

CRITERIA	Is mentally ill and, because of the illness, is likely to injure self or others if not immediately detained. <i>Comment: Courts have stated that “likely to injure self” includes situations of “grave disability,” but since the law does not state this clearly, this part of the law is being used much less often.</i>	
Who can initiate?	 Law enforcement officer	 ▪ Accredited officer or agent of the <u>Department of Behavioral Health of D.C. (DBH)</u>. ▪ Physician, qualified psychologist, or qualified nurse practitioner treating the proposed patient
How?	Have reason to believe that the person meets the criteria.	
What do they initiate?	May take the person into custody and transport them to a public or private hospital, or to DBH.	
Where does the proposed patient go?	To a public or private hospital, or to DBH.	
What’s the time limit for the response?	Not specified.	
What happens?	An on-duty psychiatrist, qualified physician, or qualified psychologist will examine the person and determine whether they meet criteria for emergency observation and diagnosis. The person may be treated if they provide informed consent or have been deemed incapacitated and consent has been given by a <u>legal surrogate</u> .	
What’s next?	If the examining professional determines that the person meets the criteria, the administrator of a private hospital or facility may, and the administrator of a public hospital or facility or the chief clinical officer of DBH must, admit and detain for purposes of emergency observation and diagnosis. The evaluating professional will issue a certificate of their examination and opinion that the person meets criteria. If the person does not meet the criteria, the evaluating professional must not admit the person as an inpatient and shall facilitate the person’s outpatient treatment through DBH or a provider, as appropriate.	
What’s the duration of the hold?	Not more than 48 hours from admission, unless a written petition is filed with the court for an order authorizing continued detention for a period not to exceed seven days (<i>see “extended emergency evaluation” on page two</i>).	
Who decides whether to continue to a hearing?	Administrator of the hospital, the chief clinical officer of DBH, or administrator’s or chief clinical officer’s designee.	
Is there a form?	<u>Application for Emergency Hospitalization (FD-12)</u> .	

CRITERIA	Is currently admitted for emergency observation and diagnosis (<i>see “emergency evaluation” on page one</i>), and the examining professional certifies the person: • Has symptoms of mental illness; • Is likely to injure self or others unless immediately detained; <i>and</i> • Hospitalization or detention in a certified facility is the least restrictive alternative to prevent the person from injuring self or others. <i>Comment: Courts have stated that “likely to injure self” includes situations of “grave disability,” but since the law doesn’t state this clearly, this part of the law is being used much less often.</i>
Who can initiate?	 • Administrator of the hospital • Chief clinical officer of DBH • Administrator’s or chief clinical officer’s designee
How?	File a written petition with the <u>Superior Court</u> with a copy of the certificate of examination.
What do they initiate?	Will initiate judicial review and potential court-order authorizing continued detention of the person for emergency observation, diagnosis, and treatment.
Where does the proposed patient go?	Remains at facility until court decision.
What’s the time limit for the response?	Within 24 hours after the court receives a petition.
What happens?	The court will consider the written reports of the professional who made the application and the certificate of the examining professional under the initial emergency evaluation (<i>see above</i>), and any other relevant information. The court will decide to either order the hospitalization or order the person’s immediate release. If the court orders the person’s continued hospitalization, the person may request a hearing. If requested, the court must hold the hearing within 48 hours of the request.
What’s next?	A psychiatrist or qualified psychologist must examine the person within 48 hours. If the examining professional certifies that the person does not meet the criteria, the person must be immediately released. If the examining professional certifies that the person does meet the criteria, the person’s hospitalization for observation and treatment may continue.
What’s the duration of the hold?	An order for continued evaluation authorizes continued hospitalization for up to seven days. If a petition for commitment (<i>see “inpatient and outpatient treatment” on page three</i>) is filed during this period, the court may order the person’s continued hospitalization for up to an additional 21 days pending commitment proceedings.
Who decides whether to continue to a hearing?	Psychiatrist or qualified psychologist at the hospital or DBH.
Is there a form?	Unclear.

CRITERIA	- The person is certified by an examining physician or qualified psychologist as being: - Mentally ill; <i>and</i> - Because of the illness, likely to injure self or others if not committed; <i>or</i> - The person is reasonably believed to be: - Mentally ill and, because of the illness, likely to injure self or others if not committed; <i>and</i> - Has refused to submit to an examination by a physician or qualified psychologist. <i>Comment: Courts have stated that “likely to injure self” includes situations of “grave disability,” but since the law does not state this clearly, this part of the law is being used much less often.</i>		
Who can initiate?	 Law enforcement officer	 - Physician or qualified psychologist - Accredited officer or agent of the <u>Department of Behavioral Health of D.C. (DBH)</u>. - Director of DBH or Director’s designee	 Spouse, parent, or legal guardian
How?	File a petition with the Commission on Mental Health, Central Intake Center of the Family Court, East Wing of the John Marshall level of the District of Columbia Courthouse, 500 Indiana Avenue NW, Room JM-520.		
Required documentation?	- Certificate from a physician or qualified psychologist stating that they have examined the person and believe the person meets the criteria; <i>or</i> - Sworn written statement by the petitioner stating their reasonable belief that the person meets the criteria <i>and</i> the person has refused to submit to examination by a physician or qualified psychologist.		
When can outpatient be court-ordered?	Upon discharge from the hospital or from a community setting.		
What’s next?	The Commission must promptly examine the person who may need treatment after the petition is filed and promptly hold a hearing. If the Commission finds that the person is not mentally ill or, if mentally ill, not to the extent that they are likely to injure self or others if not committed, it must immediately order their release. If the Commission finds that the person meets the criteria, it must promptly report its findings, conclusions, and recommendations to the Superior Court. The person has the right to demand a jury trial. If the court or jury finds that the person does not meet the criteria, the court must dismiss the petition and order the person’s release. If, after the final hearing, the court or jury finds that the person meets the criteria, by clear and convincing evidence, the court may order the person’s commitment to DBH or any other facility that the court believes is the least restrictive alternative for a period of one year.		
Who issues the treatment order?	The court, based on its own or the jury’s findings.		
Who makes discharge decisions?	Chief clinical officer or the chief of service.		
Who supervises the outpatient treatment plan?	Chief clinical officer or the chief of service.		

How long can the first treatment order last?	One year.
What’s the renewal process?	The chief clinical officer or the chief of service may petition the Commission to renew the order within 60 days before it expires, supported by an examining professional’s certificate or a sworn statement if the person refuses examination. Once filed, the Commission provides notice, examines the person, and holds a hearing to decide if continued commitment is necessary. The commission can renew commitment for one year and must report its findings to the court.
What’s the discharge process?	The chief clinical officer or the chief of service must ensure that a psychiatrist or qualified psychologist examines a committed person every 90 days to determine the need for continued treatment. If the examiner reports that the person is no longer mentally ill to the extent of posing a risk of harm to self or others, the person must be immediately released. A committed person may request an independent evaluation within 180 days of commitment renewal. If the independent evaluation finds no ongoing risk or identifies a less restrictive option, the person may request release or change in treatment from the chief. If denied, the person may petition the court for discharge or transfer. If a person is discharged or moved to a less restrictive setting, the chief must promptly notify the committing court.
Is there a form?	<u>Petition for Commitment.</u>

KEY DEFINITIONS

- **“Chief clinical officer or the chief of service”** means the chief clinical officer of the Department of Behavioral Health or the chief of service for the facility, hospital, or mental health provider to which a person has been committed.
- **“Commission”** means the Commission on Mental Health.
- **“Grave disability”** means a person is likely to become unable to care for themselves or inadvertently place themselves in a position of danger.
- **“Mental illness”** means a psychosis or other disease which substantially impairs the mental health of a person.
- **“Qualified nurse practitioner”** means a licensed certified nurse practitioner, with a master’s or doctoral degree in psychiatric nursing, and is nationally board-certified as a psychiatric-mental health nurse practitioner.
- **“Qualified physician”** means a licensed physician who is board-certified in emergency medicine and certified by the Department of Behavioral Health to examine persons and prepare emergency admission certificates.
- **“Qualified psychologist”** means a licensed or federally employed psychologist with either one year of formal training within a hospital setting, or two years of supervised clinical experience in an organized health care setting, one of which must be post-doctoral.

KEY ABBREVIATIONS

- Department of Behavioral Health of D.C. (DBH)