1. Add the following provisions to Chapter 433A
2. ***The Division shall adopt regulations governing the procedure for the involuntary administration of medication. (Effective on January 1, 2020).***

Stakeholders have identified existing gaps regarding protocols for involuntary medication. Several hospitals throughout the state lack legal representation to advise them in navigating the complexities of forced medication.

1. ***The Division may adopt regulations governing discharge planning of patients admitted to a healthcare facility, as defined in*** [***NRS 449.0151***](https://www.leg.state.nv.us/NRS/NRS-449.html#NRS449Sec0151)***.***

Discharge planning practices vary widely throughout Nevada. Many community stakeholders have identified the need for guidance in the discharge planning process.

1. Add the following definitions to Chapter 433A

The Treatment Advocacy Center, a national expert regarding civil commitment law, recommends greater specificity in legal hold terminology to increase clarity and common understanding of the legal hold process.

1. ***"Substantial likelihood of serious harm" defined. "Substantial likelihood of serious***

***harm" means that an individual is at serious risk of:***

1. ***Suicide or homicide;***
2. ***causing serious bodily injury; or***
3. ***grave disability.***

The language for “substantial likelihood of serious harm” was obtained from Utah’s current civil commitment law. In adding a definition for “substantial likelihood of serious harm” brings the stature in line with current practice in Nevada and national recommendations from the Treatment Advocacy Center’s “Grading the States “report.

***2) 2)***

***"Serious bodily injury" defined. "Serious bodily injury" means bodily injury, to self or others, that involves a substantial risk of death, unconsciousness, extreme physical pain, protracted and obvious disfigurement, or protracted loss or impairment of the function of a bodily member, organ, or mental faculty.***

The language for “serious bodily injury” was obtained from Utah’s current civil commitment law. In adding a definition for “serious bodily injury” brings the stature in line with current practice in Nevada and national recommendations from the Treatment Advocacy Center’s “Grading the States “report.

***3) “Grave disability” defined. “Grave disability” means a condition in which a person as a result of mental illness:***

***1. is in danger of physical harm arising from such complete neglect of basic needs for food, clothing, shelter, or personal safety as to render serious accident, illness, or death highly probable if care by another is not taken; or***

***2. will, if not treated, suffer or continue to suffer severe and abnormal***

***mental, emotional, or physical distress, and this distress is associated with significant impairment of judgment, reason, or behavior causing a substantial deterioration of the person’s previous ability to function independently.***

The language for “grave disability” was obtained from Alaska’s current civil commitment law. In adding a definition for “grave disability” brings the stature in line with current practice in Nevada and national recommendations from the Treatment Advocacy Center’s “Grading the States “report.

1. ***"Application for emergency admission” defined. As used in this chapter, "application for emergency admission" means the form approved by the Division, and the Office of the Attorney General, and furnished by the clerks of the district court in each county for the emergency admission of a person alleged to be in a mental health crisis.***

Due to lack of understanding in the community, there was a need to define “application for emergency admission” to align current practice and with the language of the statute. In addition, the definition was added to further clarify the time when the 72 hour clock starts. In adding a definition for “application for emergency admission” the existing term was clarified, but not substantively changed.

1. ***“Emergency admission” defined. As used in this chapter, “emergency admission” means the temporary detention in a public or private mental health facility or hospital for evaluation, observation, and treatment, pursuant to 433A.160.***

Due to lack of understanding in the community, there was a need to define “emergency admission” to align current practice and with the language of the statute. In addition, the definition was added to further clarify the time when the 72 hour clock starts. In adding a definition for “application for emergency admission” the existing term was clarified, but not substantively changed. Conforming changes have been made throughout the statute.

1. Amend the following sections of Chapter 433A

**NRS 433A.115  “Person *in a mental health crisis*** **~~with mental illness~~” defined.**

~~1.~~  As used in ~~NRS 433A.115 to 433A.330, inclusive~~ ***this chapter***, unless the context otherwise requires, “person ~~with mental illness~~ ***in a mental health crisis***” means any person ~~whose~~ ***who has a mental illness, as defined by NRS 433.164, and as a result of that mental illness their*** capacity to exercise self-control, judgement and discretion in the conduct of the person’s affairs and social relations or to care for his or her personal needs is diminished~~, as a result of a mental illness,~~ to the extent that the person presents a ~~clear and present danger of harm~~ ***substantial likelihood of serious harm*** to himself or herself or others ***without treatment.***~~, but does not include any person in whom that capacity is diminished by epilepsy, intellectual disability, dementia, delirium, brief periods of intoxication caused by alcohol or drugs, or dependence upon or addiction to alcohol or drugs, unless a mental illness that can be diagnosed is also present which contributes to the diminished capacity of the person~~.

~~2. A person presents a clear and present danger of harm to himself or herself if, within the immediately preceding 30 days, the person has, as a result of a mental illness:~~

~~(a) Acted in a manner from which it may reasonably be inferred that, without the care, supervision or continued assistance of others, the person will be unable to satisfy his or her need for nourishment, personal or medical care, shelter, self-protection or safety, and if there exists a reasonable probability that the person’s death, serious bodily injury or physical debilitation will occur within the next following 30 days unless he or she is admitted to a mental health facility or required to participate in a program of community-based or outpatient services pursuant to the provisions of~~ [~~NRS 433A.115~~](https://www.leg.state.nv.us/NRS/NRS-433A.html#NRS433ASec115) ~~to~~ [~~433A.330~~](https://www.leg.state.nv.us/NRS/NRS-433A.html#NRS433ASec330)~~, inclusive, and adequate treatment is provided to the person;~~

~~(b) Attempted or threatened to commit suicide or committed acts in furtherance of a threat to commit suicide, and if there exists a reasonable probability that the person will commit suicide unless he or she is admitted to a mental health facility or required to participate in a program of community-based or outpatient services pursuant to the provisions of~~ [~~NRS 433A.115~~](https://www.leg.state.nv.us/NRS/NRS-433A.html#NRS433ASec115) ~~to~~ [~~433A.330~~](https://www.leg.state.nv.us/NRS/NRS-433A.html#NRS433ASec330)~~, inclusive, and adequate treatment is provided to the person; or~~

~~(c) Mutilated himself or herself, attempted or threatened to mutilate himself or herself or committed acts in furtherance of a threat to mutilate himself or herself, and if there exists a reasonable probability that he or she will mutilate himself or herself unless the person is admitted to a mental health facility or required to participate in a program of community-based or outpatient services pursuant to the provisions of~~ [~~NRS 433A.115~~](https://www.leg.state.nv.us/NRS/NRS-433A.html#NRS433ASec115) ~~to~~ [~~433A.330~~](https://www.leg.state.nv.us/NRS/NRS-433A.html#NRS433ASec330)~~, inclusive, and adequate treatment is provided to the person.~~

~~3.  A person presents a clear and present danger of harm to others if, within the immediately preceding 30 days, the person has, as a result of a mental illness, inflicted or attempted to inflict serious bodily harm on any other person, or made threats to inflict harm and committed acts in furtherance of those threats, and if there exists a reasonable probability that he or she will do so again unless the person is admitted to a mental health facility or required to participate in a program of community-based or outpatient services pursuant to the provisions of~~ [~~NRS 433A.115~~](https://www.leg.state.nv.us/NRS/NRS-433A.html#NRS433ASec115) ~~to~~ [~~433A.330~~](https://www.leg.state.nv.us/NRS/NRS-433A.html#NRS433ASec330)~~, inclusive, and adequate treatment is provided to him or her.~~

The term “person with a mental illness” was changed to “person in mental health crisis” to be more accuracy and remove stigmatizing language. In current language, a person with mental illness is defined as someone who is presenting a clear and present danger of harm to self or others due to their mental illness. In addition, “person with a mental illness” is used to decertify a legal hold in that the clinician attests that the individual “no longer has a mental illness”. Both of these scenarios are inaccurate. In addition, the definition of mental illness was redefined during the 2017 legislative session. This proposal incorporates that change. Conforming changes have been made throughout the statute.

**NRS 433A.140  Voluntary admission: Procedures for admission and release; effect of voluntary release.**

      1.  Any person may apply to:

      (a) A public or private mental health facility in the State of Nevada for admission to the facility; or

      (b) A division facility to receive care, treatment or training provided by the Division,

🡪 as a voluntary consumer for the purposes of observation, diagnosis, care and treatment. In the case of a person who has not attained the age of majority, application for voluntary admission or care, treatment or training may be made on his or her behalf by the person’s spouse, parent or legal guardian.

      2.  If the application is for admission to a division facility, or for care, treatment or training provided by the Division, the applicant must be admitted or provided such services as a voluntary consumer if an examination by personnel of the facility qualified to make such a determination reveals that the person needs and may benefit from services offered by the mental health facility.

      3.  Any person admitted to a public or private mental health facility as a voluntary consumer must be released immediately after the filing of a written request for release with the responsible physician or that physician’s designee within the normal working day, unless~~, within 24 hours after the request,~~ the facility changes the status of the person to an emergency admission pursuant to NRS 433A.145. When a person is released pursuant to this subsection, the facility and its agents and employees are not liable for any debts or contractual obligations, medical or otherwise, incurred or damages caused by the actions of the person.

      4.  Any person admitted to a public or private mental health facility as a voluntary consumer who has not requested release may nonetheless be released by the medical director of the facility when examining personnel at the facility determine that the consumer has recovered or has improved to such an extent that the consumer is not considered a danger to himself or herself or others and that the services of that facility are no longer beneficial to the consumer or advisable.

      5.  A person who requests care, treatment or training from the Division pursuant to this section must be evaluated by the personnel of the Division to determine whether the person is eligible for the services offered by the Division. The evaluation must be conducted:

      (a) Within 72 hours if the person has requested inpatient services; or

      (b) Within 72 regular operating hours, excluding weekends and holidays, if the person has requested community-based or outpatient services.

      6.  This section does not preclude a public facility from making decisions, policies, procedures and practices within the limits of the money made available to the facility.

The 24- hour time period currently allowed for converting a voluntary admission to an emergency admission is inappropriate and inconsistent with actual practice. In current practice, when an application for emergency admission is initiated on a voluntary patient, it is done so immediately.

**NRS 433A.145  Restrictions on change of status from voluntary consumer to emergency admission.**

      1.  If a person ~~with mental illness~~ ***in a mental health crisis*** is admitted to a public or private mental health facility or hospital as a voluntary consumer, the facility or hospital shall not change the status of the person to an emergency admission unless the hospital or facility receives, before the change in status is made, an application for an emergency admission pursuant to NRS 433A.160 and the certificate of a psychiatrist, psychologist, physician, physician assistant, clinical social worker, advanced practice registered nurse or accredited agent of the Department pursuant to NRS 433A.170.

      2.  A person whose status is changed pursuant to subsection 1 must not be detained in excess of ~~48~~ ***72*** hours after the change in status is made unless, before the close of the business day on which the ~~48~~ ***72*** hours expires, a written petition is filed with the clerk of the district court pursuant to NRS 433A.200.

      3.  If the period specified in subsection 2 expires on a day on which the office of the clerk of the district court is not open, the written petition must be filed on or before the close of the business day next following the expiration of that period.

The 48-hour time period allowed for detaining a person under an emergency admission after a voluntary admission is extended to 72 hours. This takes into account the elimination of the 24-hour time frame allowed for converting a voluntary admission to an emergency admission per NRS 443A.140. 

**NRS 433A.150  Detention for evaluation, observation and treatment; limitation on time.**

1.  Any person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** may, upon application pursuant to NRS 433A.160 and subject to the provisions of subsection 2, be detained in a public or private mental health facility or hospital under an emergency admission for evaluation, observation and treatment.

      2.  Except as otherwise provided in subsection 3, a person detained pursuant to subsection 1 must be released within 72 hours, including weekends and holidays, after ***the initiation of an application for emergency admission*** ~~the certificate required pursuant to NRS 433A.170 and the examination required by paragraph (a) of subsection 1 of NRS 433A.165 have~~  ~~been completed, if such an examination is required, or within 72 hours, including weekends and holidays, after the person arrives at the mental health facility or hospital, if an examination is not required by paragraph (a) of subsection 1 of NRS 433A.165~~, unless, before the close of the business day on which the 72 hours expires, a written petition for an involuntary court-ordered admission to a mental health facility is filed with the clerk of the district court pursuant to NRS 433A.200, including, without limitation, the documents required pursuant to NRS 433A.210, or the status of the person is changed to a voluntary admission.

      3.  If the period specified in subsection 2 expires on a day on which the office of the clerk of the district court is not open, the written petition must be filed on or before the close of the business day next following the expiration of that period.

The language “initiation of an application for emergency admission” was inserted to clarify that the 72-hour detention authorized by statute begins at the date and time initially written on the first page of the application.

**NRS 433A.160  Procedure for admission; evaluation at time of admission; approval by psychiatrist.**

      1.  Except as otherwise provided in subsection 2, an application for the emergency admission of a person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** for evaluation, observation and treatment may only be made by ~~an accredited agent of the Department,~~ an officer authorized to make arrests in the State of Nevada or a physician, physician assistant, psychologist, marriage and family therapist, clinical professional counselor, social worker or registered nurse. The agent, officer, physician, physician assistant, psychologist, marriage and family therapist, clinical professional counselor, social worker or registered nurse may:

      (a) Without a warrant:

             (1) Take a person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** into custody to apply for the emergency admission of the person for evaluation, observation and treatment; and

             (2) Transport the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** to a public or private mental health facility or hospital for that purpose, or arrange for the person to be transported by:

                   (I) A local law enforcement agency;

                   (II) A system for the nonemergency medical transportation of persons whose operation is authorized by the Nevada Transportation Authority;

                   (III) An entity that is exempt pursuant to NRS 706.745 from the provisions of NRS 706.386 or 706.421; ~~or~~

***(IV) Accredited agent; or***

(V) If medically necessary, an ambulance service that holds a permit issued pursuant to the provisions of chapter 450B of NRS,

🡪only if the agent, officer, physician, physician assistant, psychologist, marriage and family therapist, clinical professional counselor, social worker or registered nurse has, based upon his or her personal observation of the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis***, probable cause to believe that the person has a mental illness and, because of that illness, is likely to harm himself or herself or others if allowed his or her liberty.

      (b) Apply to a district court for an order requiring:

             (1) Any peace officer to take a person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** into custody to allow the applicant for the order to apply for the emergency admission of the person for evaluation, observation and treatment; and

             (2) Any agency, system or service described in subparagraph (2) of paragraph (a) to transport the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** to a public or private mental health facility or hospital for that purpose.

🡪 The district court may issue such an order only if it is satisfied that there is probable cause to believe that the person has a mental illness and, because of that illness, is likely to harm himself or herself or others if allowed his or her liberty.

      2.  An application for the emergency admission of a person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** for evaluation, observation and treatment may be made by a spouse, parent, adult child or legal guardian of the person. The spouse, parent, adult child or legal guardian and any other person who has a legitimate interest in the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** may apply to a district court for an order described in paragraph (b) of subsection 1.

      3.  The application for the emergency admission of a person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** for evaluation, observation and treatment must reveal the circumstances under which the person was taken into custody and the reasons therefor.

      4.  Except as otherwise provided in this subsection, each person admitted to a public or private mental health facility or hospital under an emergency admission must be evaluated at the time of admission by a psychiatrist or a psychologist. If a psychiatrist or a psychologist is not available to conduct an evaluation at the time of admission, a physician or an advanced practice registered nurse who has the training and experience prescribed by the State Board of Nursing pursuant to NRS 632.120 may conduct the evaluation. Each such emergency admission must be approved by a psychiatrist.

      5.  As used in this section, “an accredited agent of the Department” means any person or organization appointed or designated by the Director of the Department to ~~take into custody and~~ transport to a mental health facility pursuant to subsections 1 and 2 those persons in need of emergency admission.

***6. The number of applications for emergency admission received by a healthcare facility, as defined in*** [***NRS 449.0151***](https://www.leg.state.nv.us/NRS/NRS-449.html#NRS449Sec0151)***, and any other details as determined by the Division shall be reported to the Division. (upon adoption of regulations)***

***7. The Division may adopt regulations governing the procedures for reporting all applications for emergency admission.***

***8. The Division shall adopt regulations governing the application and oversight of authorized agents as used in this section.***

Currently an accredited agent may be appointed by the Director of DHHS to detain and transport individuals for application for emergency admission. However, historically this position has never been utilized. Currently due to lack of transportation alternatives, many individuals in rural counties are transported by law enforcement which is problematic for several reasons including lack of patient care and burden on rural county resources. This change limits the scope of an accredited agent to now transportation only as authorized by the Division.

Currently there is no mechanism in place in which to collect data about emergency admissions. Stakeholders statewide perceive this to be a major impediment to identifying gaps, needs, and resources. These changes allow the Division to adopt a process for collecting this information.

**NRS 433A.165  Examination required before admission of person to facility; treatment of certain medical conditions required before admission to facility; payment of costs; exceptions; regulations.**

      1.  Before a person alleged to be a person with mental illness may be admitted to a public or private mental health facility pursuant to NRS 433A.160, the person must:

      (a) First be examined by a licensed physician or physician assistant licensed pursuant to chapter 630 or 633 of NRS or an advanced practice registered nurse licensed pursuant to NRS 632.237 at any location where such a physician, physician assistant or advanced practice registered nurse is authorized to conduct such an examination to determine whether the person has a medical ~~problem~~ ***condition***, other than a psychiatric ~~problem~~ ***condition***, which requires immediate treatment; and

      (b) If such treatment is required, be admitted for the appropriate medical care:

             (1) To a hospital if the person is in need of emergency services or care; or

             (2) To another appropriate medical facility if the person is not in need of emergency services or care.

      2.  If a person ~~with a mental illness~~ ***in a mental health crisis*** has a medical problem in addition to a psychiatric problem which requires medical treatment that requires more than 72 hours to complete, the licensed physician, physician assistant or advanced practice registered nurse who examined the person must:

      (a) On the first business day after determining that such medical treatment is necessary file with the clerk of the district court a written petition to admit the person to a public or private mental health facility pursuant to NRS 433A.160 after the medical treatment has been completed. The petition must:

             (1) Include, without limitation, the medical condition of the person and the purpose for continuing the medical treatment of the person; and

             (2) Be accompanied by a copy of the application for the emergency admission of the person required pursuant to NRS 433A.160 and the certificate required pursuant to NRS 433A.170.

      (b) Seven days after filing a petition pursuant to paragraph (a) and every 7 days thereafter, file with the clerk of the district court an update on the medical condition and treatment of the person.

      3.  The examination and any transfer of the person from a facility when the person has an emergency medical condition and has not been stabilized must be conducted in compliance with:

      (a) The requirements of 42 U.S.C. § 1395dd and any regulations adopted pursuant thereto, and must involve a person authorized pursuant to federal law to conduct such an examination or certify such a transfer; and

      (b) The provisions of NRS 439B.410.

      4.  The cost of the examination must be paid by the county in which the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** resides if services are provided at a county hospital located in that county or a hospital or other medical facility designated by that county, unless the cost is voluntarily paid by the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** or, on the person’s behalf, by his or her insurer or by a state or federal program of medical assistance.

      5.  The county may recover all or any part of the expenses paid by it, in a civil action against:

      (a) The person whose expenses were paid;

      (b) The estate of that person; or

      (c) A responsible relative as prescribed in NRS 433A.610, to the extent that financial ability is found to exist.

      6.  The cost of treatment, including hospitalization, for a person who is indigent must be paid pursuant to NRS 428.010 by the county in which the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** resides.

      7.  The provisions of this section do not require the Division to provide examinations required pursuant to subsection 1 at a Division facility if the Division does not have the:

      (a) Appropriate staffing levels of physicians, physician assistants, advanced practice registered nurses or other appropriate staff available at the facility as the Division determines is necessary to provide such examinations; or

      (b) Appropriate medical laboratories as the Division determines is necessary to provide such examinations.

      8.  The Division shall adopt regulations to carry out the provisions of this section, including, without limitation, regulations that:

      (a) Define “emergency services or care” as that term is used in this section; ~~and~~

      (b) Prescribe the type of medical facility that a person may be admitted to pursuant to subparagraph (2) of paragraph (b) of subsection 1~~.~~ ***; and***

***(c)   Prescribe the process for conducting an examination required by this section to determine whether the person has a medical condition, other than a psychiatric condition, which requires an immediate treatment. (Effective on January 1, 2020).***

      9.  As used in this section, “medical facility” has the meaning ascribed to it in NRS 449.0151.

**Changing the term “problem” to “condition” is more clinically accurate language. Additionally, the Division is required to define medical clearance through regulation.**

**NRS 433A.170  Certificate of certain providers of health care or accredited agent of the Department required.**Except as otherwise provided in this section, the administrative officer of a facility operated by the Division or of any other public or private mental health facility or hospital shall not accept an application for an emergency admission under NRS 433A.160 unless that application is accompanied by a certificate of a licensed psychologist, a physician, a physician assistant under the supervision of a psychiatrist, a clinical social worker who has the psychiatric training and experience prescribed by the Board of Examiners for Social Workers pursuant to NRS 641B.160, an advanced practice registered nurse who has the psychiatric training and experience prescribed by the State Board of Nursing pursuant to NRS 632.120 or an accredited agent of the Department stating that he or she has examined the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** and that he or she has concluded that the person has a mental illness and, because of that illness, is likely to harm himself or herself or others if allowed his or her liberty. The certificate required by this section may be obtained from a licensed psychologist, physician, physician assistant, clinical social worker, advanced practice registered nurse or accredited agent of the Department who is employed by the public or private mental health facility or hospital to which the application is made.

**NRS 433A.195  Procedure for release.**A licensed physician on the medical staff of a facility operated by the Division or of any other public or private mental health facility or hospital may release a person admitted pursuant to NRS 433A.160 upon completion of a certificate which meets the requirements of NRS 433A.197 signed by a licensed physician on the medical staff of the facility or hospital, a physician assistant under the supervision of a psychiatrist, psychologist, a clinical social worker who has the psychiatric training and experience prescribed by the Board of Examiners for Social Workers pursuant to NRS 641B.160, an advanced practice registered nurse who has the psychiatric training and experience prescribed by the State Board of Nursing pursuant to NRS 632.120 or an accredited agent of the Department stating that he or she has personally observed and examined the person and that he or she has concluded that the person is not a person ~~with a mental illness~~ ***in a mental health crisis***.

**NRS 433A.197  Requirements for and limitations on applications and certificates.** 1.  An application or certificate authorized under subsection 1 of NRS 433A.160 or NRS 433A.170 or [433A.195](https://www.leg.state.nv.us/NRS/NRS-433A.html#NRS433ASec195) must not be considered if made by a psychologist, physician, physician assistant, clinical social worker, advanced practice registered nurse or accredited agent of the Department who is related by blood or marriage within the second degree of consanguinity or affinity to the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis***, or who is financially interested in the facility in which the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** is to be detained.      2.  An application or certificate of any examining person authorized under NRS 433A.170 must not be considered unless it is based on personal observation and examination of the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** made by such examining person not more than 72 hours prior to the making of the application or certificate. The certificate required pursuant to NRS 433A.170 must set forth in detail the facts and reasons on which the examining person based his or her opinions and conclusions.      3.  A certificate authorized pursuant to NRS 433A.195 must not be considered unless it is based on personal observation and examination of the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** made by the examining physician, physician assistant, psychologist, clinical social worker, advanced practice registered nurse or accredited agent of the Department. The certificate authorized pursuant to NRS 433A.195 must describe in detail the facts and reasons on which the examining physician, physician assistant, psychologist, clinical social worker, advanced practice registered nurse or accredited agent of the Department based his or her opinions and conclusions.

**NRS 433A.200  Filing of petition; certificate or statement of alleged mental illness; statement of parent consenting to treatment of minor; proceeding for admission of defendant in criminal action upon motion.**

      1.  Except as otherwise provided in subsection 3 and NRS 432B.6075, a proceeding for an involuntary court-ordered admission of any person in the State of Nevada may be commenced by the filing of a petition for the involuntary admission to a mental health facility or to a program of community-based or outpatient services with the clerk of the district court of the county where the person who is to be treated resides. The petition may be filed by the spouse, parent, adult children or legal guardian of the person to be treated or by any physician, physician assistant, psychologist, social worker or registered nurse, by an accredited agent of the Department or by any officer authorized to make arrests in the State of Nevada. The petition must be accompanied:

      (a) By a certificate of a physician, a licensed psychologist, a physician assistant under the supervision of a psychiatrist, a clinical social worker who has the psychiatric training and experience prescribed by the Board of Examiners for Social Workers pursuant to NRS 641B.160, an advanced practice registered nurse who has the psychiatric training and experience prescribed by the State Board of Nursing pursuant to NRS 632.120 or an accredited agent of the Department stating that he or she has examined the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** and has concluded that the person has a mental illness and, because of that illness, is likely to harm himself or herself or others if allowed his or her liberty or if not required to participate in a program of community-based or outpatient services; or

      (b) By a sworn written statement by the petitioner that:

             (1) The petitioner has, based upon the petitioner’s personal observation of the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis***, probable cause to believe that the person has a mental illness and, because of that illness, is likely to harm himself or herself or others if allowed his or her liberty or if not required to participate in a program of community-based or outpatient services; and

             (2) The person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** has refused to submit to examination or treatment by a physician, psychiatrist, licensed psychologist or advanced practice registered nurse who has the psychiatric training and experience prescribed by the State Board of Nursing pursuant to NRS 632.120.

      2.  Except as otherwise provided in NRS 432B.6075, if the person to be treated is a minor and the petitioner is a person other than a parent or guardian of the minor, a petition submitted pursuant to subsection 1 must, in addition to the certificate or statement required by that subsection, include a statement signed by a parent or guardian of the minor that the parent or guardian does not object to the filing of the petition.

      3.  A proceeding for the involuntary court-ordered admission of a person who is the defendant in a criminal proceeding in the district court to a program of community-based or outpatient services may be commenced by the district court, on its own motion, or by motion of the defendant or the district attorney if:

      (a) The defendant has been examined in accordance with NRS 178.415;

      (b) The defendant is not eligible for commitment to the custody of the Administrator pursuant to NRS 178.461; and

      (c) The Division makes a clinical determination that placement in a program of community-based or outpatient services is appropriate.

**NRS 433A.210  Requirements of petition that is filed after emergency admission.**In addition to the requirements of NRS 433A.200, a petition filed pursuant to that section with the clerk of the district court to commence proceedings for involuntary court-ordered admission of a person pursuant to NRS 433A.145 or 433A.150 must include a certified copy of:

      1.  The application for the emergency admission of the person made pursuant to NRS 433A.160; and

      2.  A petition executed by a psychiatrist, licensed psychologist, physician or advanced practice registered nurse who has the psychiatric training and experience prescribed by the State Board of Nursing pursuant to NRS 632.120, including, without limitation, a sworn statement that:

      (a) He or she has examined the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis***;

      (b) In his or her opinion, there is a reasonable degree of certainty that the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** suffers from a mental illness;

      (c) Based on his or her personal observation of the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** and other facts set forth in the petition, the person poses a risk of imminent harm to himself or herself or others; and

      (d) In his or her opinion, involuntary admission of the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** to a mental health facility or hospital is medically necessary to prevent the person from harming himself or herself or others.

**NRS 433A.215  Application for writ of habeas corpus before initial hearing.**If an application for a writ of habeas corpus is made by, or on behalf of, a person ~~with mental illness~~ ***in a mental health crisis*** or who is alleged to be a person ~~with mental illness~~ ***in a mental health*** ***crisis*** before the initial hearing on a petition for the involuntary court-ordered admission of the person to a mental health facility or a program of community-based or outpatient services, the court shall conduct a hearing on the application as soon as practicable.

**NRS 433A.220  Hearing on petition or motion; notice; discharge of person before hearing.** 1.  Immediately after the clerk of the district court receives any petition filed pursuant to NRS 433A.200 or 433A.210, the clerk shall transmit the petition to the appropriate district judge, who shall set a time, date and place for its hearing. Immediately after a motion is made pursuant to subsection 3 of NRS 433A.200, the district judge shall set a time, date and place for its hearing. The date must be within **~~[5]~~ *6*** judicial days after the date on which the petition is received by the clerk or the motion is made, as applicable***, unless otherwise stipulated to by counsel***. If the Chief Judge, if any, of the district court has assigned a district court judge or hearing master to preside over such hearings, that judge or hearing master must preside over the hearing.      2.  The court shall give notice of the petition or motion and of the time, date and place of any proceedings thereon to the subject of the petition or motion, his or her attorney, if known, the person’s legal guardian, the petitioner, if applicable, the district attorney of the county in which the court has its principal office, the local office of an agency or organization that receives money from the Federal Government pursuant to 42 U.S.C. §§ 10801 et seq., to protect and advocate the rights of persons ~~with mental illness~~ ***in a mental health crisis*** and the administrative office of any public or private mental health facility in which the subject of the petition or motion is detained.     3.  The provisions of this section do not preclude a facility from discharging a person before the time set pursuant to this section for the hearing concerning the person, if appropriate. If the person has a legal guardian, the facility shall notify the guardian prior to discharging the person from the facility. The legal guardian has discretion to determine where the person will be released, taking into consideration any discharge plan proposed by the facility assessment team. If the legal guardian does not inform the facility as to where the person will be released within 3 days after the date of notification, the facility shall discharge the person according to its proposed discharge plan.

Currently, petitions for involuntary court ordered admission must be heard within 5 judicial days of filing. This change will extend that time by one day, allowing courts to hear these petitions once per week instead of twice per week. This allows courts with limited resources to reasonably and efficiently practice within the law, and realize significant cost savings for tax payers. It also allows for the parties, through counsel, to stipulate to a continuance beyond the required timeframe.

**NRS 433A.230  Bond of petitioner.**The court in its discretion may require any petitioner under NRS 433A.200, except any duly accredited agent of the Department or any officer authorized to make arrests in the State of Nevada, to file an undertaking with surety to be approved by the court in the amount the court deems proper, conditioned to save harmless the person alleged to be ~~mentally ill~~ ***in a mental health crisis*** by reason of costs incurred, including attorney fees, if any, and damages suffered by the person as a result of such action.

**NRS 433A.240  Examination of person alleged to be ~~mentally ill~~** ***in a mental health crisis*; protective custody pending hearing.**

      1.  After the filing of a petition to commence proceedings for the involuntary court-ordered admission of a person pursuant to NRS 433A.200 or 433A.210, the court shall promptly cause two or more physicians, licensed psychologists or advanced practice registered nurses who have the psychiatric training and experience prescribed by the State Board of Nursing pursuant to NRS 632.120, one of whom must always be a physician, to examine the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis***, or request an evaluation by an evaluation team from the Division of the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis***.

      2.  Subject to the provisions in subsection 1, the judge assigned to hear a proceeding brought pursuant to NRS 433A.200 to 433A.330, inclusive, shall have complete discretion in selecting the medical professionals to conduct the examination required pursuant to subsection 1.

      3.  After the filing of a motion pursuant to subsection 3 of NRS 433A.200, the court shall promptly request an evaluation by an evaluation team from the Division of the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis***.

      4.  To conduct the examination of a person who is not being detained at a mental health facility or hospital under emergency admission pursuant to an application made pursuant to NRS 433A.160, the court may order a peace officer to take the person into protective custody and transport the person to a mental health facility or hospital where the person may be detained until a hearing is had upon the petition or motion, as applicable.

      5.  If the person is not being detained under an emergency admission pursuant to an application made pursuant to NRS 433A.160, the person may be allowed to remain in his or her home or other place of residence pending an ordered examination or examinations and to return to his or her home or other place of residence upon completion of the examination or examinations. The person may be accompanied by one or more of his or her relations or friends to the place of examination.

      6.  Each physician, licensed psychologist and advanced practice registered nurse who examines a person pursuant to subsection 1 or 3 shall, in conducting such an examination, consider the least restrictive treatment appropriate for the person.

      7.  Each physician, licensed psychologist and advanced practice registered nurse who examines a person pursuant to subsection 1 shall, not later than 24 hours before the hearing set pursuant to NRS 433A.220, submit to the court in writing a summary of his or her findings and evaluation regarding the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis***.

**NRS 433A.270  Right to counsel; compensation of counsel; recess; continuation of representation by counsel during involuntary admission; duties of district attorney.**

      1.  The person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** or any relative or friend on the person’s behalf is entitled to retain counsel to represent the person in any proceeding before the district court relating to involuntary court-ordered admission, and if he or she fails or refuses to obtain counsel, the court shall advise the person and the person’s guardian or next of kin, if known, of such right to counsel and shall appoint counsel, who may be the public defender or his or her deputy.

      2.  Any counsel appointed pursuant to subsection 1 must be awarded compensation by the court for his or her services in an amount determined by it to be fair and reasonable. The compensation must be charged against the estate of the person for whom the counsel was appointed or, if the person is indigent, against the county where the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** last resided.

      3.  The court shall, at the request of counsel representing the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** in proceedings before the court relating to involuntary court-ordered admission, grant a recess in the proceedings for the shortest time possible, but for not more than 5 days, to give the counsel an opportunity to prepare his or her case.

      4.  If the person alleged to be a person ~~with a mental illness~~ ***in a mental health crisis*** is involuntarily admitted to a program of community-based or outpatient services, counsel shall continue to represent the person until the person is released from the program. The court shall serve notice upon such counsel of any action that is taken involving the person while the person is admitted to the program of community-based or outpatient services.

      5.  Each district attorney or his or her deputy shall appear and represent the State in all involuntary court-ordered admission proceedings in the district attorney’s county. The district attorney is responsible for the presentation of evidence, if any, in support of the involuntary court-ordered admission of a person to a mental health facility or to a program of community-based or outpatient services in proceedings held pursuant to NRS 433A.200 or 433A.210.   

**NRS 433A.280  Testimony.**In proceedings for involuntary court-ordered admission, the court shall hear and consider all relevant testimony, including, but not limited to, the testimony of examining personnel who participated in the evaluation of the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** and the certificates of physicians, certified psychologists or advanced practice registered nurses accompanying the petition, if applicable. The court may consider testimony relating to any past actions of the person alleged to be a person ~~with mental illness~~ ***in a mental health crisis*** if such testimony is probative of the question of whether the person is presently mentally ill and presents a ~~clear and present danger of harm~~ ***substantial likelihood of serious harm*** to himself or herself or others.

**NRS 433A.290  Right of person alleged to be ~~mentally ill~~** ***in a mental health crisis* to be present and testify.**In proceedings for an involuntary court-ordered admission, the person with respect to whom the proceedings are held shall be present and may, at the discretion of the court, testify.

**NRS 433A.310  Findings and order; conditions for admission to program of community-based or outpatient services; expiration and renewal of admission to facility or program; alternative courses of treatment; transmittal of record to Central Repository for Nevada Records of Criminal History and law enforcement agencies.**

1.  Except as otherwise provided in subsection 2 and NRS 432B.6076 and 432B.6077, if the district court finds, after proceedings for the involuntary court-ordered admission of a person:

(a) That there is not clear and convincing evidence that the person with respect to whom the hearing was held has a mental illness or exhibits observable behavior such that the person is likely to harm himself or herself or others if allowed his or her liberty or if not required to participate in a program of community-based or outpatient services, the court shall enter its finding to that effect and the person must not be involuntarily admitted to a public or private mental health facility or to a program of community-based or outpatient services***, and if the person is admitted to a public or private mental health facility or hospital pursuant to NRS 433A.160, they must be discharged within 24 hours of entry of the court order unless the facility changes the status of the person to a voluntary admission.***  (b) That there is clear and convincing evidence that the person with respect to whom the hearing was held has a mental illness and, because of that illness, is likely to harm himself or herself or others if allowed his or her liberty or if not required to participate in a program of community-based or outpatient services, the court may order the involuntary admission of the person for the most appropriate course of treatment, including, without limitation, admission to a public or private mental health facility or participation in a program of community-based or outpatient services. The order of the court must be interlocutory and must not become final if, within 30 days after the involuntary admission, the person is unconditionally released pursuant to NRS 433A.390.

      2.  If the district court finds, after proceedings for the involuntary court-ordered admission of a defendant in a criminal proceeding pursuant to subsection 3 of NRS 433A.200:

      (a) That there is not clear and convincing evidence that the defendant with respect to whom the hearing was held has a mental illness or exhibits observable behavior such that the defendant is likely to harm himself or herself or others if allowed his or her liberty or if not required to participate in a program of community-based or outpatient services, the court shall enter its finding to that effect and the person must not be involuntarily admitted to a program of community-based or outpatient services.

      (b) That there is clear and convincing evidence that the defendant with respect to whom the hearing was held has a mental illness and, because of that illness, is likely to harm himself or herself or others if allowed his or her liberty or if not required to participate in a program of community-based or outpatient services, except as otherwise provided in this paragraph, the court shall order the involuntary admission of the defendant for participation in a program of community-based or outpatient services and suspend further proceedings in the criminal proceeding against the defendant until the defendant completes or is removed from the program. If the offense allegedly committed by the defendant is a category A or B felony or involved the use or threatened use of force or violence, the court may not order the involuntary admission of the defendant for participation in a program pursuant to this paragraph unless the prosecuting attorney stipulates to the assignment. The order of the court must be interlocutory and must not become final if, within 30 days after the involuntary admission, the person is unconditionally released pursuant to NRS 433A.390. If the defendant successfully completes a program of community-based or outpatient services to the satisfaction of the court, the court shall dismiss the criminal charges against the defendant with prejudice.

      3.  If, pursuant to [NRS 176A.400](https://www.leg.state.nv.us/NRS/NRS-176A.html#NRS176ASec400), the district court issues an order granting probation to a defendant in a criminal proceeding with a condition that the defendant submit to mental health treatment and comply with instructions, admission to a program of community-based or outpatient services may be used to satisfy such a condition if the Division makes a clinical determination that placement in a program of community-based or outpatient services is appropriate.

      4.  A court shall not admit a person to a program of community-based or outpatient services unless:

      (a) A program of community-based or outpatient services is available in the community in which the person resides or is otherwise made available to the person;

      (b) The person is 18 years of age or older;

      (c) The person has a history of noncompliance with treatment for mental illness;

      (d) The person is capable of surviving safely in the community in which he or she resides with available supervision;

      (e) The court determines that, based on the person’s history of treatment for mental illness, the person needs to be admitted to a program of community-based or outpatient services to prevent further disability or deterioration of the person which is likely to result in harm to himself or herself or others;

      (f) The current mental status of the person or the nature of the person’s illness limits or negates his or her ability to make an informed decision to seek treatment for mental illness voluntarily or to comply with recommended treatment for mental illness;

      (g) The program of community-based or outpatient services is the least restrictive treatment which is in the best interest of the person; and

      (h) The court has approved a plan of treatment developed for the person pursuant to [NRS 433A.315](https://www.leg.state.nv.us/NRS/NRS-433A.html#NRS433ASec315).

      5.  Except as otherwise provided in [NRS 432B.608](https://www.leg.state.nv.us/NRS/NRS-432B.html#NRS432BSec608), an involuntary admission pursuant to paragraph (b) of subsection 1 or paragraph (b) of subsection 2 automatically expires at the end of 6 months if not terminated previously by the medical director of the public or private mental health facility as provided for in subsection 2 of [NRS 433A.390](https://www.leg.state.nv.us/NRS/NRS-433A.html#NRS433ASec390) or by the professional responsible for providing or coordinating the program of community-based or outpatient services as provided for in subsection 3 of [NRS 433A.390](https://www.leg.state.nv.us/NRS/NRS-433A.html#NRS433ASec390). Except as otherwise provided in [NRS 432B.608](https://www.leg.state.nv.us/NRS/NRS-432B.html#NRS432BSec608), at the end of the court-ordered period of treatment, the Division, any mental health facility that is not operated by the Division or a program of community-based or outpatient services may petition to renew the involuntary admission of the person for additional periods not to exceed 6 months each. For each renewal, the petition must include evidence which meets the same standard set forth in subsection 1 or 2 that was required for the initial period of admission of the person to a public or private mental health facility or to a program of community-based or outpatient services.

      6.  Before issuing an order for involuntary admission or a renewal thereof, the court shall explore other alternative courses of treatment within the least restrictive appropriate environment, including involuntary admission to a program of community-based or outpatient services, as suggested by the evaluation team who evaluated the person, or other persons professionally qualified in the field of psychiatric mental health, which the court believes may be in the best interests of the person.

      7.  If the court issues an order involuntarily admitting a person to a public or private mental health facility or to a program of community-based or outpatient services pursuant to this section, the court shall, notwithstanding the provisions of [NRS 433A.715](https://www.leg.state.nv.us/NRS/NRS-433A.html#NRS433ASec715), cause, within 5 business days after the order becomes final pursuant to this section, on a form prescribed by the Department of Public Safety, a record of the order to be transmitted to:

      (a) The Central Repository for Nevada Records of Criminal History, along with a statement indicating that the record is being transmitted for inclusion in each appropriate database of the National Instant Criminal Background Check System; and

      (b) Each law enforcement agency of this State with which the court has entered into an agreement for such transmission, along with a statement indicating that the record is being transmitted for inclusion in each of this State’s appropriate databases of information relating to crimes.

      8.  As used in this section, “National Instant Criminal Background Check System” has the meaning ascribed to it in [NRS 179A.062](https://www.leg.state.nv.us/NRS/NRS-179A.html#NRS179ASec062).

Currently, when a court denies a petition for involuntary court ordered admission of a patient being detained, Nevada law doesn’t identify a time period for their release. This change provides hospitals with no more than 24 hours to ensure a safe discharge.

**NRS 433A.327  Conditional release of person in program: When allowed; no liability of State; notice to court, district attorney and legal guardian; order to resume participation in program; judicial review of order to resume participation in program.**

      1.  Except as otherwise provided in subsection 3, any person involuntarily admitted to a program of community-based or outpatient services may be conditionally released from the program when, in the judgment of the professional responsible for providing or coordinating the program of community-based or outpatient services, the person does not present a danger of harm to himself or herself or others. The professional responsible for providing or coordinating the program of community-based or outpatient services shall prescribe the period for which the conditional release is effective. The period must not extend beyond the last day of the court-ordered period of admission to a program of community-based or outpatient services pursuant to NRS 433A.310.

      2.  When a person is conditionally released pursuant to subsection 1, the State of Nevada, the agents and employees of the State or a mental health facility, the professionals responsible for providing or coordinating programs of community-based or outpatient services and any other professionals providing mental health services are not liable for any debts or contractual obligations incurred, medical or otherwise, or damages caused by the actions of the person who is released.

      3.  A person who is involuntarily admitted to a program of community-based or outpatient services may be conditionally released only if, at the time of the release, written notice is given to the court which ordered the person to participate in the program, to the attorney of the person and to the district attorney of the county in which the proceedings for admission were held.

      4.  Except as otherwise provided in subsection 6, the professional responsible for providing or coordinating the program of community-based or outpatient services shall order a person who is conditionally released pursuant to subsection 1 to resume participation in the program if the professional determines that the conditional release is no longer appropriate because that person presents a ~~clear and present danger of harm~~ ***substantial likelihood of serious harm*** to himself or herself or others. Except as otherwise provided in this subsection, the professional responsible for providing or coordinating the program of community-based or outpatient services shall, at least 3 days before the issuance of the order to resume participation, give written notice of the order to the court that admitted the person to the program. If an emergency exists in which the person presents an imminent threat of danger of harm to himself or herself or others, the order must be submitted to the court not later than 1 business day after the order is issued.

      5.  The court shall review an order submitted pursuant to subsection 4 and the current condition of the person who was ordered to resume participation in a program of community-based or outpatient services at the next regularly scheduled hearing for the review of petitions for involuntary admissions, but in no event later than 5 judicial days after participation in the program is resumed. The court shall serve notice on the person who was ordered to resume participation in the program and to his or her attorney of the time, date and place of the hearing and of the facts necessitating that the person resume participation in the program.

      6.  The provisions of subsection 4 do not apply if the period of conditional release has expired.

**NRS 433A.330  Transportation to facility.**       ~~1.~~  When an involuntary court admission to a mental health facility is ordered under the provisions of this chapter, the involuntarily admitted person, together with the court orders and certificates of the physicians, certified psychologists, advanced practice registered nurses or evaluation team and a full and complete transcript of the notes of the official reporter made at the examination of such person before the court, must be delivered to the sheriff of the county who shall:

~~(a)~~  ***(1)*** Transport the person; or

~~(b)~~  ***(2)*** Arrange for the person to be transported by:          ~~(1)~~ ***(a)***  A system for the nonemergency medical transportation of persons whose operation is authorized by the Nevada Transportation Authority; or             ~~(2)~~ ***(b)***If medically necessary, an ambulance service that holds a permit issued pursuant to the provisions of chapter 450B of NRS,

🡪 to the appropriate public or private mental health facility.

~~2.  No person with mental illness may be transported to the mental health facility without at least one attendant of the same sex or a relative in the first degree of consanguinity or affinity being in attendance.~~

Existing law prohibits an individual from being transported without a relative, friend, or at least one attendant that is of the same sex. This change will allow an individual to be transported by an attendant, regardless of gender.

**NRS 433A.350  Information to be furnished to consumer upon admission to facility or program.**

      1.  Upon admission to any public or private mental health facility or to a program of community-based or outpatient services, each consumer and the consumer’s spouse and legal guardian, if any, must receive a written statement outlining in simple, nontechnical language all procedures for release provided by this chapter, setting out all rights accorded to such a consumer by this chapter and chapters 433 and 433B of NRS and, if the consumer has no legal guardian, describing procedures provided by law for adjudication of incapacity and appointment of a guardian for the consumer.

      2.  Written information regarding the services provided by and means of contacting the local office of an agency or organization that receives money from the Federal Government pursuant to 42 U.S.C. §§ 10801 et seq., to protect and advocate the rights of persons ~~with mental illnesses~~ ***in a mental health crisis*** must be posted in each public and private mental health facility and in each location in which a program of community-based or outpatient services is provided and must be provided to each consumer upon admission.

**NRS 433A.360  Clinical records: Contents; confidentiality.**

      1.  A clinical record for each consumer must be diligently maintained by any division facility, private institution, facility offering mental health services or program of community-based or outpatient services. The record must include information pertaining to the consumer’s admission, legal status, treatment and individualized plan for habilitation. The clinical record is not a public record and no part of it may be released, except:

      (a) If the release is authorized or required pursuant to NRS 439.538.

      (b) The record must be released to physicians, advanced practice registered nurses, attorneys and social agencies as specifically authorized in writing by the consumer, the consumer’s parent, guardian or attorney.

      (c) The record must be released to persons authorized by the order of a court of competent jurisdiction.

      (d) The record or any part thereof may be disclosed to a qualified member of the staff of a division facility, an employee of the Division or a member of the staff of an agency in Nevada which has been established pursuant to the Developmental Disabilities Assistance and Bill of Rights Act of 2000, 42 U.S.C. §§ 15001 et seq., or the Protection and Advocacy for Mentally Ill Individuals Act of 1986, 42 U.S.C. §§ 10801 et seq., when the Administrator deems it necessary for the proper care of the consumer.

      (e) Information from the clinical records may be used for statistical and evaluative purposes if the information is abstracted in such a way as to protect the identity of individual consumers.

      (f) To the extent necessary for a consumer to make a claim, or for a claim to be made on behalf of a consumer for aid, insurance or medical assistance to which the consumer may be entitled, information from the records may be released with the written authorization of the consumer or the consumer’s guardian.

      (g) The record must be released without charge to any member of the staff of an agency in Nevada which has been established pursuant to 42 U.S.C. §§ 15001 et seq. or 42 U.S.C. §§ 10801 et seq. if:

             (1) The consumer is a consumer of that office and the consumer or the consumer’s legal representative or guardian authorizes the release of the record; or

             (2) A complaint regarding a consumer was received by the office or there is probable cause to believe that the consumer has been abused or neglected and the consumer:

                   (I) Is unable to authorize the release of the record because of the consumer’s mental or physical condition; and

                   (II) Does not have a guardian or other legal representative or is a ward of the State.

      (h) The record must be released as provided in NRS 433.332 or 433B.200 and in chapter 629 of NRS.

      2.   ***Information, including information from the clinical record, may be disclosed to providers of health care, as defined by NRS 629.031, if necessary for the treatment of a person in or alleged to be in a mental health crisis.***

***3.*** As used in this section, “consumer” includes any person who seeks, on the person’s own or others’ initiative, and can benefit from, care, treatment and training in a private institution or facility offering mental health services, from treatment to competency in a private institution or facility offering mental health services, or from a program of community-based or outpatient services.

This aligns with current processes allowed by existing state and federal (HIPAA) privacy and information sharing laws amongst treating providers.

**NRS 433A.380  Conditional release: No liability of State; restoration of rights; notice to court, district attorney and legal guardian; order to return to facility; judicial review of order to return to facility.**

      1.  Except as otherwise provided in subsection 4, any person involuntarily admitted by a court may be conditionally released from a public or private mental health facility when, in the judgment of the medical director of the facility, the conditional release is in the best interest of the person and will not be detrimental to the public welfare. The medical director of the facility or the medical director’s designee shall prescribe the period for which the conditional release is effective. The period must not extend beyond the last day of the court-ordered period of treatment pursuant to NRS 433A.310. If the person has a legal guardian, the facility shall notify the guardian before discharging the person from the facility. The legal guardian has discretion to determine where the person will be released, taking into consideration any discharge plan proposed by the facility assessment team. If the legal guardian does not inform the facility as to where the person will be released within 3 days after the date of notification, the facility shall discharge the person according to its proposed discharge plan.

      2.  When a person is conditionally released pursuant to subsection 1, the State or any of its agents or employees are not liable for any debts or contractual obligations, medical or otherwise, incurred or damages caused by the actions of the person.

      3.  When a person who has been adjudicated by a court to be incapacitated is conditionally released from a mental health facility, the administrative officer of the mental health facility shall petition the court for restoration of full civil and legal rights as deemed necessary to facilitate the incapacitated person’s rehabilitation. If the person has a legal guardian, the petition must be filed with the court having jurisdiction over the guardianship.

      4.  A person who was involuntarily admitted by a court because he or she was likely to harm others if allowed to remain at liberty may be conditionally released only if, at the time of the release, written notice is given to the court which admitted him or her, to the person’s legal guardian and to the district attorney of the county in which the proceedings for admission were held.

      5.  Except as otherwise provided in subsection 7, the administrative officer of a public or private mental health facility or the administrative officer’s designee shall order a person who is conditionally released from that facility pursuant to this section to return to the facility if a psychiatrist and a member of that person’s treatment team who is professionally qualified in the field of psychiatric mental health determine, pursuant to NRS 433A.115, that the conditional release is no longer appropriate because that person presents a ~~clear and present danger of harm~~ ***substantial likelihood of serious harm*** to himself or herself or others. Except as otherwise provided in this subsection, the administrative officer or the designee shall, at least 3 days before the issuance of the order to return, give written notice of the order to the court that admitted the person to the facility and to the person’s legal guardian. If an emergency exists in which the person presents an imminent threat of danger of harm to himself or herself or others, the order must be submitted to the court and the legal guardian not later than 1 business day after the order is issued.

      6.  The court shall review an order submitted pursuant to subsection 5 and the current condition of the person who was ordered to return to the facility at its next regularly scheduled hearing for the review of petitions for involuntary court-ordered admissions, but in no event later than 5 judicial days after the person is returned to the facility. The administrative officer or the administrative officer’s designee shall give written notice to the person who was ordered to return to the facility, to the person’s legal guardian and to the person’s attorney, if known, of the time, date and place of the hearing and of the facts necessitating that person’s return to the facility.

      7.  The provisions of subsection 5 do not apply if the period of conditional release has expired.

**NRS 433A.390  Release without further order of court at end of period specified; unconditional early release; notice to court and legal guardian.**

      1.  When a consumer, involuntarily admitted to a mental health facility or to a program of community-based or outpatient services by court order, is released at the end of the period specified pursuant to NRS 433A.310, written notice must be given to the admitting court and to the consumer’s legal guardian at least 10 days before the release of the consumer. The consumer may then be released without requiring further orders of the court. If the consumer has a legal guardian, the facility or the professional responsible for providing or coordinating the program of community-based or outpatient services shall notify the guardian before discharging the consumer from the facility or program. The legal guardian has discretion to determine where the consumer will be released, taking into consideration any discharge plan proposed by the facility assessment team or the professional responsible for providing or coordinating the program of community-based or outpatient services. If the legal guardian does not inform the facility or professional as to where the consumer will be released within 3 days after the date of notification, the facility or professional shall discharge the consumer according to its proposed discharge plan.

      2.  A consumer who is involuntarily admitted to a mental health facility may be unconditionally released before the period specified in NRS 433A.310 when:

      (a) An evaluation team established under NRS 433A.250 or two persons professionally qualified in the field of psychiatric mental health, at least one of them being a physician, determines that the consumer has recovered from his or her mental illness or has improved to such an extent that the consumer is no longer considered to present a ~~clear and present danger of harm~~ ***substantial likelihood of serious harm*** to himself or herself or others; and

      (b) Under advisement from the evaluation team or two persons professionally qualified in the field of psychiatric mental health, at least one of them being a physician, the medical director of the mental health facility authorizes the release and gives written notice to the admitting court and to the consumer’s legal guardian at least 10 days before the release of the consumer. If the consumer has a legal guardian, the facility shall notify the guardian before discharging the consumer from the facility. The legal guardian has discretion to determine where the consumer will be released, taking into consideration any discharge plan proposed by the facility assessment team. If the legal guardian does not inform the facility as to where the consumer will be released within 3 days after the date of notification, the facility shall discharge the consumer according to its proposed discharge plan.

      3.  A consumer who is involuntarily admitted to a program of community-based or outpatient services may be unconditionally released before the period specified in NRS 433A.310 when:

      (a) The professional responsible for providing or coordinating the program of community-based or outpatient services for the consumer determines that the consumer has recovered from his or her mental illness or has improved to such an extent that the consumer is no longer considered to present a ~~clear and present danger of harm~~ ***substantial likelihood of serious harm*** to himself or herself or others; and

      (b) Under advisement from an evaluation team established under NRS 433A.250 or two persons professionally qualified in the field of psychiatric mental health, at least one of them being a physician, the professional responsible for providing or coordinating the program of community-based or outpatient services for the consumer authorizes the release and gives written notice to the admitting court at least 10 days before the release of the consumer from the program.

**NRS 433A.430  Transfer to facility in other state: Examination; contract; objection to transfer; fee for examination.**

      1.  Whenever the Administrator determines that division facilities within the State are inadequate for the care of any person ~~with mental illness~~ ***in a mental health crisis***, the Administrator may designate two physicians, licensed under the provisions of chapter 630 or 633 of NRS and familiar with the field of psychiatry, or advanced practice registered nurses who have the psychiatric training and experience prescribed by the State Board of Nursing pursuant to NRS 632.120, to examine that person. If the two physicians or advanced practice registered nurses concur with the opinion of the Administrator, the Administrator may:

      (a) Transfer the person to a state that is a party to the Interstate Compact on Mental Health ratified and enacted in NRS 433.4543 in the manner provided in the Compact; or

      (b) Contract with appropriate corresponding authorities in any other state of the United States that is not a party to the Compact and has adequate facilities for such purposes for the reception, detention, care or treatment of that person, but if the person in any manner objects to the transfer, the procedures in subsection 3 of NRS 433.484 and subsections 2 and 3 of NRS 433.534 must be followed. The two physicians or advanced practice registered nurses so designated are entitled to a reasonable fee for their services which must be paid by the county of the person’s last known residence.

      2.  Money to carry out the provisions of this section must be provided by direct legislative appropriation.

**NRS 433A.450  Detention and treatment of offender with mental illness.**When a psychiatrist and one other person professionally qualified in the field of psychiatric mental health determines that an offender confined in an institution of the Department of Corrections is a person ~~with mental illness~~ ***in a mental health crisis***, the Director of the Department of Corrections shall apply to the Administrator for the offender’s detention and treatment at a division facility selected by the Administrator. If the Administrator determines that adequate security or treatment is not available in a division facility, the Administrator shall provide, within the resources available to the Division and as the Administrator deems necessary, consultation and other appropriate services for the offender at the place where the offender is confined. It is the Director’s decision whether to accept such services.

**NRS 433A.610  Liability of certain relatives and estate of person admitted to facility for payment of costs; recovery by legal action.**

      1.  When a person is admitted to a division facility or hospital under one of the various forms of admission prescribed by law, the parent or legal guardian of a person ~~with mental illness~~ ***in a mental health crisis*** who is a minor or the spouse of a person ~~with mental illness~~ ***in a mental health crisis***, if of sufficient ability, and the estate of the person ~~with mental illness~~ ***in a mental health crisis***, if the estate is sufficient for the purpose, shall pay the cost of the maintenance for the person ~~with mental illness~~ ***in a mental health crisis***, including treatment and surgical operations, in any hospital in which the person is hospitalized under the provisions of this chapter:

      (a) To the administrative officer if the person is admitted to a division facility; or

      (b) In all other cases, to the hospital rendering the service.

      2.  If a person or an estate liable for the care, maintenance and support of a committed person neglects or refuses to pay the administrative officer or the hospital rendering the service, the State is entitled to recover, by appropriate legal action, all money owed to a division facility or which the State has paid to a hospital for the care of a committed person, plus interest at the rate established pursuant to NRS 99.040.    

**NRS 433A.715  Court required to seal records of admission and treatment; petition to inspect records after sealing; request for release of records; admission to hospital, facility or program deemed to have never occurred after sealing.**

      1.  A court shall seal all court records relating to the admission and treatment of any person who was admitted, voluntarily or as the result of a noncriminal proceeding, to a public or private hospital, a mental health facility or a program of community-based or outpatient services in this State for the purpose of obtaining mental health treatment.

      2.  Except as otherwise provided in subsections 4, 5 and 6, a person or governmental entity that wishes to inspect records that are sealed pursuant to this section must file a petition with the court that sealed the records. Upon the filing of a petition, the court shall fix a time for a hearing on the matter. The petitioner must provide notice of the hearing and a copy of the petition to the person who is the subject of the records. If the person who is the subject of the records wishes to oppose the petition, the person must appear before the court at the hearing. If the person appears before the court at the hearing, the court must provide the person an opportunity to be heard on the matter.

      3.  After the hearing described in subsection 2, the court may order the inspection of records that are sealed pursuant to this section if:

      (a) A law enforcement agency must obtain or maintain information concerning persons who have been admitted to a public or private hospital, a mental health facility or a program of community-based or outpatient services in this State pursuant to state or federal law;

      (b) A prosecuting attorney or an attorney who is representing the person who is the subject of the records in a criminal action requests to inspect the records; or

      (c) The person who is the subject of the records petitions the court to permit the inspection of the records by a person named in the petition.

      4.  A governmental entity is entitled to inspect court records that are sealed pursuant to this section without following the procedure described in subsection 2 if:

      (a) The governmental entity has made a conditional offer of employment to the person who is the subject of the records;

      (b) The position of employment conditionally offered to the person concerns public safety, including, without limitation, employment as a firefighter or peace officer;

      (c) The governmental entity is required by law, rule, regulation or policy to obtain the mental health records of each individual conditionally offered the position of employment; and

      (d) An authorized representative of the governmental entity presents to the court a written authorization signed by the person who is the subject of the records and notarized by a notary public or judicial officer in which the person who is the subject of the records consents to the inspection of the records.

      5.  Upon the request of a public or private hospital or a mental health facility to which a person has been admitted in this State, the court shall:

      (a) Authorize the release of a copy of any order which was entered by the court pursuant to paragraph (b) of subsection 1 of NRS 433A.310 if:

             (1) The request is in writing and includes the name and date of birth of the person who is the subject of the requested order; and

             (2) The hospital or facility certifies that:

                   (I) The person who is the subject of the requested order is, at the time of the request, admitted to the hospital or facility and is being treated for an alleged mental illness; and

                   (II) The requested order is necessary to improve the care which is being provided to the person who is the subject of the order.

      (b) Place the request in the record under seal.

      6.  ***A court may disclose information from the court record to providers of health care, as defined by NRS 629.031, if necessary for the treatment of a person in or alleged to be in a mental health crisis.***

***7.*** Upon its own order, any court of this State may inspect court records that are sealed pursuant to this section without following the procedure described in subsection 2 if the records are necessary and relevant for the disposition of a matter pending before the court. The court may allow a party in the matter to inspect the records without following the procedure described in subsection 2 if the court deems such inspection necessary and appropriate.

~~7~~***8***.  Following the sealing of records pursuant to this section, the admission of the person who is the subject of the records to the public or private hospital, mental health facility or program of community-based or outpatient services, is deemed never to have occurred, and the person may answer accordingly any question related to its occurrence, except in connection with:

      (a) An application for a permit to carry a concealed firearm pursuant to the provisions of NRS 202.3653 to 202.369, inclusive;

      (b) A transfer of a firearm; or

      (c) An application for a position of employment described in subsection 4.

~~8~~***9***.  As used in this section:

      (a) “Firefighter” means a person who is a salaried employee of a fire-fighting agency and whose principal duties are to control, extinguish, prevent and suppress fires. As used in this paragraph, “fire-fighting agency” means a public fire department, fire protection district or other agency of this State or a political subdivision of this State, the primary functions of which are to control, extinguish, prevent and suppress fires.

      (b) “Peace officer” has the meaning ascribed to it in NRS 289.010.

      (c) “Seal” means placing records in a separate file or other repository not accessible to the general public.

Existing law allows hospitals to request certain information from court for the purpose of care. This change allows courts to disclose information from the court record to treating providers in order to establish or maintain continuity of care.

**NRS 433A.750  Unlawful acts; penalties.**

      1.  A person who:

      (a) Without probable cause for believing a person to be ~~mentally ill~~ ***in a mental health crisis*** causes or conspires with or assists another to cause the involuntary court-ordered admission of the person under this chapter; or

      (b) Causes or conspires with or assists another to cause the denial to any person of any right accorded to the person under this chapter,

 is guilty of a category D felony and shall be punished as provided in NRS 193.130.

      2.  Unless a greater penalty is provided in subsection 1, a person who knowingly and willfully violates any provision of this chapter regarding the admission of a person to, or discharge of a person from, a public or private mental health facility or a program of community-based or outpatient services is guilty of a gross misdemeanor.

      3.  A person who, without probable cause for believing another person to be ~~mentally ill~~ ***in a mental health crisis***, executes a petition, application or certificate pursuant to this chapter, by which the person secures or attempts to secure the apprehension, hospitalization, detention, admission or restraint of the person alleged to be ~~mentally ill~~ ***in a mental health crisis***, or any physician, psychiatrist, licensed psychologist, advanced practice registered nurse or other person professionally qualified in the field of psychiatric mental health who knowingly makes any false certificate or application pursuant to this chapter as to the mental condition of any person is guilty of a category D felony and shall be punished as provided in NRS 193.130.