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JUDICIARY

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STATE OF MAINE
HOUSE OF REPRESENTATIVES
127TH LEGISLATURE
FIRST REGULAR SESSION

COMMITTEE AMENDMENT " " to H.P. 783, L.D. 1145, Bill, "An Act To Improve Maine's Involuntary Commitment Processes"

Amend the bill in section 1 in subsection 4 in paragraph D in the first line (page 1, line 13 in L.D.) by striking out the following: "a recognized form of" and inserting the following: 'a currently recognized standard of'

Amend the bill in section 1 in subsection 4 by striking out all of paragraph E (page 1, lines 16 to 19 in L.D.) and inserting the following:

'E. For purposes of evaluation for emergency involuntary treatment, the medical practitioner considers available history and information from other sources, including, but not limited to, family members, that are considered reliable by the examiner; and'

Amend the bill by inserting after section 4 the following:

'Sec. 5. 34-B MRSA §3863, sub-§7-A is enacted to read:

7-A. Post-admission discharge. If it is necessary to discharge a person because findings required for admission under subsection 2 are not certified in a 2nd opinion by a staff physician or licensed clinical psychologist after examination in accordance with subsection 7, the staff physician or licensed clinical psychologist shall record the discharge on the written application, which must contain a statement that the findings required for the person's admission specified under subsection 2 were not met.'

Amend the bill in section 7 by striking out all of paragraph E (page 2, line 36 in L.D.) and inserting the following:

'E. The person has capacity to make an informed decision for informal voluntary admission, agrees to informal voluntary admission and the chief administrative officer of the hospital determines that informal voluntary admission is suitable.'

Amend the bill by relettering or renumbering any nonconsecutive Part letter or section number to read consecutively.

COMMITTEE AMENDMENT

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SUMMARY

This amendment clarifies the terminology used to describe the emergency treatment to be involuntarily provided to reflect that the treatment must be a currently recognized standard of treatment.

This amendment clarifies that the sources of available history and other information may include family members without implying family members are always a reliable source.

This amendment requires that when a physician or clinical psychologist has evaluated a person for the purpose of providing a 2nd opinion on whether the person meets the criteria for emergency admission to a psychiatric hospital and determines that the person does not meet the criteria, the physician or clinical psychologist must record the discharge upon the written application for emergency admission. The application must contain a statement that the person does not satisfy the criteria for emergency admission.

This amendment clarifies the standard for a person's consent to informal voluntary admission once the involuntary commitment process has started.

FISCAL NOTE REQUIRED

(See attached)