

2013 MI&D Group

Problems with Current Process

- insufficient time, in some cases, of the Minnesota Security Hospital to make complete recommendations to the District Court before it makes its final determination;
- the need for full administrative hearings by the Special Review Board even when the petition for relief (transfer, provisional discharge or discharge) is uncontested;
- the lack of periodic review of persons civilly committed as mentally ill and dangerous;
- lack of qualified and ongoing legal defense counsel for the person civilly committed as mentally ill and dangerous;
- the limited experience of some judges who infrequently handle mentally ill and dangerous civil commitment cases;
- some patients' inability to meet standardized criteria to be considered for less restrictive settings;
- the failure of the state and counties to develop and implement a range of appropriate community placement and service options;
- timeliness of reviews of Special Review Board decisions by the three judge panel;
- the lack of alternatives to the mentally ill and dangerous commitment; and
- differences between mentally ill and mentally ill and dangerous commitments in transfer and discharge options and continuing court jurisdiction.

Recommendations

- Authorize DHS, through the Minnesota Security Hospital, to submit an addendum to the 60 day report if the court directs. Amend Minnesota Statute 253B.18, subd. 2(b) to allow the District Court to have the discretion to continue the final determination hearing beyond 60 days absent agreement by both parties.
- Amend Minnesota Statute 253B.18, subd. 5 to allow for an expedited process in uncontested cases and authorize/direct DHS to develop and implement an expedited process in uncontested cases for petitions to the Special Review Board for transfer, provisional discharge or discharge. This would be a paper review.
- Recommend that DHS offer increased resources to State Operated Forensic Services to further expand person-center planning/treatment to reflect individual treatment needs.
- Recommend that DHS, in consultation with the Court Administrator, develop a training module of continuing education requirements particular to the courts and attorneys who practice in the area of civil commitment.
- Request the Court Administrator take whatever means necessary to enforce the Special Rules of Procedure Governing Proceedings under the Minnesota Commitment and Treatment Act, Rule 9, to ensure representation throughout the duration of the civil commitment.

Recommendations

- Direct DHS to devote considerable resources and efforts towards the establishment of community placement options for persons civilly committed as mentally ill and dangerous. These options should optimize both the person's recovery and community safety.
- Direct DHS to develop and implement an education campaign, with input from counties, advocacy organizations, and other stakeholders to promote best practices for provisional discharge documents and educate stakeholders on the roles and responsibilities of parties regarding, including but not limited to, the development, implementation and amendment to the provisional discharge documents and practices.
- Special Review Board decisions should continue to be reviewed by the three judge panel. Additional panels and judges should be appointed so that the panels can process the reviews in a more timely manner.
- Direct DHS to change State Operated Services Policy 10020 to allow the Commissioner to reject an unfavorable recommendation from the Special Review Board.
- Establish a stakeholder group to review the mentally ill and dangerous definition, discharge criteria, and the constitutionality of the mentally ill and dangerous commitment being of indeterminate length.

Recommendations that Passed in 2015

- Amend Minnesota Statute 253B.18, subd. 5 to require that each person civilly committed as mentally ill and dangerous have a review by the Special Review Board at least once every three years.
- Amend Minnesota Statute 253B.18, subd. 4c to allow the Special Review Board to have the additional responsibility of reviewing the barriers or obstacles to a patient progressing in treatment.
- Amend Minnesota Statute 253B.18, subd. 4c to require that the Special Review Board submit an annual report to the Department of Human Services which includes trends in barriers or obstacles in cases that have come before them for review.

Workgroups

Workgroups should take into consideration these recommendations