board of psychology, at least 115 one year of which shall be a predoctoral internship, in clinical 116 psychological work in a public or private hospital or clinic or 117 in private practice, diagnosing and treating problems of mental 118 illness or intellectual disability under the supervision of a 119 psychologist who is licensed or who holds a diploma issued by 120 the American board of professional psychology, or whose 121 qualifications are substantially similar to those required for 122 licensure by the state board of psychology when the supervision 123 has occurred prior to enactment of laws governing the practice 124 of psychology. 125
- (J) "Health officer" means any public health physician; public health nurse; or other person authorized or designated by 127 a city or general health district or a board of alcohol, drug addiction, and mental health services to perform the duties of a health officer under this chapter.
- (K) "Chief clinical officer" means the medical director of 131 a hospital, community mental health services provider, or board 132 of alcohol, drug addiction, and mental health services, or, if 133

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there is no medical director, the licensed physician responsible	134
for the treatment provided by a hospital or community mental	135
health services provider. The chief clinical officer may	136
delegate to the attending physician responsible for a patient's	137
care the duties imposed on the chief clinical officer by this	138
chapter. Within In the case of a community mental health	139
services provider, the chief clinical officer shall be	140
designated by the governing body of the services provider and	141
shall be a licensed physician or licensed clinical psychologist	142
who supervises diagnostic and treatment services. A licensed	143
physician or licensed clinical psychologist designated by the	144
chief clinical officer may perform the duties and accept the	145
responsibilities of the chief clinical officer in the chief	146
clinical officer's absence.	147

- (L) "Working day" or "court day" means Monday, Tuesday, Wednesday, Thursday, and Friday, except when such day is a holiday.
- (M) "Indigent" means unable without deprivation of satisfaction of basic needs to provide for the payment of an attorney and other necessary expenses of legal representation, including expert testimony.
- (N) "Respondent" means the person whose detention, commitment, hospitalization, continued hospitalization or commitment, or discharge is being sought in any proceeding under this chapter.
- (O) "Ohio protection and advocacy system" has the same
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 meaning as in section 5123.60 of the Revised Code.
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- (P) "Independent expert evaluation" means an evaluation 161 conducted by a licensed clinical psychologist, psychiatrist, or 162

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filed.

When the residence of a person is disputed, the matter of 192 residence shall be referred to the department of mental health 193 and addiction services for investigation and determination. 194 Residence shall not be a basis for a board's denying services to 195 any person present in the board's service district, and the 196 board shall provide services for a person whose residence is in 197 dispute while residence is being determined and for a person in 198 an emergency situation. 199

- (T) "Admission" to a hospital or other place means that a 200 patient is accepted for and stays at least one night at the 201 hospital or other place.
- (U) "Prosecutor" means the prosecuting attorney, village 203 solicitor, city director of law, or similar chief legal officer 204 who prosecuted a criminal case in which a person was found not 205 guilty by reason of insanity, who would have had the authority 206 to prosecute a criminal case against a person if the person had 207 not been found incompetent to stand trial, or who prosecuted a 208 case in which a person was found guilty. 209
- (V)(1) "Treatment plan" means a written statement of reasonable objectives and goals for an individual established by the treatment team, with specific criteria to evaluate progress towards achieving those objectives.
- (2) The active participation of the patient in 214 establishing the objectives and goals shall be documented. The 215 treatment plan shall be based on patient needs and include 216 services to be provided to the patient while the patient is 217 hospitalized, after the patient is discharged, or in an 218 outpatient setting. The treatment plan shall address services to 219

Page 9 H. B. No. 111 As Reported by the House Health Committee be provided. In the establishment of the treatment plan, 220 consideration should be given to the availability of services, 221 which may include but are not limited to all of the following: 222 223 (a) Community psychiatric supportive treatment; 224 (b) Assertive community treatment; (c) Medications; 225 226 (d) Individual or group therapy; (e) Peer support services; 227 (f) Financial services; 228 (g) Housing or supervised living services; 229 (h) Alcohol or substance abuse treatment; 230 (i) Any other services prescribed to treat the patient's 231 mental illness and to either assist the patient in living and 232 functioning in the community or to help prevent a relapse or a 233 deterioration of the patient's current condition. 234 (3) If the person subject to the treatment plan has 235 executed an advanced directive for mental health treatment, the 236 treatment team shall consider any directions included in such 237 advanced directive in developing the treatment plan. 238 (W) "Community control sanction" has the same meaning as 239 in section 2929.01 of the Revised Code. 240 (X) "Post-release control sanction" has the same meaning 241 as in section 2967.01 of the Revised Code. 242 (Y) "Local correctional facility" has the same meaning as 243 in section 2903.13 of the Revised Code. 244

(Z) "Clinical nurse specialist" and "certified nurse

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practitioner" have the same meanings as in section 4723.01 of	246
the Revised Code.	247
Sec. 5122.10. (A) (1) Any psychiatrist, licensed clinical	248
psychologist, licensed physician, health officer, parole	249
officer, police officer, or sheriff of the following who has	250
reason to believe that a person is a mentally ill person subject	251
to court order and represents a substantial risk of physical	252
harm to self or others if allowed to remain at liberty pending	253
examination may take a the person into custody, or the chief of	254
the adult parole authority or a parole or probation officer with	255
the approval of the chief of the authority may take a parolee,	256
an offender under a community control sanction or a post-release	257
control sanction, or an offender under transitional control into	258
custody and may immediately transport the parolee, offender on	259
community control or post release control, or offender under	260
transitional control person to a hospital or, notwithstanding	261
section 5119.33 of the Revised Code, to a general hospital not	262
licensed by the department of mental health and addiction	263
services where the parolee, offender on community control or	264
post-release control, or offender under transitional control	265
person_may be held for the period prescribed in this section, if	266
the psychiatrist, licensed clinical psychologist, licensed	267
physician, health officer, parole officer, police officer, or	268
sheriff has reason to believe that the person is a mentally ill	269
person subject to court order under division (B) of section	270
5122.01 of the Revised Code, and represents a substantial risk	271
of physical harm to self or others if allowed to remain at	272
liberty pending examination:	273
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(a) A psychiatrist;	274
(b) A licensed physician;	275

(c) A licensed clinical psychologist;	276
(d) A clinical nurse specialist who is certified as a	277
psychiatric-mental health CNS by the American nurses	278
credentialing center or holds a similar certification from a	279
national certifying organization approved by the board of	280
nursing under section 4723.46 of the Revised Code;	281
(e) A certified nurse practitioner who is certified as a	282
psychiatric-mental health NP by the American nurses	283
credentialing center or holds a similar certification from a	284
national certifying organization approved by the board of	285
nursing under section 4723.46 of the Revised Code;	286
(f) A health officer;	287
(g) A parole officer;	288
(h) A police officer;	289
(i) A sheriff.	290
(2) If the chief of the adult parole authority or a parole_	291
or probation officer with the approval of the chief of the	292
authority has reason to believe that a parolee, an offender	293
under a community control sanction or post-release control	294
sanction, or an offender under transitional control is a	295
mentally ill person subject to court order and represents a	296
substantial risk of physical harm to self or others if allowed	297
to remain at liberty pending examination, the chief or officer	298
may take the parolee or offender into custody and may	299
immediately transport the parolee or offender to a hospital or,	300
notwithstanding section 5119.33 of the Revised Code, to a	301
general hospital not licensed by the department of mental health	302
and addiction services where the parolee or offender may be held	303
for the period prescribed in this section.	304

(B) A written statement shall be given to such the	305
hospital by the transporting psychiatrist, licensed clinical	306
psychologist, licensed physician, health officer, parole-	307
officer, police officer, chief of the adult parole authority,	308
parole or probation officer, or sheriff stating individual	309
authorized under division (A)(1) or (2) of this section to	310
transport the person. The statement shall specify the	311
circumstances under which such person was taken into custody and	312
the reasons for the psychiatrist's, licensed clinical	313
psychologist's, licensed physician's, health officer's, parole-	314
officer's, police officer's, chief of the adult parole-	315
authority's, parole or probation officer's, or sheriff's belief	316
that the person is a mentally ill person subject to court order	317
and represents a substantial risk of physical harm to self or	318
others if allowed to remain at liberty pending examination. This	319
statement shall be made available to the respondent or the	320
respondent's attorney upon request of either.	321
(C) Every reasonable and appropriate effort shall be made	322
to take persons into custody in the least conspicuous manner	323
possible. A person taking the respondent into custody pursuant	324
to this section shall explain to the respondent: the name and	325
professional designation and affiliation of the person taking	326
the respondent into custody; that the custody-taking is not a	327
criminal arrest; and that the person is being taken for	328
examination by mental health professionals at a specified mental	329
health facility identified by name.	330
(D) If a person taken into custody under this section is	331
transported to a general hospital, the general hospital may	332
admit the person, or provide care and treatment for the person,	333
or both, notwithstanding section 5119.33 of the Revised Code,	334

but by the end of twenty-four hours after arrival at the general

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hospital, the person shall be transferred to a hospital as defined in section 5122.01 of the Revised Code.

(E) A person transported or transferred to a hospital or	338
community mental health services provider under this section	339
shall be examined by the staff of the hospital or services	340
provider within twenty-four hours after arrival at the hospital	341
or services provider. If to conduct the examination requires	342
that the person remain overnight, the hospital or services	343
provider shall admit the person in an unclassified status until	344
making a disposition under this section. After the examination,	345
if the chief clinical officer of the hospital or services	346
provider believes that the person is not a mentally ill person	347
subject to court order, the chief clinical officer shall release	348
or discharge the person immediately unless a court has issued a	349
temporary order of detention applicable to the person under	350
section 5122.11 of the Revised Code. After the examination, if	351
the chief clinical officer believes that the person is a	352
mentally ill person subject to court order, the chief clinical	353
officer may detain the person for not more than three court days	354
following the day of the examination and during such period	355
admit the person as a voluntary patient under section 5122.02 of	356
the Revised Code or file an affidavit under section 5122.11 of	357
the Revised Code. If neither action is taken and a court has not	358
otherwise issued a temporary order of detention applicable to	359
the person under section 5122.11 of the Revised Code, the chief	360
clinical officer shall discharge the person at the end of the	361
three-day period unless the person has been sentenced to the	362
department of rehabilitation and correction and has not been	363
released from the person's sentence, in which case the person	364
shall be returned to that department.	365

Section 2. That existing sections 5122.01 and 5122.10 of

the Revised Code are hereby repealed.