



Welcome to Training:

Court-Ordered Evaluation and Treatment

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Please only join by phone or computer.

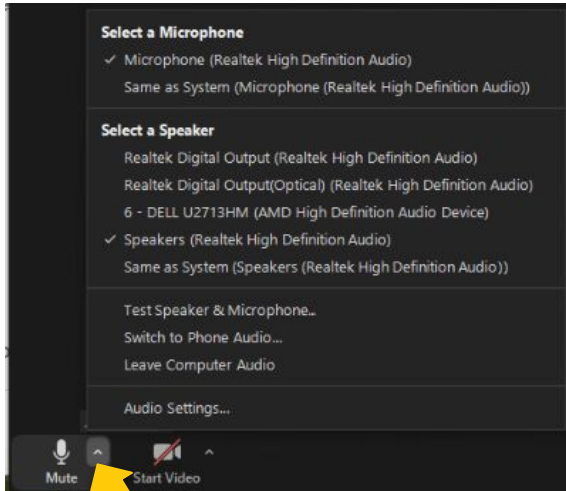
Please use the chat feature for questions or raise your hand.

Thank you.

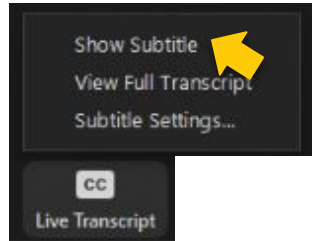
Zoom Webinar Controls

Navigating your bar on the bottom...

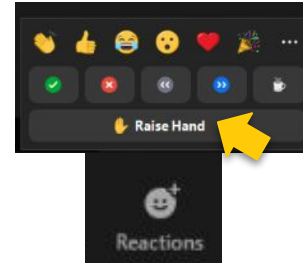
Audio Settings



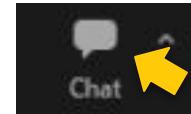
Turn on Closed Captioning



Raise Hand



Chat



KEYBOARD SHORTCUTS TO RAISE HAND

Windows: Alt+Y to raise or lower your hand

Mac: Option+Y to raise or lower your hand

Audio Settings

Settings

Speaker Test Speaker Built-in Output (Internal Speakers)

Output Level: [Progress Bar]

Output Volume: [Slider]

Microphone Test Mic Built-in Microphone (Internal Micropho...)

Input Level: [Progress Bar]

Input Volume: [Slider]

Automatically adjust microphone volume

Use separate audio device to play ringtone simultaneously

Join audio by computer when joining a meeting

Mute microphone when joining a meeting

Press and hold SPACE key to temporarily unmute yourself

Advanced

Welcome!

What to expect during the training:

- Information regarding Court Ordered Evaluation & Treatment,
- Real-time answers to related questions in the chat, and
- Links to relevant active sources.

What to expect after the training:

- Concluding with Q&A session,
- Each participant will receive this presentation, and
- Contact information for the OHR for questions on other topics



Frequently Asked Questions

- 1. Who is in the audience?**
- 2. Who can see my chats?**
- 3. What if I don't want to talk during this meeting but would prefer to talk offline?**
- 4. Why is this training based on AHCCCS policy and the Arizona Administrative Code?**



Court-Ordered Evaluation and Court-Ordered Treatment (COE /COT)

Kate Murphy, MSW, LMSW
Clinical Program Manager
Integrated System of Care, Division of Grants and Innovation





Learning Objectives

Objectives

1. Better understand the reasons a person might need court-ordered treatment.
2. Learn the procedure for voluntary evaluation and treatment, based on Arizona's Title 36 statute.
3. Review the process of obtaining court-ordered involuntary evaluation and treatment, from the initial application through final release.
4. Review best practices and protocols that promote the administration of justice for individuals when interacting with the COE/COT process.

Title 36

- Court-Ordered Evaluation (COE)
- Court-Ordered Treatment (COT)
- Goal is help to people who are unwilling or incapable of providing consent to receive behavioral health services.
- Designed to address the needs of individuals who meet one or more of the following criteria:
 - Danger To Self (DTO),
 - Danger To Others (DTS),
 - Persistently or Acutely Disabled (PAD), and/or
 - Gravely Disabled (GD)

Title 36

- **NOT** intended to treat substance abuse disorders
- **NOT** to be used as a form of punishment or legal penalty
- **NOT** to be used as a means of coercion in a court of law
- Should only be utilized where the treatment protocol/best practice to address an individual's condition is something the court can compel an individual to do (example: medication)

Arizona Revised Statutes (ARS) Definitions

Mental Disorder

A substantial disorder of the person's emotional processes, thought, cognition or memory and is distinguished from:

- Conditions that are primarily those of drug use, alcoholism, or intellectual disability, unless, in addition to one or more of these conditions, the person has a mental disorder,
- The declining mental abilities that directly accompany impending death,
- Personality disorders characterized by lifelong and deeply ingrained antisocial behavior patterns, including sexual behaviors that are abnormal and prohibited by statute unless the behavior results from a mental disorder.

ARS Definitions

Danger to Self (DTS)

A behavior that as a result of a mental disorder:

- Inflicts serious physical harm to oneself and
- Without hospitalization will result in serious physical harm or illness.

Danger to Others (DTO)

A behavior that as a result of a mental disorder:

- Inflicts serious physical harm to others and
- Without hospitalization will result in serious physical harm or illness.

ARS Definitions

Persistently or Acutely Disabled (PAD)

If not treated, has a substantial probability of causing the person to suffer or continue to suffer severe and abnormal mental, emotional or physical harm.

- May impair the person's capacity to make an informed decision and
- May be treated with outpatient or inpatient services or the combination of the two.

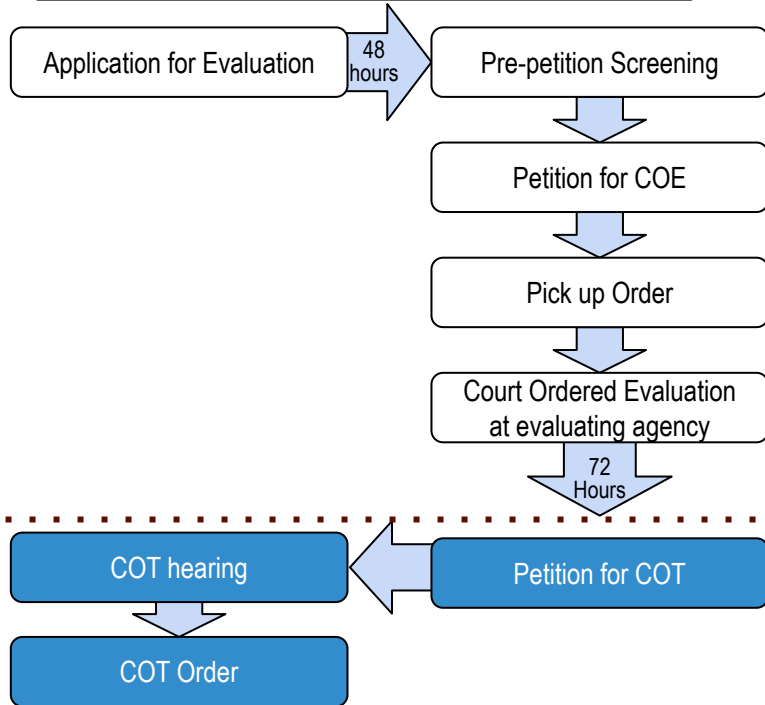
Gravely Disabled (GD)

Behavior in which a person, as a result of a mental disorder, is incapacitated and likely to come to serious physical harm or serious illness because the person is unable to provide for the person's own basic physical needs.

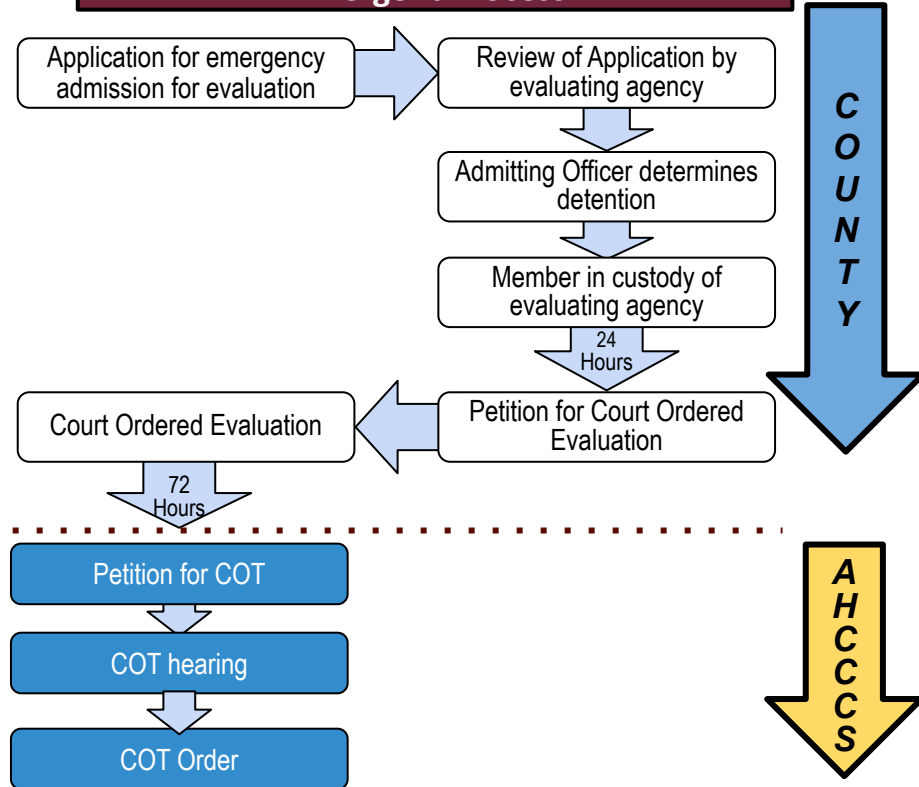
Title 36 [COE/COT] Process Overview

COE / COT Process Overview

Non-Emergent Process:



Emergent Process:



Who Can File an Application Evaluation?

Any “responsible individual” may apply for an evaluation.

What is Discoverable?

- Who signed the application
- Who witnessed the application



Two Applications for Involuntary Admission for Evaluation

Application for Emergency Involuntary Evaluation

IF INDIVIDUAL IS:

- In immediate danger
- Unwilling/unable to consent to voluntary treatment
- Must also submit Application for Involuntary Evaluation

Application for Involuntary Evaluation

IF INDIVIDUAL IS:

- Not in immediate danger
- Unwilling/unable to consent to voluntary evaluation

Petitioning Approaches

Emergent:

- Danger to Self (DTS)
- Danger to Others (DTO)
- Persistently or Acutely Disabled (PAD)*
- Gravely Disabled (GD)*

Non-Emergent:

- Persistently or Acutely Disabled (PAD)
- Gravely Disabled (GD)

*Added in 2022

Pre-Petition Screening

This application starts the COE/COT process.

Pre-Petition Screening

Pre-Petition Screening is defined as:

A professional analysis of an application for court ordered evaluation by licensed behavioral health medical professionals to ensure that reasonable cause exists and determine that it is appropriate and ready to be filed with a court.



Notarized application is given to a screening agency

Pre-Petition Screening

A pre-petition screening is conducted at a health care agency if the allegedly mentally disordered person is in non-emergent circumstances. The screening agency reviews the allegations presented in the application, gathers relevant information, and conducts an interview with the person if possible.



Notarized application is given to a screening agency



Screening must occur within 24 hours

Pre-Petition Screening



Notarized application is given to a screening agency



Screening must occur within 24 hours



The purpose of the screening is to determine "Reasonable Cause"

Four Possibilities After the Screening

1. File petition for evaluation with the Court.
2. Emergency evaluation may be necessary.
3. Individual voluntarily agrees to treatment.
4. Individual does not meet criteria.



Result of Screening – Emergent or Non-Emergent

IF...

Based on the application, screening report, and other information gathered, the agency determines if there is reasonable cause that the proposed patient as a result of a mental disorder is DTS, DTO, PAD or GD.

AND...

The patient is unwilling or unable to voluntarily participate in the evaluation, then the agency prepares a petition for court ordered evaluation and files it.

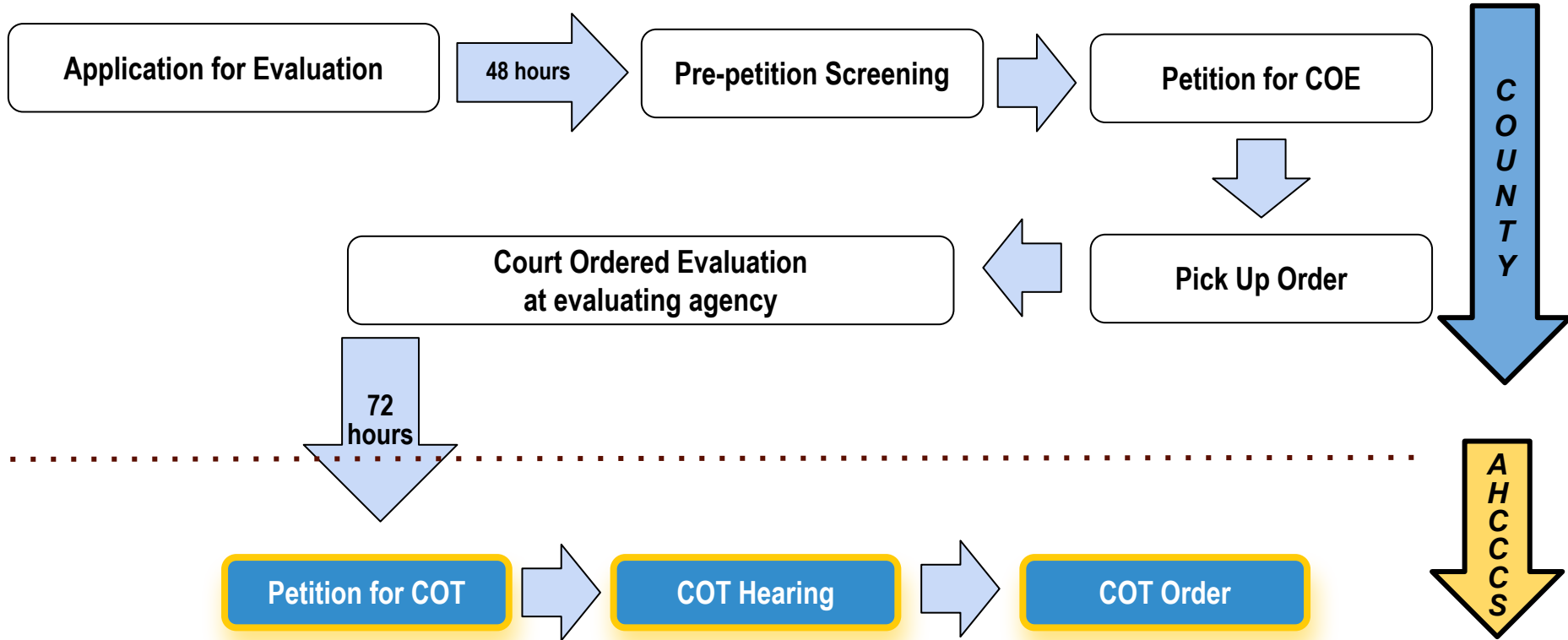
THEN...

The agency prepares a petition for court ordered evaluation and files it with the court.

Non-Emergent Court-Ordered Evaluation (COE)

COE / COT Process Overview

Non-Emergent Process



Application for Involuntary Evaluation

- Form MH-100
- Must be complete
- Must be notarized and the original copy must be submitted in accordance with the county rules
- Help is available from the screening agency
- Screening agency must act within 48 hours
- If person is present, pre-petition screening occurs
- If person is not present nor found, report is sent to county attorney
- If COE or COT is not indicated for the proposed patient, the application is destroyed after 6 months

Pick Up Orders

A Peace Officer will pick up and transport
The individual to an evaluating agency:

- If not taken into custody within 14 days, the petition for evaluation expires.
- Law enforcement transport can be a traumatic event as transports includes use of a police car, handcuffs, and searches due to safety procedures.

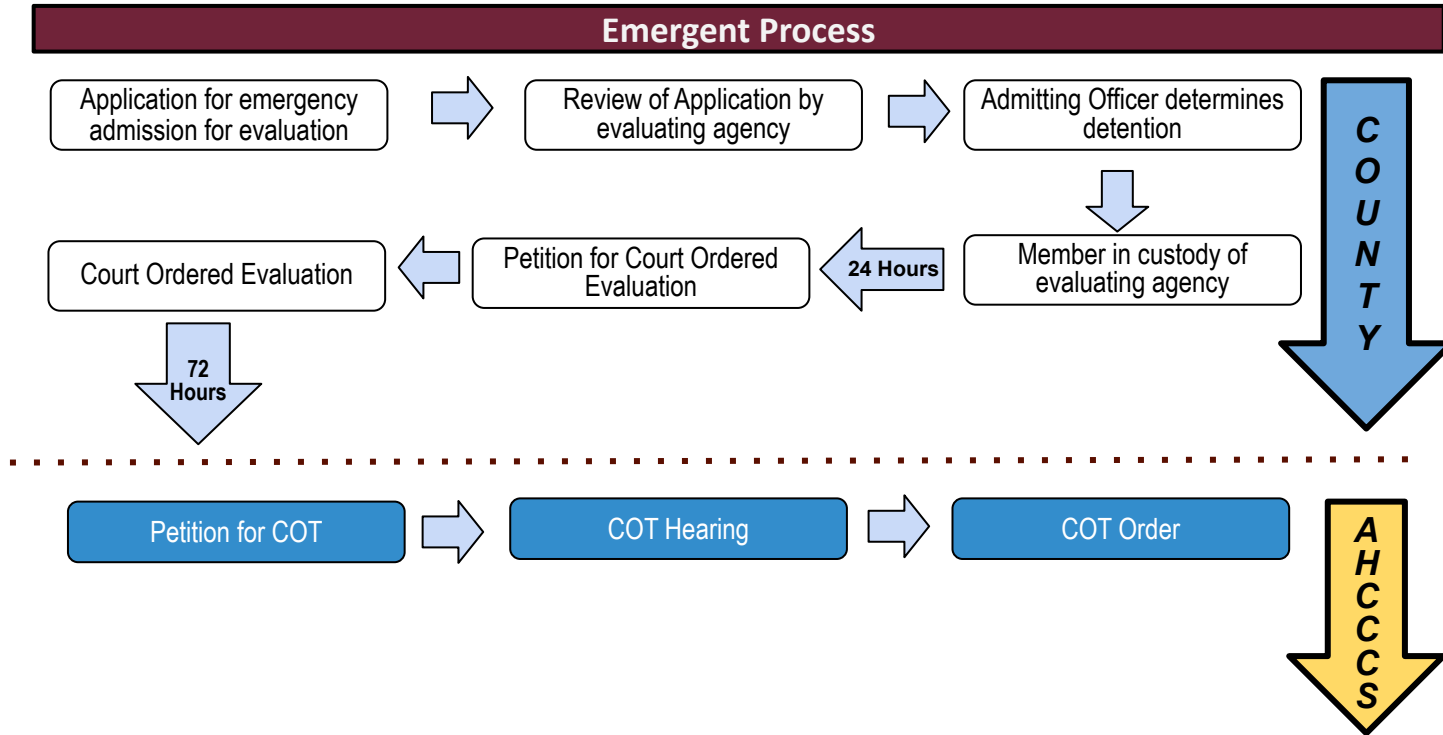


Emergent Court-Ordered Evaluation

What is an Emergent Situation?

- An individual is a Danger to self (DTS), Danger to others (DTO), Persistently or Acutely Disabled (PAD), and/or Gravely Disabled (GD) **AND**
- Refuses or is unable to decide to receive voluntary treatment **AND**
- Individual needs to be hospitalized immediately **AND**
- Without hospitalization, serious physical harm to self or others may occur during the time it would take to complete non-emergent pre-petition screening procedures.
- This is a different form than the non-emergent petition

Emergent COE / COT Process

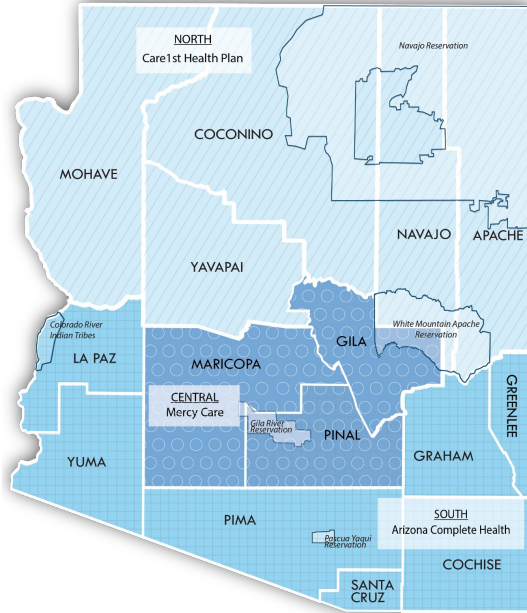


Application Requirements

- No blanks
- Signed, dated, and notarized
- Statement of need
- List of recent (within 2 to 6 months) concerning behaviors
- 1 to 2 witnesses, depending on the court

As of 10/1/22: Where To File an Emergent Application

ACC-RBHA/TRBHA Map
Effective October 1, 2022



Note: Zip codes 85542, 85192, 855
representing San Carlos Tribal area
included in the South GSA.

Each county has a distinct approach to COE/COT.

To file an emergent application, contact the Regional Behavioral Health Authority in your area of the state.

RBHA information is available on the AHCCCS website at: azahcccs.gov/Members/BehavioralHealthServices

Remember, Voluntary Evaluation Changes Everything

An individual may consent AT ANY TIME to complete the evaluation voluntarily.

- The individual signs form,
- Evaluating agency is notified,
- Evaluation is completed with five days of notice,
- Petition for COE is dropped, and not filed with a court.

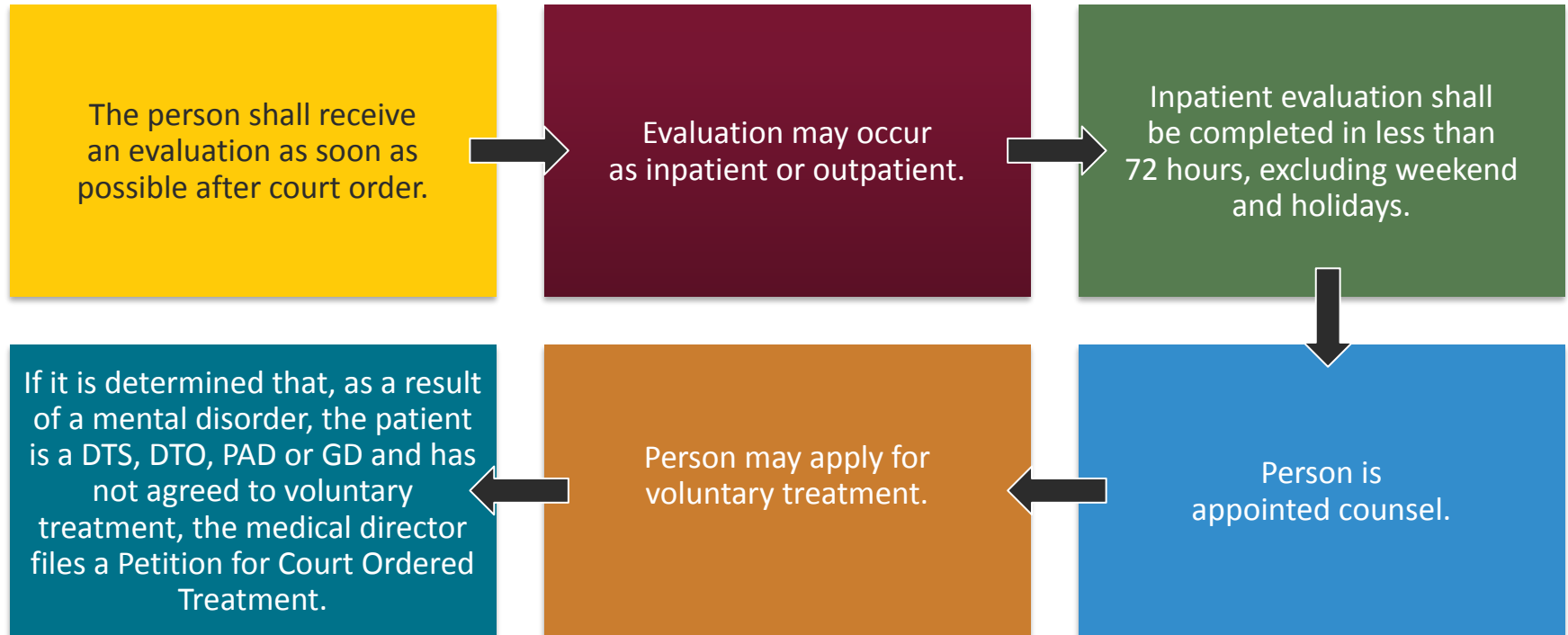


Court-Ordered Evaluation

Petition for Court-Ordered Evaluation

- Medical Director prepares and files the Petition for Court Ordered Evaluation.
- If emergent: Upon arrival at evaluation agency, medical director shall file the petition on the same or next day.
- Documents required: application, screening report, petition, plus any other forms required by the county where the person is being evaluated.
- Petition to include known criminal history or if person ever found incompetent to stand trial.
- If court determines there is reasonable cause that, as a result of mental disorder, the person is DTS, DTO, PAD or GD, an order is issued for involuntary evaluation.

Evaluation (After Petition is Accepted by the Court)



Petition for Court-Ordered Treatment

Petition for Court-Ordered Treatment

Petition shall document and describe (allege):

- The individual is in need of treatment because as a result of mental disorder is DTS, DTO, GD or PAD,
- Appropriate treatment options are available, and
- The individual is unwilling or unable to accept voluntary treatment.

Petition shall contain:

- Affidavits of two physicians,
- Psychiatric evaluations,
- Treatment plan, and
- Other supporting documents (varies by county).

Petition for Court-Ordered Treatment

Change to voluntary treatment

- After petition for COT is filed and prior to hearing, medical director may find voluntary treatment is more appropriate, and can seek approval from the court.

Hearing for Court-Ordered Treatment

Hearing for Court-Ordered Treatment

- Hearing must be held within **six days** after petition is filed.
- A copy of the petition and all affidavits must be provided to the individual at least **72 hours** in advance of the hearing.
- The individual has the right to have an independent mental health evaluation.
- If the individual does not have counsel, the court shall appoint an attorney at least **three days** prior to the hearing.
- Within **24 hours of appointment**, individual's attorney will review the petition and conduct interviews with the individual, the petitioner, witnesses, and physicians.

Hearing for Court-Ordered Treatment

- Evidence to include testimony of **two physicians** who participated in the evaluation.
- **Two or more** witnesses shall also testify.
- The individual may testify.
- Superior court attorneys present the petition to the Court and represent the interests of the Court and community.
- The individual is assigned an attorney through the office of public advocacy / public defender's office to represent their interests and present their defense.

Court Actions/Decisions

- Order to Inpatient Treatment
- Order to Outpatient
- Order to
Combined Inpatient/Outpatient
- Dismiss the Case/Petition



COT Can Be Mandated For Up To One Calendar Year

DANGER TO SELF

Up to 90 days inpatient
Up to 365 days Outpatient Treatment

DANGER TO OTHERS

Up to 180 days inpatient
Up to 365 days Outpatient Treatment

GRAVELY DISABLED

365 days, combined Inpatient/
Outpatient Treatment
Can be renewed without new petition
Usually indicates need for appointment of
a guardian or conservator

PERSISTENTLY OR ACUTELY DISABLED

Up to 180 days inpatient
Up to 365 days Outpatient Treatment
Can be renewed without new petition

While on COT

- Medication compliance/adherence as prescribed
- Attend prescriber appointments every 30 days



While on COT

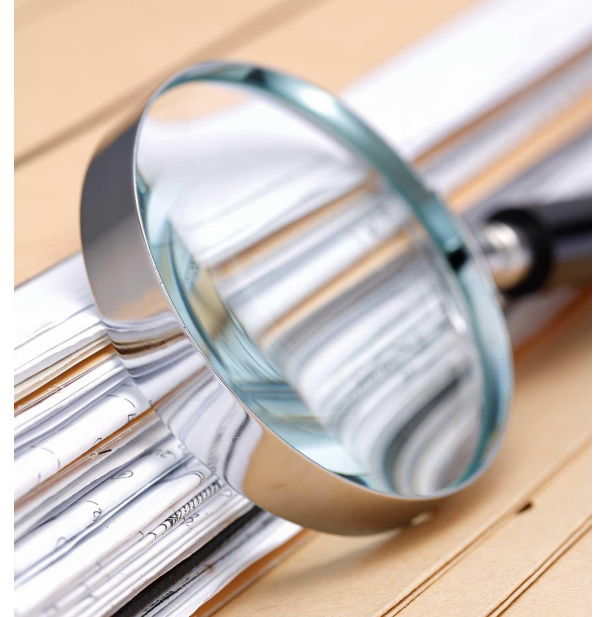
- Loss of Gun Rights (may be restored)
- Information submitted to DPS and National Crime Information Center (NCIC) database
- Information about COT may be visible during permitting and employment background checks



COT Oversight

Judicial Reviews

- A.R.S. – 36.546 Judicial Review
- **Every 60 days** the provider must inform the individual of the right to Judicial Review, which must be offered and documented in the clinical record.
- An individual who is COT has the right to challenge the COT order at any time.



Amending or Revoking a COT Order

The Medical Director of the outpatient treatment agency can amend or revoke the outpatient portion of the court ordered treatment at any time during the court order:

- The Medical Director directs the peace officer or employee to transport.
- May result in hospitalization.
- Statute allows readmission to an inpatient facility for 48 hours before a motion is filed.
- Medical Director must file a “notice” with the court within 24 hours requesting inpatient treatment.

Tolling Order Process

Tolling is the action that pauses the order when a member is unable to be located.

Once found, the individual must serve the balance of their COT order.



Tribal Court Recognition

Tribal Court Recognition



Tribal courts are governed by their tribe and operate under the constitutions and codes of law of their tribe.

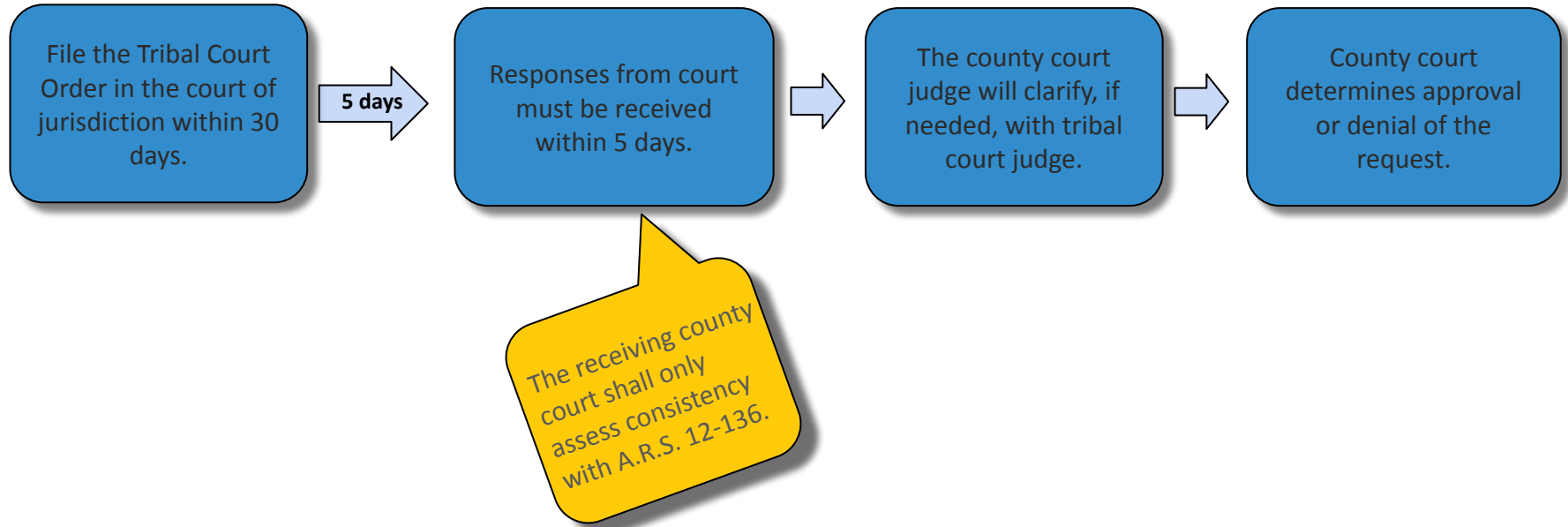
Tribal Court Recognition

- Native Americans/Indigenous People who have a behavioral health crisis on tribal land have a separate COE/COT process.
- Each tribal nation has a code of laws and processes.
- Tribal court order will specify the type of treatment needed.



When the tribal court seeks to secure court ordered treatment off tribal land, the court order must be ‘recognized’ or transferred to jurisdiction of state. The transferring of a Tribal Court order is initiated by the Tribal Court.

Tribal Court Order Process



Tribal Behavioral Health Authorities

Tribal Regional Behavioral Health Authority	County or Tribal Nation Served
Gila River TRBHA: www.grhc.org , 1-888-484-8526 ext. 7100	Gila River Indian Community
Navajo Nation TRBHA: www.nndbmhs.org , 1-866-841-0277	Navajo Nation
Pascua Yaqui TRBHA: www.pascuayaqui-nsn.gov , 520-879-6060	Pascua Yaqui Tribe
White Mountain Apache TRBHA: www.wmabhs.org , 928-338-4811	White Mountain Apache Nation

More information about Tribal COE/COT and TRBHAs is posted at www.azahcccs.gov/AmericanIndians/TribalCourtProceduresForInvoluntaryCommitment/



Thank You

Resources are included at the end of this presentation

Questions?

Resources

Resources Disclaimer

The resources in this presentation are subject to change due to AHCCCS contracts with health plans and according to the needs of each county.

Health Plans, ACC-RBHA and TRBHA Contacts

Health Plans, ACC-RBHA or TRBHA	Customer Service	Webpage
Banner – University Family Care LTC	1-833-318-4146	Banner UFC
Mercy Care LTC	1-800-624-3879	Mercy Care LTC
Care1st Arizona	1-866-560-4042	Care1st Arizona
Mercy Care RBHA	1-800-564-5465	Mercy Care RBHA
AHCCCS American Indian HP	1-800-654-8713	American Indians-AIHP
United Healthcare LTC	1-800-293-3740	UHC LTC
Arizona Complete Health	1-888-788-4408	AZ Complete Health
Gila River TRBHA	1-520-562-3321	Gila River TRBHA
Pascua Yaqui TRBHA	1-520-879-6060	Pascua Yaqui TRBHA
Navajo Nation TRBHA	1-928 871-6000	Navajo Nation TRBHA
White Mountain Apache TRBHA	1-928-338-4811	White Mountain Apache TRBHA

Documents Needed

EMERGENT

1. Form A (MH-100) – Application for Involuntary Evaluation
2. Form B (MH-104) – Application for Emergency Admission for Evaluation, also known as Form #T36-A2a
3. Pick Up Order- this is also known as the Mental Health Detention Information Sheet/Request to Initiate T-36 in some counties
4. Witness Information Form/ Witness Statement

NON-EMERGENT

1. Form A (MH-100) – Application for Involuntary Evaluation
2. Form F (MH-105)- Petition for COE (Court Ordered Evaluation)
3. Pre-Petition Screening
4. Pick Up Order / Also known as Request to Initiate T-36 in some counties
5. Witness Information Form/ Witness Statement

Northern GSA

APACHE AND NAVAJO COUNTIES

ChangePoint Psychiatric Hospital for COE.

Anyone can initiate a petition.

The application needs to be completed at ChangePoint Psychiatric Hospital, Little Colorado Behavioral Health / Community Bridges. www.mychange.org/court-ordered-services, 928-587-3435

Little Colorado Behavioral Health www.lcbhc.org, 928-337-4301

Community Bridges, Inc. <https://communitybridgesaz.org>, 877-931-9142

COCONINO COUNTY

The Guidance Center www.tgcaz.org, 877-756-4090

Northern GSA

MOHAVE

Southwest Behavioral Health - Kingman Recovery Unit accepts members on application for COE.

Southwest Behavioral Health is the screening agency

Southwest Behavioral & Health Services, Kingman location
www.sbhservices.org/kingman-outpatient, 928-753-9387

YAVAPAI

Pronghorn Psychiatry/Stoneridge Centers pronghornpsych.com,
928-583-7799

Community Bridges, Inc. <https://communitybridgesaz.org/> 877-931-9142

Northern GSA Emergencies

SOLARI

1-877-756-4090

Mobile crisis teams can be dispatched to any location.

Central GSA

MARICOPA

Valleywise accepts COE members once an evaluation has occurred and petition accepted.

Valleywise Psychiatric Hospital

valleywisehealth.org/locations, (602) 344-5011

Connections Health Solutions conducts pre-petition screening and COE

<https://connectionshs.com>, (602) 416-7600

Central GSA

MARICOPA

Valleywise Psychiatric Hospital accepts COE members once an evaluation has occurred and petition accepted. Valleywise Psychiatric Hospital- valleywisehealth.org/locations/ (602) 344-5011

Connections Health Solutions conducts pre-petition screening and COE - <https://connectionshs.com/> (602) 416-7600

GILA

Pronghorn Psychiatry/Stoneridge Centers pronghornpsych.com, 928-583-7799

Community Bridges, Inc. <https://communitybridgesaz.org/> 877-931-9142

PINAL

Community Bridges, Inc. communitybridgesaz.org (480) 507-3180 for pre-petition screening

Connections Health Solutions conducts pre-petition screening and COE - <https://connectionshs.com/> (602) 416-7600

Central GSA Emergencies

SOLARI

1-602-222-9446

Mobile crisis teams can be dispatched to any location.

Southern GSA

COCHISE

Community Bridges, Inc. communitybridgesaz.org, 520-323-1312

Community Health Associates www.chaarizona.com, 928-376-0026

GRAHAM and GREENLEE

Community Bridges, Inc. communitybridgesaz.org, 520-323-1312

LA PAZ and YUMA

Horizon Health and Wellness www.hhwaz.org, 1-866-495-6735

Southern GSA

PIMA & PINAL

Community Bridges, Inc. communitybridgesaz.org 520-323-1312 for pre-petition screening only

Connections Health Solutions/Crisis Response Center -
<https://connectionshs.com/> 520-301-2400 for pre-petition screening and COE

SANTA CRUZ

Community Bridges, Inc. communitybridgesaz.org 520-323-1312 for pre-petition screening only

Connections Health Solutions/Crisis Response Center -
<https://connectionshs.com/> 520-301-2400 for pre-petition screening and COE

Southern GSA Emergencies

SOUTHERN ARIZONA CRISIS LINE

1-866-495-6735

Mobile crisis teams can be dispatched to any location.

Support is Critical

Find support and speak with others who have gone through this process.

National Alliance on Mental Illness (NAMI)
(480) 994-4407

Chapters throughout the state

Resources

Suicide/Crisis Lines/ FAQs

www.azahcccs.gov/crisis

AHCCCS

Phone: 602-417-4000

In-State: 1-800-654-8713 (Outside Maricopa County)

Out-of-State: 1-800-523-0231

AHCCCS Website
www.azahcccs.gov

Learn about AHCCCS' Medicaid Program on YouTube!



Watch our Playlist:

[Meet Arizona's Innovative Medicaid Program](#)

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