Involuntary Commitment and Emergency Services in our Community of Arapahoe and Douglas Counties for Persons Who are Gravely Disabled

The Problem

People with a mental illness condition who appear to be actively dangerous to themselves or others ordinarily receive a prompt response when they come to the attention of the authorities. However, for individuals with mental illness who pose a more passive but real danger, particularly to themselves, authorities are less likely to intervene.

How can we as family members or friends facilitate an appropriate and respectful intervention and treatment when the person we care about has a severe mental illness, is not able to recognize that this is the case, is resistant to help, is unable to care for basic needs of food, housing, health, and fits the definition of gravely disabled? This is a question many family members find themselves asking. Answering it involves understanding:

✴ Colorado Statute CRS 27-10-102 (5) (referred to here as the Gravely Disabled Statute)
✴ Emergency procedures in Arapahoe and Douglas counties
✴ Non-emergency procedures in Arapahoe and Douglas counties

The Definition of Gravely Disabled in the Colorado Statute (CRS 27-10-102 (5))

In Colorado, unlike in some states, we have the legal means to provide treatment both in a hospital or treatment facility or on an outpatient basis, even if the person does not want such treatment. While we must respect civil liberties, in the case of severe mental illness, sometimes it is advisable to impose involuntary treatment so that a person’s health and safety are not seriously endangered. The legal basis for this is described in Colorado Statute 27-10-102 (5) referred to here as the Gravely Disabled Statute.

In summary, a person can be considered gravely disabled when, as a result of a mental illness he or she:

✴ Is in danger of serious physical harm due to the inability or failure to provide the essential human needs of food, clothing, shelter, and medical care

or

✴ Demonstrates such a significant lack of judgment in managing resources and interacting with others that his or her health and safety are significantly endangered and he or she lacks the capacity to understand that this is the case.
In addition, if a person’s basic needs are taken care of by a family member (or similar person), the person with the mental illness may be considered gravely disabled if the caretaker gives notice that such support will be terminated and the mentally ill person is diagnosed as suffering from chronic schizophrenia, a chronic major affective disorder, a chronic delusional disorder or chronic mental disorder with psychotic features

- *and* has been certified for treatment or admitted to an inpatient facility for treatment at least twice during the last 36 months with a period of at least 30 days between admissions or certifications

- *and* exhibits a deteriorating course leading toward danger to self or others or toward the conditions described as gravely disabled and is not receiving treatment which is essential for his health or safety.

The entire statute is available online at:

http://www.cdhs.state.co.us/dmh/PDFs/C.R.S.27-10_1998.PDF

**The Community Mental Health System in Arapahoe and Douglas Counties**

The Community Mental Health system can be confusing. If your family member lives in the part of Arapahoe County that includes Aurora, then Aurora Mental Health Center (AuMHC) is the commonly designated community mental health center.

If your family member lives in any other part of Arapahoe County, excluding Aurora, then Arapahoe Douglas Mental Health Network (ADMHN) is the commonly designated community mental health center.

However, Medicare, privately insured, Medicaid recipients and some 3rd party payers can choose any Mental Health Center. They are not confined to getting treatment in their county of residence. Uninsured clients who want to use the CO State advised sliding-scale fee should seek care from the mental health center in their local jurisdiction as stated in the CO State Continuity of Care Agreement.

**Emergency Services in Arapahoe and Douglas County**

In Colorado, by law an intervening professional may take or cause a person to be taken into custody and placed in a designated facility for a seventy-two hour treatment and evaluation. In the case of an emergency, the police or sheriff’s department are usually called to take the person to the ER or other mental health facility. Most emergencies are related to suicidal or even homicidal threats or behavior. If you are concerned that your friend or family member is in imminent danger of harming himself or someone, else, call 911 and explain the situation. You can ask for a CIT (Crisis Intervention Team) trained officer. CIT officers have received specialized training for dealing with cases of mental...
illness. *But, regardless of who makes the call, it is important to call immediately and get help.*

Once the police arrive, they will assess the nature of the situation, and, if the person still appears to be at risk for harm to self or others, they will take that person to an ER or to a mental health facility. Once in the ER, if the person still appears imminently suicidal or a danger to others, the individual will be placed on a hold for **up to 72 hours** for psychological evaluation and treatment. Seventy-two-hour mental health holds can be written in the field by peace officers or therapists. During this 72-hour period the individual will meet with at least one (sometimes more) intervening professionals. The intervening professional can be a counselor, ER therapist, ER doctor, psychiatric nurse, etc. By statute, only a licensed M.D. or licensed psychologist can discontinue a hold. Game wardens can actually write a 72-hour hold in remote areas of Colorado when an intervening professional is not readily available.

ER evaluations are not exclusively performed by AuMHC or ADMHN. In most cases these evaluations are performed by ER psychological assessment teams. One such example is the Presbyterian/St. Lukes Support LINE which covers eight local ER’s. The emergency evaluation process allows the ER assessment team to seek collateral treatment information from other professionals that applies to the current emergency, such as history of harm, diagnosis, and emergency care recommendations.

*As a family member, it is very helpful if you can talk to the evaluator. Even if the evaluator cannot reveal information to you due to laws of confidentiality, they can listen. The background information that you provide is essential. Often, a person with a mental illness can “hold it together” for a period of time and deny that they are a danger to themselves or others. Therefore your information about the context of the situation is very helpful to the evaluator. Even better than talking to the evaluator, is having a written summary to give to police officers, screening professionals, or emergency room personnel, complete with history, past/current medications, past treatment.*

**Non-Emergency Procedures in Arapahoe and Douglas County**

One of the most difficult challenges family members face when their loved one becomes seriously mentally ill is this: the person they love is not in an “emergency.” There is no drama, no threat of suicide, no violent behavior. Rather there is a steady and insidious disintegration of personality, of grasp on reality, of relationship with others. There is isolation, delusion, paranoia, inability to perform basic tasks like paying rent or getting to the grocery store, or eating food. There is inability to self-protect. There is engaging in risky behavior that could lead to victimization. And most disturbing, the person is often unaware that he or she is ill and displays angry resistance to help of any kind from anyone.
The “Welfare Check”

As a family member, if you are concerned about your loved one due to their mental illness, you can call 911 and ask that the police do a “welfare check.” If you do this, it’s very important that you document the date and time that you make the call. If the officer calls you back to report, document what you are told. When you call 911, ask for a CIT trained officer. The CIT officer’s training can be helpful. However, all officers take the issue of civil liberties very seriously. It is not against the law to be eccentric or different. It is often difficult for an officer be confident in using the “gravely disabled” definition in order to take someone against their will to the hospital. Frequently, the police are reluctant to do so. That doesn’t mean they won’t, but it may take multiple calls over a period of time. Each time you call, document that you did so. The officer has resources in Arapahoe and Douglas counties to ask for assistance. When you talk to the officer, ask that he or she file a report with ADMHN or AuMHC. Keep asking. If you don’t get results the first time, keep trying. If you think your family member fits the category of “gravely disabled,” say so. Keep saying so.

At the same time as you are utilizing the police to check on your loved one, and documenting this, you can initiate a “court ordered psychological screening.”

“Court ordered psychological screening”

The Gravely Disabled Statute makes it possible for you to ask the court in your jurisdiction to order a psychological screening. To do so, you will need to complete a Petition for Evaluation which you can obtain online at http://www.cdhs.state.co.us/dmh/PDFs/27-10_m-4.pdf.

Complete the petition and take it to the Arapahoe District Court clerk’s office, 7325 S. Potomac Street or, if you are in Douglas County, call 303-660-7414 and they will advise you. Your objective is to get the petition to the judge for review along with all pertinent documentation regarding the person’s psychiatric history. To do so, it’s critical to understand and to meet the criteria of the Gravely Disabled Statute http://www.psychlaws.org/LegalResources/StateLaws/Coloradostatute.htm.

If the judge signs the order, you should receive a copy to take to the mental health center. For court petitions there is no issue (or discrimination) regarding payer source. The County Attorney’s Office should forward the signed petition to the Mental Health Center in the area where the respondent lives. If not, you can take it there.

Both ADMHN and AuMHC are required by the Gravely Disabled Statute to perform a psychological screening and are committed to doing so. However, they will not want to put their evaluator in a potentially dangerous situation. If your family member won’t go to the mental health center or hospital for an appointment (and if you are going to these lengths, the chances are good that he or she won’t), the evaluator may have to enlist the help of the police CIT team to ensure safety.
It is thus crucial that you stay involved and communicate with the head of Emergency Services. At this point, your advocacy is critical. And while your head may be spinning with such a complicated process, remember that, you are the key to getting it to work. It’s your determination that got you this far in the first place. Call ADHMN Emergency Services at 303-730-3303 or AuMHC Emergency Services 303-617-2400, depending on where your family member lives, and leave a message with the supervisor explaining that you have a court order for a psychological screening and that you will need the evaluator to go to your family member with the help of the CIT team.

Phone Numbers and Contact Information

For more information, call 303-991-7688 and leave a message for Judith Brodie. Your call will be returned as soon as possible.

AuMHC Emergency Services 303-617-2400

ADMHN Emergency Services 303-730-3303

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