GENERAL ASSEMBLY OF NORTH CAROLINA

SESSION 1997

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SENATE BILL 962

Short Title: Vol. Commitment/Mother on Drugs.	(Public)
Sponsors: Senator Martin of Guilford.	
Referred to: Children & Human Resources.	

April 17, 1997

A BILL TO BE ENTITLED

AN ACT TO AMEND THE MENTAL HEALTH COMMITMENT LAW TO PROVIDE FOR VOLUNTARY COMMITMENT OF MOTHERS WHO ARE SUBSTANCE ABUSERS AND THEIR CHILDREN UNDER AGE THREE.

The General Assembly of North Carolina enacts:

Section 1. (a) G.S. 122C-211 reads as rewritten:

"(a) Except as provided in subsections (b) through (e)—(f) of this section, any individual_individual, including a parent in a family unit, in need of treatment for mental illness or substance abuse may seek voluntary admission at any facility by presenting himself for evaluation to the facility. No physician's statement is necessary, but a written application for evaluation or admission, signed by the individual seeking admission, is required. The application form shall be available at all times at all facilities. However, no one shall be denied admission because application forms are not available. An evaluation shall determine whether the individual is in need of care, treatment, habilitation or rehabilitation for mental illness or substance abuse or further evaluation by the facility. Information provided by family members regarding the individual's need for treatment shall be reviewed in the evaluation. An individual may not be accepted as a client if the facility determines that the individual does not need or cannot benefit from the care, treatment, habilitation, or rehabilitation available and that the individual is not in need of further evaluation by the facility. The facility shall give to an individual who is denied

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 admission a referral to another facility or facilities that may be able to provide the treatment needed by the client.

- (b) In 24-hour facilities the application shall acknowledge that the applicant may be held by the facility for a period of 72 hours after any written request for release that he the applicant may make, and shall acknowledge that the 24-hour facility may have the legal right to petition for involuntary commitment of the applicant during that period. At the time of application, the facility shall tell the applicant about procedures for discharge.
- (c) Any individual who voluntarily seeks admission to a 24-hour facility in which medical care is an integral component of the treatment shall be examined and evaluated by a physician of the facility within 24 hours of admission. The evaluation shall determine whether the individual is in need of treatment for mental illness or substance abuse or further evaluation by the facility. If the evaluating physician determines that the individual will not benefit from the treatment available, the individual shall not be accepted as a client.
- (d) Any individual who voluntarily seeks admission to any 24-hour facility, other than one in which medical care is an integral component of the treatment, shall have a medical examination within 30 days before or after admission if it is reasonably expected that he-the individual will receive treatment for more than 30 days or shall produce a current, valid physical examination report, signed by a physician, completed within 12 months prior to the current admission. When applicable, this examination may be included in an examination conducted to meet the requirements of G.S. 122C-223 or G.S. 122C-232.
- (e) When an individual from a single portal area seeks admission to an area or State 24-hour facility, the admission shall follow the procedures as prescribed in the area plan. When an individual from a single portal area presents himself for admission to the facility directly and is in need of an emergency admission, he—the individual may be accepted for admission. The facility shall notify the area authority within 24 hours of the admission. Further planning of treatment for the client is the joint responsibility of the area authority and the facility as prescribed in the area plan.
- facility shall be evaluated to determine whether the family unit would benefit from the services of the facility. That facility shall be able to provide directly or by contract treatment, habilitation, or rehabilitation services that will specifically address the family unit's needs. These services shall include gender-specific substance abuse treatment, habilitation, or rehabilitation for the parent as well as assessment, well-child care, and early intervention services for the child. A family unit shall not be accepted as a client if the facility determines that the family unit does not need or cannot benefit from the care, habilitation, or rehabilitation available at the facility and that the parent is not in need of further evaluation by the facility. The facility shall give to a family unit that is denied admission a referral to another facility or facilities that may be able to provide treatment needed by the family unit. Except as otherwise provided, this section applies to a parent in a family unit seeking admission under this section.

- 1 (g) As used in this Part, the term 'family unit' means a parent and the parent's dependent children under the age of three years."
- 3 Section 2. This act becomes effective October 1, 1997.