SENATE BILL NO. 367-SENATORS GUSTAVSON AND HARDY

MARCH 20, 2017

Referred to Committee on Health and Human Services

SUMMARY—Revises provisions relating to mental health facilities. (BDR 39-995)

FISCAL NOTE: Effect on Local Government: May have Fiscal Impact. Effect on the State: Yes.

EXPLANATION - Matter in **bolded italics** is new; matter between brackets [omitted material] is material to be omitted.

AN ACT relating to mental health; authorizing certain examinations and evaluations to be conducted using telehealth; removing the requirement that the administrative officer of a mental health facility provide notice of the emergency hold of a person to certain persons; revising provisions governing voluntary admission to a mental health facility and emergency holds in a mental health facility or hospital; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law defines the term "administrative officer" to mean a person with overall executive and administrative responsibility for those state or nonstate mental health centers designated by the Administrator of the Division of Public and Behavioral Health and the Division of Child and Family Services, as applicable, of the Department of Health and Human Services. (NRS 433.014, 433.538, 433A.012, 433B.020) Sections 1, 9, 18 and 39 of this bill redefine the term to mean a person with overall executive and administrative responsibility for a mental health facility of the applicable division. Sections 20, 21, 30, 37, 38, 43-45 and 50 of this bill make conforming changes.

Existing law uses the term "division facility" to refer to units and subunits operated by the Division of Public and Behavioral Health and the Division of Child and Family Services to provide care, treatment and training to mentally ill persons. (NRS 433.094, 433.431, 433.538, 433A.016, 433B.070) Sections 2-4, 6, 9, 16, 19-22, 25, 32, 36, 40-42, 46, 47 and 50 of this bill revise that term to instead refer to a "division mental health facility," which is defined as a mental health facility operated by the Division of Public and Behavioral Health and the Division of Child and Family Services.

Existing law concerning the admission of persons to mental health facilities and programs of community-based or outpatient services refers to a person who suffers



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from a mental illness and who is, as a result of that mental illness, a danger to himself or herself or others as a "person with mental illness." (NRS 433A.115) **Sections 10, 23, 26, 27, 29, 48 and 50** of this bill revise that term to instead refer to a dangerous person with mental illness. **Sections 12-14** of this bill define certain terms used in provisions concerning the admission of persons to mental health facilities and programs of community-based or outpatient services.

Under existing law, a person may be detained in a public or private mental health facility or hospital for up to 72 hours after the submission of an application for the emergency admission of the person and, under certain circumstances, the completion of a medical evaluation. (NRS 433A.150) **Sections 7, 8, 24, 28, 30, 31, 34, 35 and 49** of this bill revise the term "emergency admission" to refer instead to an "emergency hold." **Section 51** of this bill removes the requirement that the administrative officer of a mental health facility give notice of the emergency admission of a person to a mental health facility to the spouse or legal guardian of the person.

Existing law requires certain examinations and evaluations to be conducted on a person who is detained pursuant to an emergency hold. (NRS 433A.160, 433A.170, 433A.165, 433A.195) **Sections 29 and 33** of this bill authorize such evaluations and examinations to be performed using telehealth.

Section 27 of this bill removes the limitation that a person admitted to a mental health facility on an emergency hold may only be detained for 72 hours after the submission of an application for the emergency admission of the person and, under certain circumstances, the completion of a medical evaluation. Section 15 of this bill instead requires that a person admitted to a public or private mental health facility or hospital on an emergency hold undergo a psychiatric evaluation and a medical examination within 72 hours after the application for an emergency hold is made. Immediately after conducting the psychiatric evaluation, section 15 requires the examining psychiatrist, psychologist or physician to complete a certificate stating that the person either is or is not a dangerous person with mental illness. If the psychiatrist, psychologist or physician concludes that the person is a dangerous person with mental illness, section 15 requires that a petition for the involuntary court-ordered admission of the person to a mental health facility be filed within 72 hours after the completion of the certificate. If the psychiatrist, psychologist or physician concludes that the person is not a dangerous person with mental illness, section 15 requires a physician on the medical staff of the facility or hospital to release the person within 72 hours unless the person: (1) has a medical problem requiring immediate treatment; or (2) remains voluntarily for additional treatment. Sections 26, 28 and 29 of this bill make conforming changes. Section 28 also provides that an application for the emergency hold of a person who has previously been released from an emergency hold is not valid unless the application describes behavior indicating that the person is a dangerous person with mental illness which occurred after the person was released. Section 33 of this bill imposes certain requirements concerning the certificate of an evaluating psychiatrist, psychologist or physician.

Existing law authorizes a person to apply: (1) to a mental health facility for voluntary admission; or (2) a mental health facility operated by the Division of Public and Behavioral Health or the Division of Child and Family Services for care, treatment and training from the Division of Public and Behavioral Health. Such a person must be evaluated to determine his or her eligibility for services within 72 hours after application. (NRS 433A.140) **Section 25** of this bill removes the requirement that the evaluation be conducted within 72 hours after the request for admission or services. **Section 25** also removes the authorization for a public facility to make decisions, policies, procedures and practices within the limits of available money.





THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. NRS 433.014 is hereby amended to read as follows: 433.014 "Administrative officer" means a person with overall executive and administrative responsibility for those state or nonstate mental health centers designated by the Administrator.] a division mental health facility.

- **Sec. 2.** NRS 433.094 is hereby amended to read as follows:
- 433.094 "Division mental health facility" means any funit or subunit mental health facility operated by the Division for the care, treatment and training of consumers.
 - **Sec. 3.** NRS 433.233 is hereby amended to read as follows:
- 433.233 1. The division *mental health* facilities providing 12 mental health services are designated as:
 - (a) Northern Nevada Adult Mental Health Services:
 - (b) Southern Nevada Adult Mental Health Services;
 - (c) Rural clinics; and

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- (d) Lakes Crossing Center.
- 2. Division *mental health* facilities established after July 1, 17 18 1981, must be named by the Administrator, subject to the approval 19 of the Director of the Department.
 - **Sec. 4.** NRS 433.431 is hereby amended to read as follows:
 - 433.431 As used in NRS 433.431 to 433.454, inclusive, unless the context otherwise requires, "division mental health facility" means any **[unit or subunit]** mental health facility operated by:
 - The Division of Public and Behavioral Health of the Department for the care, treatment and training of consumers; or
- The Division of Child and Family Services of the 26 Department pursuant to chapter 433B of NRS. 27
 - **Sec. 5.** NRS 433.458 is hereby amended to read as follows:
- 433.458 "Administrative [officer"] head" means a person with overall executive and administrative responsibility for a facility that 30 provides services relating to mental health and that is operated by any public or private entity.
 - **Sec. 6.** NRS 433.461 is hereby amended to read as follows:
 - 433.461 "Facility" means any:
- 35 1. [Unit or subunit] Division mental health facility operated by the Division of Public and Behavioral Health of the Department for 36 the care, treatment and training of consumers. 37
 - 2. [Unit or subunit] Division mental health facility operated by the Division of Child and Family Services of the Department pursuant to chapter 433B of NRS.
 - 3. Hospital, clinic or other institution operated by any public or private entity, for the care, treatment and training of consumers.





- **Sec. 7.** NRS 433.471 is hereby amended to read as follows:
- 433.471 1. Each consumer admitted for evaluation, treatment or training to a facility has the following rights concerning admission to the facility, a list of which must be prominently posted in all facilities providing those services and must be otherwise brought to the attention of the consumer by such additional means as prescribed by regulation:
- (a) The right not to be admitted to the facility under false pretenses or as a result of any improper, unethical or unlawful conduct by a staff member of the facility to collect money from the insurance company of the consumer or for any other financial purpose.
- (b) The right to receive a copy, on request, of the criteria upon which the facility makes its decision to admit or discharge a consumer from the facility. Such criteria must not, for emergency [admissions] holds or involuntary court-ordered admissions, be based on the availability of insurance coverage or any other financial considerations.
- 2. As used in this section, "improper conduct" means a violation of the rules, policies or procedures of the facility.
 - **Sec. 8.** NRS 433.496 is hereby amended to read as follows:
- 433.496 1. Each facility shall make all of its decisions, policies, procedures and practices regarding emergency [admissions] holds or involuntary court-ordered admissions based upon clinical efficiency rather than cost containment.
- 2. 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.
 - **Sec. 9.** NRS 433.538 is hereby amended to read as follows:
 - 433.538 As used in NRS 433.538 to 433.543, inclusive, unless the context otherwise requires:
 - 1. "Administrative officer" means a person with overall executive and administrative responsibility for a division *mental health* facility.
- 2. "Division *mental health* facility" means any **funit or** subunit *mental health facility* operated by:
- (a) The Division of Public and Behavioral Health of the Department for the care, treatment and training of consumers; or
- 39 (b) The Division of Child and Family Services of the 40 Department pursuant to chapter 433B of NRS.
 - **Sec. 10.** NRS 433.5503 is hereby amended to read as follows:
- 42 433.5503 1. Chemical restraint may only be used on a person with a disability who is a consumer if:





- (a) The consumer has been diagnosed as [mentally ill,] a dangerous person with mental illness, as defined in NRS 433A.115, and is receiving mental health services from a facility;
- (b) The chemical restraint is administered to the consumer while he or she is under the care of the facility;
- (c) An emergency exists that necessitates the use of chemical restraint;
- (d) A medical order authorizing the use of chemical restraint is obtained from the consumer's attending physician or psychiatrist;
- (e) The physician or psychiatrist who signed the order required pursuant to paragraph (d) examines the consumer not later than 1 working day immediately after the administration of the chemical restraint; and
- (f) The chemical restraint is administered by a person licensed to administer medication.
- 2. If chemical restraint is used on a person with a disability who is a consumer, the use of the procedure must be reported as a denial of rights pursuant to NRS 433.534 or 435.610, as applicable, regardless of whether the use of the procedure is authorized by statute. The report must be made not later than 1 working day after the procedure is used.
- **Sec. 11.** Chapter 433A of NRS is hereby amended by adding thereto the provisions set forth as sections 12 to 15, inclusive, of this act
- Sec. 12. "Accredited agent of the Department" means any person appointed or designated by the Director of the Department to perform the duties prescribed in NRS 433A.145, 433A.160, 433A.170, 433A.195, 433A.200 or 433A.230, as applicable.
- 29 Sec. 13. "Hospital" has the meaning ascribed to it in 30 NRS 449.012.
- Sec. 14. "Telehealth" has the meaning ascribed to it in NRS 629.515.
 - Sec. 15. 1. As soon as practicable after an application for the emergency hold of a person who is alleged to be a dangerous person with mental illness is made pursuant to NRS 433A.160 but not later than 72 hours after the application is made, the person to whom the application pertains must undergo:
 - (a) A medical examination in accordance with subsection 1 of NRS 433A.165; and
 - (b) A psychiatric evaluation conducted 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 may conduct the evaluation. Each emergency hold must be approved by a psychiatrist.





- 2. Immediately after conducting a psychiatric evaluation of a person alleged to be a dangerous person with mental illness pursuant to subsection 1, the evaluating psychiatrist, psychologist or physician shall complete a certificate that meets the requirements of NRS 433A.197, stating that he or she has personally observed and evaluated the person alleged to be a dangerous person with mental illness and that he or she has concluded that:
- (a) 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
 - (b) The person is not a dangerous person with mental illness.
- 3. As soon as practicable upon the completion of the medical examination required by subsection 1 and a certificate described in paragraph (a) of subsection 2 and, except as otherwise provided in subsection 5, not later than 72 hours after the completion of such a certificate:
- (a) The psychiatrist, psychologist or physician who completed the certificate shall file a written petition for an involuntary court-ordered admission to a mental health facility, including, without limitation, the documents required by NRS 433A.210, with the clerk of the district court in accordance with NRS 433A.200; or
- (b) The facility or hospital must transfer the person to whom the certificate pertains to a mental health facility. If such a person is transferred to a mental health facility, the examining psychiatrist, psychologist or physician or an employee or agent of the mental health facility who meets the requirements of NRS 433A.200 must file a petition for the involuntary court-ordered admission of the person to a mental health facility with the district court. The petition must include, without limitation, the documents required by NRS 433A.210. Except as otherwise provided in subsection 5, the petition must be filed not later than 72 hours after the completion of the certificate described in paragraph (a) of subsection 2.
- 4. As soon as practicable upon the completion of the medical examination required by subsection 1 and a certificate described in paragraph (b) of subsection 2, but in no event later than 72 hours after the completion of such a certificate, a licensed physician on the medical staff of the mental health facility or hospital shall release the person to whom the certificate pertains unless:
- (a) The physician, physician assistant or advanced practice registered nurse who conducted the medical examination has determined that the person has a medical problem, other than a





psychiatric problem, which requires immediate medical treatment; or

- (b) The status of the person is changed to a voluntary admission.
- 5. If the period specified in subsection 3 expires on a holiday or other nonjudicial day, the written petition must be filed on or before the close of the business day next following the expiration of that period.
- 6. A person alleged to be a dangerous person with mental illness who is detained on an emergency hold may not be detained for longer than the time periods prescribed by this section unless a petition for the involuntary court-ordered admission of the person to a mental health facility is filed pursuant to NRS 433A.200. The time periods prescribed by this section may not be extended by any means, including, without limitation, by making a new application pursuant to NRS 433A.160 or the completion of a new certificate pursuant to NRS 433A.170.
 - **Sec. 16.** NRS 433A.010 is hereby amended to read as follows:
- 433A.010 The provisions of this chapter apply to all *division* mental health [centers of the Division of Public and Behavioral Health of the Department and of the Division of Child and Family Services of the Department.] *facilities*. Such provisions apply to [private institutions and facilities offering] other public and private mental health [services] facilities and hospitals only when specified in the context.
 - **Sec. 17.** NRS 433A.011 is hereby amended to read as follows: 433A.011 As used in this chapter, unless the context otherwise
- requires, the words and terms defined in NRS 433A.012 to 433A.019, inclusive, *and sections 12, 13 and 14 of this act* have the meanings ascribed to them in those sections.
 - **Sec. 18.** NRS 433A.012 is hereby amended to read as follows:
- 433A.012 "Administrative officer" means a person with overall executive and administrative responsibility for [those state or nonstate facilities for] a division mental health [designated by the Administrator.] facility.
 - **Sec. 19.** NRS 433A.016 is hereby amended to read as follows: 433A.016 "Division *mental health* facility" means:
- 1. Except as otherwise provided in subsection 2, [any unit or subunit] a mental health facility operated by the Division of Public and Behavioral Health of the Department for the care, treatment and training of consumers.
- 2. Any **[unit or subunit]** *mental health facility* operated by the Division of Child and Family Services of the Department pursuant to chapter 433B of NRS.





Sec. 20. NRS 433A.020 is hereby amended to read as follows: 433A.020 The administrative officer of a *division mental health* facility [of the Division] must:

- 1. Be selected on the basis of training and demonstrated administrative qualities of leadership in any one of the fields of psychiatry, medicine, psychology, social work, public health or administration.
- 2. Be appointed on the basis of merit as measured by administrative training or experience in programs relating to mental health, including care and treatment of persons with mental illness.
- **Sec. 21.** NRS 433A.030 is hereby amended to read as follows: 433A.030 The administrative officers have the following powers and duties, subject to the administrative supervision of the Administrator:
- 1. To exercise general supervision of and establish regulations for the government of the *division mental health* facilities designated by the Administrator;
- 2. To be responsible for and supervise the fiscal affairs and responsibilities of the *division mental health* facilities designated by the Administrator:
- 3. To appoint such medical, technical, clerical and operational staff as the execution of his or her duties, the care and treatment of consumers and the maintenance and operation of the *division mental health* facilities designated by the Administrator may require;
- 4. To make reports to the Administrator, and to supply the Administrator with material on which to base proposed legislation;
 - 5. To keep complete and accurate records of all proceedings, record and file all bonds and contracts, and assume responsibility for the custody and preservation of all papers and documents pertaining to his or her office;
- 6. To inform the public in regard to the activities and operation of **[the]** *division mental health* facilities;
- 7. To invoke any legal, equitable or special procedures for the enforcement of his or her orders or the enforcement of the provisions of this chapter and chapters 433, 433B and 433C of NRS and other statutes governing [the] division mental health facilities;
- 8. To submit an annual report to the Administrator on the condition, operation, functioning and anticipated needs of [the] division mental health facilities; and
- 9. To assume responsibility for the nonmedical care and treatment of consumers if that responsibility has not been delegated.
 - Sec. 22. NRS 433A.080 is hereby amended to read as follows:
- 433A.080 1. A coordinator of medical programs is the medical head of any **[division]** division mental health facility





designated by the Administrator. The coordinator of medical programs:

- (a) Must be a psychiatrist licensed to practice medicine or, in the case of a treatment facility authorized by paragraph (b) of subsection 1 of NRS 433B.290, a psychiatrist or a pediatrician licensed to practice medicine.
- (b) May be a psychiatrist or pediatrician in private practice under contract to the Division.
- (c) Must have such additional qualifications as are in accordance with criteria prescribed by the Division of Human Resource Management of the Department of Administration and must be in the unclassified service of the State.
 - 2. A coordinator of medical programs shall:
 - (a) Cause to be kept a fair and full account of all medical affairs;
- (b) Have standard medical histories currently maintained on all consumers, and administer or have administered the accepted and appropriate medical treatments to all consumers under his or her care, and may, by delegation of the administrative officer, be responsible for the nonmedical care and treatment of consumers; and
- (c) Undertake any diagnostic, medical or surgical procedure in the interest of the consumer, but only in accordance with the provisions of subsection 1 of NRS 433.484.
- **Sec. 23.** NRS 433A.115 is hereby amended to read as follows: 433A.115 1. As used in NRS 433A.115 to 433A.330. inclusive, and section 15 of this act, unless the context otherwise requires, ["person] "dangerous person with mental illness" means any person whose capacity to exercise self-control, judgment 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 to himself or herself or others, 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 pursuant to the provisions of NRS 433A.115 to 433A.330, inclusive, *and section 15 of this act*, 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 pursuant to the provisions of NRS 433A.115 to 433A.330, inclusive, *and section 15* of this act, 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 pursuant to the provisions of NRS 433A.115 to 433A.330, inclusive, *and section 15* of this act, 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 pursuant to the provisions of NRS 433A.115 to 433A.330, inclusive, *and section 15 of this act*, and adequate treatment is provided to him or her.
- **Sec. 24.** NRS 433A.120 is hereby amended to read as follows: 433A.120 There are three types of admission to mental health facilities in the State of Nevada:
 - 1. Voluntary admission;
 - 2. Emergency [admission;] hold; and
 - 3. Involuntary court-ordered admission.
 - Sec. 25. NRS 433A.140 is hereby amended to read as follows: 433A.140 1. Any person may *present or* apply to:
- 37 (a) A public or private mental health facility in the State of Nevada for admission to the facility; or
- 39 (b) A division *mental health* 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 that not attained the age of majority, is less than 18 years of age, 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] a person presents to a division mental health facility for voluntary admission or applies for admission to a division mental health facility, or for care, treatment or training provided by the Division, the [applicant] person must be admitted or provided such services as a voluntary consumer if [an examination]:
- (a) A psychiatric evaluation by personnel of the division mental health facility qualified to make such a determination reveals that the person needs and may benefit from services offered by the division mental health facility []; and
- (b) An evaluation by personnel of the Division determines that the person is eligible to receive services offered by the Division.
- 3. [Any] If a person admitted to a public or private mental health facility as a voluntary consumer [must be released immediately after the filing of] files a written request for release with the responsible physician or that physician's designee within the normal working day, [unless, within] the person must be released as soon as practicable but not later than 24 hours after the request [] unless the facility changes the status of the person to an emergency [admission] hold 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.

Sec. 26. NRS 433A.145 is hereby amended to read as follows: 433A.145 [1.] If a *dangerous* person with mental illness 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] hold unless the hospital or facility receives, before the change in status is made, an application for an emergency [admission] hold 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 hours after the change in status is made unless, before the close of the business day on which the 48 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.]

Sec. 27. NRS 433A.150 is hereby amended to read as follows: 433A.150 [1.] Any person alleged to be a *dangerous* person with mental illness may, upon application pursuant to NRS 433A.160 and subject to the provisions of [subsection 2,] section 15 of this act, be detained in a public or private mental health facility or hospital under an emergency [admission] hold 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 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.]

Sec. 28. NRS 433A.160 is hereby amended to read as follows:

433A.160 1. Except as otherwise provided in subsection 2, an application for the emergency [admission] hold of a person alleged to be a dangerous person with mental illness 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 *dangerous* person with mental illness into custody to apply for the emergency [admission] *hold* of the person for evaluation, observation and treatment; and
- (2) Transport the person alleged to be a *dangerous* person with mental illness 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) 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 *dangerous* person with mental illness, 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 *dangerous* person with mental illness into custody to allow the applicant for the order to apply for the emergency [admission] hold 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 *dangerous* person with mental illness 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] hold of a person alleged to be a dangerous person with mental illness 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 dangerous person with mental illness may apply to a district court for an order described in paragraph (b) of subsection 1.
- 3. The application for the emergency **[admission]** *hold* of a person alleged to be a *dangerous* person with mental illness 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 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 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.] An application for the emergency hold of a person alleged to be a dangerous person with mental illness who has been released in accordance with the provisions of NRS 433A.195 or section 15 of this act is not valid unless the application describes behavior that:
- (a) Constitutes probable cause to believe that the person is a dangerous person with mental illness; and
 - (b) Occurred after the person was released.
 - Sec. 29. NRS 433A.165 is hereby amended to read as follows:
- 433A.165 1. Before a person alleged to be a *dangerous* 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, a medical examination must be performed 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] a medical examination to determine whether the person has a medical problem, other than a psychiatric problem, which requires immediate treatment. [; and]

(b) The medical examination may be conducted using telehealth. If [such] immediate treatment is required, the person must be admitted for the appropriate medical care:

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

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

- 2. If a *dangerous* person with a mental illness 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] conducted the medical examination of 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 *or hospital on an emergency hold* 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] hold 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 *medical* 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] a medical examination or certify such a transfer; and
 - (b) The provisions of NRS 439B.410.





- 4. The cost of the *medical* examination must be paid by the county in which the person alleged to be a *dangerous* person with mental illness 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 *dangerous* person with mental illness 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 *dangerous* person with mental illness resides.
- 7. The provisions of this section do not require the Division to provide *medical* examinations required pursuant to subsection 1 at a [Division] *division mental health* 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 *medical* examinations; or
- (b) Appropriate medical laboratories as the Division determines is necessary to provide such *medical* 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.
- 9. As used in this section, "medical facility" has the meaning ascribed to it in NRS 449.0151.
 - **Sec. 30.** NRS 433A.170 is hereby amended to read as follows:
- 433A.170 Except as otherwise provided in this section, the administrative officer of a *division mental health* facility [operated by the Division] or *the person in charge* of any other public or private mental health facility or hospital shall not accept an application for an emergency [admission] hold 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 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.

Sec. 31. NRS 433A.190 is hereby amended to read as follows: 433A.190 Within 24 hours of a person's admission under *an* emergency [admission,] *hold*, the administrative officer of a public or private mental health facility shall give notice of such admission in person, by telephone or facsimile and by certified mail to the

spouse or legal guardian of that person.

Sec. 32. NRS 433A.195 is hereby amended to read as follows: 433A.195 At any time after the completion of a certificate pursuant to paragraph (a) of subsection 2 of section 15 of this act, a licensed physician on the medical staff of a division mental health 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 longer** a **dangerous** person with a mental illness.

Sec. 33. NRS 433A.197 is hereby amended to read as follows: 433A.197 1. An application or certificate authorized under subsection 1 of NRS 433A.160 or NRS 433A.170 or 433A.195 *or section 15 of this act* must not be considered if made by a



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psychiatrist, 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 **dangerous** person with mental illness, or who is financially interested in the facility in which the person alleged to be a **dangerous** person with mental illness is to be detained.

2. A certificate required by section 15 of this act must not be considered unless it is based on personal observation and examination, including, without limitation, personal observation and examination conducted using telehealth, of the person alleged to be a dangerous person with mental illness made by the evaluating psychiatrist, psychologist or physician Such a certificate must describe in detail the facts and reasons on which the examining psychiatrist, psychologist or physician based his or her opinions and conclusions.

3. 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, including, without limitation, personal observation and examination conducted using telehealth, of the person alleged to be a dangerous person with mental illness 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.] 4. A certificate authorized pursuant to NRS 433A.195 must not be considered unless it is based on personal observation and examination , including, without limitation, personal observation and examination conducted using telehealth, of the person alleged to be a dangerous person with mental illness 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, psychiatrist, psychologist, clinical social worker, advanced practice registered nurse or accredited agent of the Department based his or her opinions and conclusions.

Sec. 34. NRS 433A.210 is hereby amended to read as follows: 433A.210 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] section 15 of this act must include a certified copy of:





- 1. The application for the emergency [admission] hold of the person made pursuant to NRS 433A.160; and
- 2. A petition executed by a psychiatrist, licensed psychologist or physician, including, without limitation, a sworn statement that:
- (a) He or she has examined the person alleged to be a *dangerous* person with mental illness;
- (b) In his or her opinion, there is a reasonable degree of certainty that the person alleged to be a *dangerous* person with mental illness suffers from a mental illness;
- (c) Based on his or her personal observation of the person alleged to be a *dangerous* person with mental illness 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 *dangerous* person with mental illness to a mental health facility or hospital is medically necessary to prevent the person from harming himself or herself or others.
 - **Sec. 35.** NRS 433A.240 is hereby amended to read as follows:
- 433A.240 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 or licensed psychologists, one of whom must always be a physician, to examine the person alleged to be a *dangerous* person with mental illness, or request an evaluation by an evaluation team from the Division of the person alleged to be a *dangerous* person with mental illness.
- 2. To conduct the examination of a person who is not being detained at a mental health facility or hospital under *an* emergency [admission] *hold* 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.
- 3. If the person is not being detained under an emergency [admission] hold 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.
- 4. Each physician and licensed psychologist who examines a person pursuant to subsection 1 shall, in conducting such an examination, consider the least restrictive treatment appropriate for the person.





5. Except as otherwise provided in this subsection, each physician and licensed psychologist who examines a person pursuant to subsection 1 shall, not later than 48 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 *dangerous* person with mental illness. If the person alleged to be a *dangerous* person with mental illness is admitted under an emergency [admission] hold pursuant to an application made pursuant to NRS 433A.160, the written findings and evaluation must be submitted to the court not later than 24 hours before the hearing set pursuant to subsection 1 of NRS 433A.220.

Sec. 36. NRS 433A.370 is hereby amended to read as follows: 433A.370 1. When a consumer committed by a court to a division *mental health* facility on or before June 30, 1975, or a consumer who is judicially admitted on or after July 1, 1975, or a person who is involuntarily detained pursuant to NRS 433A.145 to 433A.300, inclusive, *and section 15 of this act* escapes from any division *mental health* facility, or when a judicially admitted consumer has not returned to a division facility from conditional release after the administrative officer of the facility has ordered the consumer to do so, any peace officer shall, upon written request of the administrative officer or the administrative officer's designee and without the necessity of a warrant or court order, apprehend, take into custody and deliver the person to such division *mental health* facility or another state facility.

2. Any person appointed or designated by the Director of the Department to take into custody and transport to a division *mental health* facility persons who have escaped or failed to return as described in subsection 1 may participate in the apprehension and delivery of any such person, but may not take the person into custody without a warrant.

Sec. 37. NRS 433A.380 is hereby amended to read as follows:

433A.380 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 incompetent is conditionally released from a mental health facility, the administrative officer *or other person in charge* of the mental health facility *or the designee thereof* shall petition the court for restoration of full civil and legal rights as deemed necessary to facilitate the incompetent 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 or other person in charge of a public or private mental health facility or [the administrative officer's] the designee *thereof* 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 to himself or herself or others. Except as otherwise provided in this subsection, the administrative officer or other person in charge of the facility or the designee thereof 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 other person in charge of the facility or the [administrative officer's] designee thereof 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.

Sec. 38. NRS 433A.400 is hereby amended to read as follows:

433A.400 1. An indigent resident of this state discharged as having recovered from his or her mental illness, but having a residual medical or surgical disability which prevents him or her from obtaining or holding remunerative employment, must be returned to the county of his or her last residence, except as otherwise provided pursuant to subsections 2 and 3. A nonresident indigent with such disabilities must be returned to the county from which he or she was involuntarily court-admitted, except as otherwise provided in subsections 2 and 3. The administrative officer or other person in charge of the mental health facility or the designee thereof shall first give notice in writing, not less than 10 days before discharge, to the board of county commissioners of the county to which the person will be returned and to the person's legal guardian.

- 2. Delivery of the indigent person must be made to an individual or agency authorized to provide further care. 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.
- 3. An indigent person may be delivered to a state that is a party to the Interstate Compact on Mental Health ratified and enacted in NRS 433.4543 regardless of residency in the manner provided in the Compact.
- 4. This section does not authorize the release of any person held upon an order of a court or judge having criminal jurisdiction arising out of a criminal offense.

Sec. 39. NRS 433B.020 is hereby amended to read as follows: 433B.020 "Administrative officer" means a person with overall executive and administrative responsibility for those state or





nonstate facilities for the mental health of children designated by the Administrator.] a division mental health facility.

Sec. 40. NRS 433B.070 is hereby amended to read as follows: 433B.070 "Division *mental health* facility" means any *funit or* subunit *mental health facility* operated by the Division for the care and treatment of consumers.

- **Sec. 41.** NRS 433B.110 is hereby amended to read as follows: 433B.110 1. The division *mental health* facilities providing services for the mental health of children are designated as:
 - (a) The Nevada Youth Hospital;

- (b) The Adolescent Treatment Center;
- (c) Northern Nevada Children's Behavioral Services; and
- (d) Southern Nevada Children's Behavioral Services.
- 2. Division *mental health* facilities established after July 1, 1993, must be named by the Administrator, subject to the approval of the Director of the Department.
 - **Sec. 42.** NRS 433B.130 is hereby amended to read as follows: 433B.130 1. The Administrator shall:
- (a) Administer, in accordance with the policies established by the Commission, the programs of the Division for the mental health of children.
- (b) Establish appropriate policies to ensure that children in division *mental health* facilities have timely access to clinically appropriate psychotropic medication that are consistent with the provisions of NRS 432B.197 and NRS 432B.4681 to 432B.469, inclusive, and the policies adopted pursuant thereto.
 - 2. The Administrator may:
- (a) Appoint the administrative personnel necessary to operate the programs of the Division for the mental health of children.
- 30 (b) Delegate to the administrative officers the power to appoint medical, technical, clerical and operational staff necessary for the operation of any division *mental health* facilities.
 - 3. If the Administrator finds that it is necessary or desirable that any employee reside at a *division mental health* facility loperated by the Division] or receive meals at such a facility, perquisites granted or charges for services rendered to that person are at the discretion of the Director of the Department.
 - 4. The Administrator may accept children referred to the Division for treatment pursuant to the provisions of NRS 458.290 to 458.350, inclusive.
 - 5. The Administrator may enter into agreements with the Administrator of the Division of Public and Behavioral Health of the Department or with the Administrator of the Aging and Disability Services Division of the Department for the care and treatment of consumers of the Division of Child and Family





Services at any facility operated by the Division of Public and Behavioral Health or the Aging and Disability Services Division, as applicable.

Sec. 43. NRS 433B.300 is hereby amended to read as follows:

433B.300 The treatment provided to a child with an emotional disturbance must be designed to facilitate the adjustment and effective functioning of that child in his or her present or anticipated situation in life, and includes:

- 1. Services provided without admission to a facility, such as:
- (a) Counseling for the family;

- (b) Therapy in a group for parents and children;
- 12 (c) Classes for parents in effective techniques for the 13 management of children;
 - (d) Individual therapy for children; and
 - (e) Evaluation of the child, including personal assessments and studies of individual social environments;
 - 2. Services for the care of children during the day, involving educational programs and therapy programs provided after school or for half a day;
 - 3. Placement in transitional homes operated by professionally trained parents working in close consultation with the administrative officer *or other person in charge of the facility* and the staff of the administrative officer [;] *or other person in charge of the facility*; and
 - 4. Short-term residential services providing 24-hour supervision, evaluation and planning and intensive counseling for the family, therapy and educational evaluation and consultation.
 - Sec. 44. NRS 433B.320 is hereby amended to read as follows:
 - 433B.320 1. In any case involving commitment by court order, admission to a treatment facility may be only after consultation with and approval by the administrative officer or other person in charge of the facility or the [administrative officer's] designee [.] thereof who shall determine whether the treatment available at the facility is appropriate or necessary for the child's health and welfare.
 - 2. A child committed by court order must not be released from a treatment facility until the administrative officer *or other person in charge of the facility or the designee thereof* determines that treatment in the facility is no longer beneficial to the child.
 - **Sec. 45.** NRS 433B.330 is hereby amended to read as follows:
 - 433B.330 In any case involving an application from the child's parent, parents or legal guardian, the child must first be examined and evaluated by the administrative officer or the staff of the administrative officer or other person in charge of the facility and admitted to a treatment facility only if, in the judgment of the





administrative officer [:] or other person in charge of the facility or the designee thereof:

- 1. The child can benefit from the program of treatment; and
- 2. Facilities and staff are available and adequate to meet the child's needs.
 - **Sec. 46.** NRS 175.539 is hereby amended to read as follows:
- 175.539 1. Where on a trial a defense of insanity is interposed by the defendant and the defendant is acquitted by reason of that defense, the finding of the jury pending the judicial determination pursuant to subsection 2 has the same effect as if the defendant were regularly adjudged insane, and the judge must:
- (a) Order a peace officer to take the person into protective custody and transport the person to a forensic facility for detention pending a hearing to determine the person's mental health;
- (b) Order the examination of the person by two psychiatrists, two psychologists, or one psychiatrist and one psychologist who are employed by a division *mental health* facility; and
- (c) At a hearing in open court, receive the report of the examining advisers and allow counsel for the State and for the person to examine the advisers, introduce other evidence and cross-examine witnesses.
 - 2. If the court finds, after the hearing:
- (a) That there is not clear and convincing evidence that the person is a person with mental illness, the court must order the person's discharge; or
- (b) That there is clear and convincing evidence that the person is a person with mental illness, the court must order that the person be committed to the custody of the Administrator of the Division of Public and Behavioral Health of the Department of Health and Human Services until the person is discharged or conditionally released therefrom in accordance with NRS 178.467 to 178.471, inclusive.
- The court shall issue its finding within 90 days after the defendant is acquitted.
- 3. The Administrator shall make the reports and the court shall proceed in the manner provided in NRS 178.467 to 178.471, inclusive.
- 4. If the court accepts a verdict acquitting a defendant by reason of insanity pursuant to this section, the court shall cause, within 5 business days after accepting the verdict, on a form prescribed by the Department of Public Safety, a record of that verdict to be transmitted to 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.

- 5. As used in this section, unless the context otherwise requires:
- (a) "Division *mental health* facility" has the meaning ascribed to it in NRS 433.094.
- (b) "Forensic facility" means a secure facility of the Division of Public and Behavioral Health of the Department of Health and Human Services for offenders and defendants with mental disorders. The term includes, without limitation, Lakes Crossing Center.
- (c) "National Instant Criminal Background Check System" has the meaning ascribed to it in NRS 179A.062.
- (d) "Person with mental illness" has the meaning ascribed to it in NRS 178.3986.
 - **Sec. 47.** NRS 178.3984 is hereby amended to read as follows:
- 178.3984 "Division facility" means a division *mental health* facility as defined in NRS 433.094 and *a division facility as defined in NRS* 435.007.
 - **Sec. 48.** NRS 449.780 is hereby amended to read as follows:
- 449.780 1. Chemical restraint may only be used on a person with a disability who is a patient at a facility if:
- (a) The patient has been diagnosed as a *dangerous* person with mental illness, as defined in NRS 433A.115, and is receiving mental health services from a facility;
- (b) The chemical restraint is administered to the patient while he or she is under the care of the facility;
- (c) An emergency exists that necessitates the use of chemical restraint;
- (d) A medical order authorizing the use of chemical restraint is obtained from the patient's attending physician or psychiatrist;
- (e) The physician or psychiatrist who signed the order required pursuant to paragraph (d) examines the patient not later than 1 working day immediately after the administration of the chemical restraint; and
- (f) The chemical restraint is administered by a person licensed to administer medication.
- 2. If chemical restraint is used on a person with a disability who is a patient, the use of the procedure must be reported as a denial of rights pursuant to NRS 449.786, regardless of whether the use of the procedure is authorized by statute. The report must be made not later than 1 working day after the procedure is used.
 - **Sec. 49.** NRS 629.550 is hereby amended to read as follows:
- 629.550 1. If a patient communicates to a mental health professional an explicit threat of imminent serious physical harm or death to a clearly identified or identifiable person and, in the





judgment of the mental health professional, the patient has the intent and ability to carry out the threat, the mental health professional shall apply for the *detention of the patient at a mental health facility or hospital under an* emergency [admission of the patient to a mental health facility] hold pursuant to NRS 433A.160 or make a reasonable effort to communicate the threat in a timely manner to:

- (a) The person who is the subject of the threat;
- (b) The law enforcement agency with the closest physical location to the residence of the person; and
 - (c) If the person is a minor, the parent or guardian of the person.
- 2. A mental health professional shall be deemed to have made a reasonable effort to communicate a threat pursuant to subsection 1 if:
- (a) The mental health professional actually communicates the threat in a timely manner; or
- (b) The mental health professional makes a good faith attempt to communicate the threat in a timely manner and the failure to actually communicate the threat in a timely manner does not result from the negligence or recklessness of the mental health professional.
- 3. A mental health professional who exercises reasonable care in determining that he or she:
- (a) Has a duty to take an action described in subsection 1 is not subject to civil or criminal liability or disciplinary action by a professional licensing board for disclosing confidential or privileged information.
- (b) Does not have a duty to take an action described in subsection 1 is not subject to civil or criminal liability or disciplinary action by a professional licensing board for any damages caused by the actions of a patient.
 - 4. The provisions of this section do not:
- (a) Limit or affect the duty of the mental health professional to report child abuse or neglect pursuant to NRS 432B.220; or
- (b) Modify any duty of a mental health professional to take precautions to prevent harm by a patient:
- (1) Who is in the custody of a hospital or other facility where the mental health professional is employed; or
 - (2) Who is being discharged from such a facility.
- 5. As used in this section, "mental health professional" includes:
- (a) A physician or psychiatrist licensed to practice medicine in this State pursuant to chapter 630 or 633 of NRS;
- (b) A psychologist who is licensed to practice psychology pursuant to chapter 641 of NRS;
 - (c) A social worker who:





- (1) Holds a master's degree in social work;
- (2) Is licensed as a clinical social worker pursuant to chapter 641B of NRS; and
- (3) Is employed by the Division of Public and Behavioral Health of the Department of Health and Human Services;
 - (d) A registered nurse who:

- (1) Is licensed to practice professional nursing pursuant to chapter 632 of NRS; and
- (2) Holds a master's degree in psychiatric nursing or a related field:
- (e) A marriage and family therapist licensed pursuant to chapter 641A of NRS;
- (f) A clinical professional counselor licensed pursuant to chapter 641A of NRS; and
- (g) A person who is working in this State within the scope of his or her employment by the Federal Government, including, without limitation, employment with the Department of Veterans Affairs, the military or the Indian Health Service, and is:
- (1) Licensed or certified as a physician, psychologist, marriage and family therapist, clinical professional counselor, alcohol and drug abuse counselor or clinical alcohol and drug abuse counselor in another state;
- (2) Licensed as a social worker in another state and holds a master's degree in social work; or
- (3) Licensed to practice professional nursing in another state and holds a master's degree in psychiatric nursing or a related field.

Sec. 50. The Legislative Counsel shall:

- 1. In preparing the Nevada Revised Statutes, use the authority set forth in subsection 10 of NRS 220.120 to substitute appropriately:
- (a) The term "division mental health facility" for the term "division facility" as previously used in relation to chapters 433 to 433C, inclusive, of NRS;
 - (b) The term "administrative head" for the term "administrative officer" as previously used in relation to NRS 433.456 to 433.536, inclusive; and
 - (c) The term "dangerous person with mental illness" for the term "person with mental illness" as previously used in relation to NRS 433A.115 to 433A.330, inclusive.
 - 2. In preparing supplements to the Nevada Administrative Code, substitute appropriately the term "division mental health facility" for the term "division facility" as previously used in chapters 433 to 433C, inclusive, of NAC.
 - **Sec. 51.** NRS 433A.190 is hereby repealed.





TEXT OF REPEALED SECTION

433A.190 Notice of admission to spouse or legal guardian. Within 24 hours of a person's admission under emergency admission, the administrative officer of a public or private mental health facility shall give notice of such admission in person, by telephone or facsimile and by certified mail to the spouse or legal guardian of that person.





