

**MIDDLE TENNESSEE MENTAL HEALTH INSTITUTE
SOCIAL WORK POLICY/PROCEDURE MANUAL**

**POLICY TITLE: MANDATORY OUTPATIENT TREATMENT (MOT)
GUIDELINES FOR REGIONAL MENTAL HEALTH
INSTITUTES**

A. CIVIL MOT

The following procedures apply to patients discharged under the Mandatory Outpatient Treatment statute (TCA 33-6-201 et. seq.). To be considered for discharge under this statute, the individual must be hospitalized under TCA 33-6-104 or 33-7-303(c) and must meet the following statutory criteria:

1. The patient is mentally ill or is suffering a mental illness in remission, and
2. The patient's condition resulting from mental illness is likely to deteriorate rapidly to the point that the patient will pose a likelihood of serious harm as defined in TCA 33-6-104 unless treatment is continued, and
3. The patient is likely to participate in outpatient treatment with a legally obligation to do so, and
4. The patient is not likely to participate in outpatient treatment unless legally obligated to do so, and
5. Mandatory outpatient treatment is a suitable, less drastic alternative to commitment.

B. MOT PLAN DEVELOPMENT

The MOT Plan must be approved by both the hospital and the outpatient treating professional. Hospital staff will:

1. Ensure that the criteria described in the statute are met.
2. Involve the outpatient provider in the consideration of the patient for MOT.
3. Ensure a process that involves the patient treating professional in plan development according to a schedule so that unnecessary delays in discharge can be avoided.

4. Inform the patient of the MOT discharge decision and, to the extent appropriate, encourage patient participation in MOT plan development.
5. Ensure that the MOT plan is signed by the appropriate inpatient and outpatient treating professionals.
6. Enter in the patient's record the basis for the decision to discharge under mandatory outpatient treatment.

C. HOSPITAL STAFF RESPONSIBILITIES

After the MOT plan has been developed and signed by the treating professionals (and the individual being discharged, if willing), appropriate hospital staff shall:

1. Notify the committing court of the individual's discharge under MOT.
2. Send copies of the notice and the MOT plan to the outpatient treating professional.
3. File the MOT plan in the patient's record.
4. Give a copy of the MOT plan to the patient.

D. JUDICIAL REVIEW OF MOT PLAN

If, within 48 hours of being advised of eligibility for release under mandatory outpatient treatment, the patient requests judicial review of the treatment plan, the hospital will notify the court where the hospital is located that has the same jurisdiction as the committing court.

The hearing is held within seven days of receipt of the notification. The court hearing is to determine whether the MOT plan is medically appropriate and legally permissible. The court shall either approve the MOT plan or approve the plan as modified by the releasing facility and the outpatient treating professional to correct deficiencies found by the court. The discharge decision is solely the responsibility of the hospital, unless discharge is subject to judicial review of release.

If a patient is committed under TCA 33-6-104 by the criminal court with a judicial review requirement under TCA 33-6-110, the court has the discharge decision authority.

E. **READMISSION OF MOT PATIENT – EMERGENCY COMMITMENT**

If an individual discharged under mandatory outpatient treatment is readmitted to a hospital on an emergency commitment (TCA 33-6-103) before the MOT obligation is terminated, the hospital or outpatient treating professional should take immediate steps to hold a non-compliance hearing.

The court can then order the client to be readmitted under the original TCA 33-6-104 court order and the TCA 33-6-103 should be dismissed.

IT IS IMPORTANT THAT THE MOT STATUS BE KNOWN AT THE TIME OF READMISSION, EITHER THROUGH CRISIS SERVICE, CASE MANAGEMENT OR BHO MONITORING, TO ASSURE HOSPITAL STAFF REQUEST A HEARING TO REINSTATE THE TCA 33—104 STATUS OF THE INDIVIDUAL.

UNDER NO CIRCUMSTANCES SHOULD THE INDIVIDUAL BE CONVERTED TO TCA 33-6-101 (VOLUNTARY) STATUS PRIOR TO THE NON-COMPLIANCE HEARING.

F. **READMISSION – NON-COMPLIANCE**

If the court orders an individual readmitted to the hospital following an affidavit of non-compliance, the hospital will:

1. Request a hearing within 72 hours of admission.
2. If an affidavit on non-compliance has been filed and another recommitment procedure, TCA 33-6-103 or 33-6-104 has also been initiated, ensure that the latter procedure is dropped.
3. Assess whether criteria are met for continuation of MOT obligation upon discharge.

G. **MOT DISCHARGE FOLLOWING FINDING OF NGRI**

If the individual has been admitted for 60-90 day evaluation following a finding of NGRI, the hospital will:

1. Assess patient for commitment to involuntary hospitalization under TCA 33-6-104 or for MOT under TCA 33-7-303(b).
2. If the individual is committed involuntary under TCA 33-6-104, ensure discharge and MOT planning according to guidelines as stated under Civil MOT.

If the court does not commit the person under TCA 33-6-104 and the court determines that the person's condition resulting from mental illness is likely to deteriorate rapidly to the point that the patient will pose a substantial likelihood of serious harm as defined in TCA 33-6-104(a) unless treatment is continued, the court may order the person to participate in outpatient treatment under TCA 33-7-303(b). This obligation continues until terminated by the court.

The hospital will:

1. Ensure timely completion of MOT plan.
2. Ensure that the outpatient treating professional to whom the patient will be referred is involved in the development of the MOT treatment plan.
3. Notify the District Attorney for filing of MOT.
4. Notify the patient and document in patient's chart the basis for the MOT decision and recommendation to the court.
5. Comply with TDMHMR forensic standards.

After the MOT plan has been developed and signed by inpatient and outpatient treating professionals, (and the individual being discharged, if willing), appropriate hospital staff shall:

1. Testify in court, if called, on the MOT plan.
2. Notify the court of the individual's discharge under Forensic MOT.
3. Send copies of the notice and the MOT plan to the outpatient treating professional.
4. File the MOT plan in the patient's record.
5. Give a copy of the MOT plan to the patient.