JANUARY 2007 CROW TRIBAL LEGISLATURE

BILL NO. <u>CLB07-05</u>

INTRODUCED BY CARL E. VENNE, CHAIRMAN CROW TRIBAL EXECUTIVE BRANCH

A BILL FOR AN ACT ENTITLED:

"AN ACT TO AMEND THE CROW LAW AND ORDER CODE TO STRENGTHEN PROTECTION OF PERSONS UNABLE TO CARE FOR THEMSELVES BECAUSE OF MENTAL ILLNESS OR BEHAVIORAL DISORDER"

WHEREAS, the Crow Nation has as its highest priority the care and protection of its citizens; and

WHEREAS, persons who have become unable to care for themselves because of mental illness or behavioral disorder must be protected; and

WHEREAS, during the April 2006 session the Crow Legislature adopted CLB06-02, An Act to Amend the Crow Law and Order Code to Provide for Protection of Persons Unable to Care for Themselves Because of Mental Illness;" and

WHEREAS, the Chairman of the Executive Branch approved CLB06-02 on May 19, 2006; and

WHEREAS, CLB06-02 is scheduled to be codified as "Title 15, Health and Human Services"; and

WHEREAS, the Crow Law and Order Code now contains "Title 15, Commercial and Consumer Transactions" and this title should be codified as Title 11; and

WHEREAS, interested professional persons have recommended amendments to CLB06-02 to strengthen protection of persons unable to care for themselves because of mental illness or behavioral disorder; and

WHEREAS, the interests of the Crow Nation will be served by adoption of the following amendments to the Crow Law and Order Code;

NOW, THEREFORE, BE IT ENACTED BY THE CROW TRIBAL LEGISLATURE:

Section 1. The Crow Law and Order Code is amended to change the assignment of Title 15: Health and Human Services, to Title 11, Health and Human Services, and to further amend Title 11, Health and Human Services, as follows:

2007.JAN.18
Bill to Amend Title on Mental Health Commitments
FINAL AS AMENDED AND ADOPTED
Page 1 of 16

TITLE 11 HEALTH AND HUMAN SERVICES

CHAPTER 1

MENTAL AND BEHAVIORAL HEALTH

Part 1

Statement of Policy, Purpose and Definitions

11.1.101. Statement of Policy.

- (1) It is the policy of the Crow Tribe to promote the health, safety, culture, and general welfare of the Tribal Community; to recognize mental illness as a disease subject to a variety of treatment alternatives and choices; and to recognize that the person who has a mental illness is entitled to the opportunity to heal in the least restrictive and most culturally relevant environment.
- (2) Nothing in this Bill shall be interpreted by the Court as a diminishment of the Tribe's lawful, inherent Tribal Sovereignty and Jurisdiction.

11.1.102. Purpose. The purpose of this chapter is to:

- (1) secure for each person who may be mentally ill,, seriously mentally ill or suffering from a mental disorder, behaviorally disordered or seriously behaviorally disordered, such care and treatment as will be suited to the needs of the person and to insure that such care and treatment are skillfully and humanely administered with full respect for the person's dignity and personal and cultural integrity;
- (2) accomplish this goal whenever possible in a community-based setting;
- (3) accomplish this goal in an institutionalized setting only when less restrictive alternatives are unavailable or inadequate and only when a person is seriously mentally ill or seriously behaviorally disordered as to require institutionalized care; and
- (4) assure that due process of law is accorded any person coming under the provisions of this part.

11.1.103. Definitions. For the purposes of this chapter, the following definitions will apply:

- (1) "Behaviorally disordered" includes any substance abuse addiction which has substantial adverse effects on an individual's cognitive or volitional functions.
- (2) "Commitment" means an order by a court requiring an individual to receive treatment for a mental disorder.

2007.JAN.18
Bill to Amend Title on Mental Health Commitments
FINAL AS AMENDED AND ADOPTED
Page 2 of 16

- (3) "Court" means the Crow Tribal Court unless otherwise clearly indicated.
- (4) "Emergency situation" means a situation in which any person is substantially unable to care for themself or is in imminent danger of bodily harm from the activity of a person who appears to be seriously mentally ill or seriously behaviorally disordered, including the person taken into custody.
- (5) "Extended family member" means any person under Crow/Apsaalooke Tribal law, custom and tradition who would be an "extended family member" including but not limited to the spouse, parents, adult children, and adult brothers and sisters of the respondent. An "extended family member" has standing to file a request to intervene as a party to any involuntary commitment action filed under this chapter. An order of the Crow Tribal Court granting a motion to intervene as a party shall specify that the party has the right to obtain any and all information available to the person whose commitment is sought, a right to notice of all action taken, a right to participate in all proceedings, and a right to review all medical reports and documentation contemplated both in and out of Court in this chapter. "Extended family members" are bound by confidentiality and privacy rules.
- (6) "Friend of respondent" means any person willing and able to assist a seriously mentally ill person or seriously behaviorally disordered person alleged to be suffering from a mental disorder and requiring commitment in dealing with legal proceedings, including consultation with counsel and others who will be appointed by the Court after the filing of a petition for an involuntary commitment. The friend of respondent may be the next of kin, the person's conservator or legal guardian, if any, representatives of a charitable or religious organization, or any other person appointed by the court to perform the functions of a friend of respondent set out in this part. Only one person may at any one time be the friend of respondent within the meaning of this part. In appointing a friend of respondent, the court shall consider the preference of the respondent. The court may at any time, for good cause, change its designation of the friend of respondent.
- (7) "Mental health facility" or "facility" means a public hospital or licensed private hospital which is equipped and staffed to provide treatment for persons with mental or behavioral disorders or a community mental health center or any mental health clinic or treatment center approved by the Crow Tribe which offers appropriate institutional care. No correctional institution or facility or jail may be used as a mental health facility within the meaning of this part.
- (8) (a) "Mental disorder" means any organic, mental, or emotional impairment that has substantial adverse effects on an individual's cognitive or volitional functions.
 - (b) The term does not include:
 - (i) addiction to drugs or alcohol;
 - (ii) drug or alcohol intoxication;
 - (iii) mental retardation; or
 - (iv) epilepsy.

2007.JAN.18
Bill to Amend Title on Mental Health Commitments
FINAL AS AMENDED AND ADOPTED
Page 3 of 16

- (c) A mental disorder may co-occur with addiction or chemical dependency.
- (9) "Mentally ill or behaviorally disordered" means suffering from a mental or behavioral disorder which has not resulted in self-inflicted injury or injury to others or the imminent threat thereof but which:
 - (a) has resulted in behavior that creates serious difficulty in protecting the person's life or health even with the available assistance of family, friends, or others; and
 - (b) is treatable, with a reasonable prospect of success and is consistent with the least restrictive course of treatment as provided in this code, at or through the facility to which the person is to be committed; and
 - (c) has deprived the person of the capacity to make an informed decision concerning treatment; and
 - (d) has resulted in the person's refusing or being unable to consent to voluntary admission for treatment; and
 - (e) poses a significant risk of the person's becoming seriously mentally ill or seriously behaviorally disordered, within the meaning of this section, or will, if untreated, predictably result in further serious deterioration in the mental condition of the person. Predictability may be established by the patient's medical history.
- (10) "Professional person" means a licensed medical doctor or a person who meets criteria established by the Indian Health Service, a state or federal licensing agency or a licensed mental health facility for certification as a Mental Health Professional.
- (11) "Reasonable medical certainty" means reasonable certainty as judged by the standards of a professional person.
- (12) "Respondent" means a person alleged in a petition filed pursuant to this part to be suffering from a mental disorder and requiring commitment.
- (13) "Seriously mentally ill or seriously behaviorally disordered" means suffering from a mental or behavioral disorder which has resulted in self-inflicted injury or injury to others or the imminent threat thereof or which has deprived the person afflicted of the ability to protect his or her life or health. For this purpose, injury means physical injury. No person may be involuntarily committed to a mental health facility or detained for evaluation and treatment because he or she is an epileptic, developmentally disabled, senile or suffering from a mental disorder, unless that condition causes the person to be seriously mentally ill or seriously behaviorally disordered.

Part 2

Treatment and Procedures

- 11.1.201. Voluntary Admission. Provisions of this chapter may not be construed to limit the right of any person to make a voluntary application for admission at any time to any mental health facility. This chapter does not apply to voluntary admissions except that if an admission which is originally voluntary becomes involuntary as a result of a medical determination, the provisions of this chapter shall be followed.
- 11.1.202. Standards for Detention for Emergency Situation. The following standards shall apply for emergency detention situations:
- (1) When an emergency situation exists, a Tribal officer may take any person, subject to the jurisdiction of the Tribal Court, who appears to be seriously mentally ill or seriously behaviorally disordered and as a result of serious mental illness or serious behavioral disorder to be a danger to himself or herself or others into custody only for sufficient time, but not to exceed the next regular business day, to contact a professional person for emergency evaluation. If practical, a professional person should be called prior to taking the person into custody. The officer shall immediately transport the person to the I HS emergency room for evaluation and shall remain until transportation and detention decisions are made by the professional person.
- (2) If the professional person agrees that the person held in custody appears to be seriously mentally ill or seriously behaviorally disordered and that an emergency situation exists, then the person may be detained until the next regular business day. At that time, the professional person shall arrange for release of the detained person or file his or her findings with the Tribal Prosecutor, who, if he or she determines probable cause to exist, shall file the petition provided for in Section 11.1.205 in the Tribal Court. Otherwise, the detained person shall be released.
- (3) The officer who detains a person under this section shall inform that person of the following: "You are being detained in a special facility to protect you from harming yourself or others. The Crow Police Department has authority to hold you until a professional person assesses your condition."
- (4) A sworn statement, under oath and substantially in the form of the following affidavit, must be prepared contemporaneously when a person is taken into custody for emergency detention under this chapter. The statement shall be given by a witness who has actual knowledge of the facts and circumstances justifying the detention. The officer responding to the emergency situation is authorized to take the sworn statement and shall administer the oath and sign the statement as the authorized official. The responding officer may complete the sworn statement as the witness if he or she has personal knowledge of the facts and circumstances justifying detention and no other witness is available. The sworn statement shall be admissible in any court proceeding under this chapter. False swearing by a witness or the responding officer shall be punishable as a contempt of court.



THE CROW NATION TRIBAL COURT

AFFIDAVIT OF PROBABLE CAUSE IN SUPPORT OF EMERGENCY DETENTION

CASE NO.

		ddress x 489, Crow Agency, Montana 59022		Court telephone no. (406) 638-4050	Court fax no. (406) 638-4082	
		THE CROW TRIBE	V.	Name of Person to be Detaile RESPONDENT	ed,	
			AFFIDAVIT			
l, _	follow	wing facts to justify emergency detention of the pe	ween named aho		, being duly sworn, offer	
	1.	I have personal knowledge of the facts and circular labelieve this person is either a danger to himsel		or is substantially unable to care for him/herself.		
My belief is based upon the following information known to me through personal observation a (Describe in your own words in as much detail as possible.)						
		·				
		: '		· · · · · · · · · · · · · · · · · · ·		
	_					
			· · · · · · · · · · · · · · · · · · ·			

Court to determine whether I should be held in co	intempt of court and fined or punished.
WORN TO AND SIGNED THIS day of	20
JBSCRIBED AND SWORN TO BEFORE ME THIS	_day of20
dminister Oaths	Signature of Officer or Other Person Authorized to
	Printed Name of Person Administering Oath*
_aw enforcement officers are authorized to administer oat	h to witness; if the officer is preparing this affidavit based on personal

Lunderstand that intentionally making a false statement in this affidavit may result in a proceeding before the Crow Tribal

11.1.203. Detention to be in Least Restrictive Environment.

A person detained pursuant to this chapter shall be held in the least restrictive environment required to protect the life and physical safety of the person detained or to protect the life and physical safety of members of the public. The person should be detained in a secure mental health facility; if none is available, the person may be held in jail under protective custody until assessment on the next business day.

11.1.204. Rights and Waiver of Rights

- (a) Procedural Rights. The person who is subject to an action under this chapter shall be guaranteed the following rights in addition to and in recognition of other rights guaranteed by applicable federal and tribal law:
 - (1) The right to five (5) working days notice in advance of a hearing upon a commitment petition concerning the person, or other Court proceeding concerning the person.
 - (2) The right to be present at any hearing, to offer evidence, and to present witnesses in any proceeding concerning the subject.
 - (3) The right to know, before a hearing, the names and addresses of any witnesses who will testify in support of a petition and the right in any hearing to cross-examine witnesses.
 - (4) The right to be represented by a private attorney at their own expense. If the person cannot afford an attorney, an attorney SHALL be provided at the Tribe's expense.
 - (5) The right to have a "friend of respondent" appointed by the Court.

2007.JAN.18
Bill to Amend Title on Mental Health Commitments
FINAL AS AMENDED AND ADOPTED
Page 7 of 16

- (6) The right to remain silent.
- (7) The right to have the evidence presented against the person judicially reviewed on questions of sufficiency of the evidence.
- (8) The right to view and copy all relevant documents on file with the Court concerning the pending case.
- (9) The right to be examined by a professional person of the person's choice when such professional person is willing and reasonably available. The cost of such examination will be paid by Tribal Health.
- (10) The right to refuse any but lifesaving medication as determined by a professional person for up to twenty-four (24) hours prior to any hearing held pursuant to this act and the right to voluntarily take necessary medications prior to any hearing pursuant to this part.
- (11) The right to appeal final orders of the Court.
- (12) The right to be informed of these rights by the Tribal Judge at the initial hearing.
- (b) Waiver of rights. (1) A person may waive his rights, or if the person is not capable of making an intentional and knowing decision, these rights may be waived by his counsel and friend of respondent acting together if a record is made of the reasons for the waiver. The right to counsel may not be waived. The right to treatment provided for in this part may not be waived.
- (2) The right of the respondent to be physically present at a hearing may also be waived by his attorney or lay advocate and the friend of respondent with the concurrence of the professional person and the judge upon a finding supported by facts that:
- (a) the presence of the respondent at the hearing would be likely to seriously adversely affect the respondent's mental condition; and
- (b) an alternative location for the hearing in surroundings familiar to the respondent would not prevent such adverse effects on his mental condition.
- 11.1.205. Petition for Commitment. Any person, including the respondent's parents or other extended family members, having direct knowledge of facts which tend to support a finding that a person within the jurisdiction of the Crow Tribal Court is suffering from a mental disorder and should be committed under this chapter, may request that a petition be filed by the Tribal Prosecutor. A person subject to the jurisdiction of the Tribal Court may be committed to a mental health treatment facility for a period of no more than three (3) months upon an appropriate verified petition in the Tribal Court, establishing by evidence that the respondent is suffering from a mental disorder and should be committed. In addition to such showing, the following must be set forth in the petition:

- (1) The name and address of the person requesting the petition, and the person's interest in the case.
- (2) The name of the respondent (person to be committed) and, if known, the address, age, gender, marital status, and occupation of the respondent.
- (3) The name and address of respondent's nearest known relative.
- (4) The name and address of any person known or believed to be legally responsible for the care, support, and maintenance of the respondent.
- (5) Any facts supporting the allegation of serious mental illness.
- (6) The name, address and telephone number of any known attorney or advocate who has represented the person in the past.
- (7) A statement of the respondent's rights which shall be in conspicuous print and identified by a suitable heading.
- 11.1.206. Who May File a Petition to Commit. A Tribal Court Prosecutor, upon the written request of any person, including the respondent's parent(s) or other extended family members, having direct knowledge of facts, may file a petition in the Tribal Court alleging that there is a person within the jurisdiction of the Court who is suffering from a mental disorder and who requires commitment pursuant to this chapter.
- <u>11.1.207. Court Proceedings</u>. Upon filing the petition, the Tribal Court Judge shall examine the petition for probable cause.
- (1) If the Judge does find probable cause, counsel shall be immediately appointed for the respondent and the respondent shall be brought forthwith before the court with his counsel for an initial hearing within twenty-four (24) hours of detention. The Judge shall appoint a friend of the respondent and a professional person, and shall fix a date for a hearing on the petition no later than five (5) days after this initial hearing, including weekends and holidays unless the fifth day falls upon a weekend or holiday. The desires of the respondent shall be taken into consideration in the appointment of the friend of respondent and in the confirmation of the appointment of the attorney. If provided with information concerning the identity and address of extended family members, the Court shall provide notice to the extended family members and shall indicate that they have a right to file a request to intervene as a party in the case.
- (2) A copy of the petition and of the notice of the hearing on the petition, including the date fixed by the Court, shall be personally served on the respondent. A copy of the petition and of the notice of the hearing, including the date fixed by the Court, shall be served either personally or by any other means allowed under the law on the respondent's next of kin, a parent or legal guardian if the respondent is a minor, the "friend of respondent" if one has been appointed, the respondent's attorney and any extended family members who have been granted the legal right to intervene as a party in the case.

2007.JAN.18
Bill to Amend Title on Mental Health Commitments
FINAL AS AMENDED AND ADOPTED
Page 9 of 16

- (3) The Court shall appoint a professional person to assess the respondent prior to the initial hearing. Such appointed professional person shall be present for the initial hearing and provide testimony before the Court.
- (4) The respondent must be advised of the respondent's rights under this part, and the substantive effect of the petition. The respondent may at this appearance object to the finding of probable cause for filing the petition.

11.1.208. Detention of Respondent pending hearing or trial - jail prohibited.

If circumstances warrant detention of respondent, the respondent shall be informed of his or her rights and the following prerequisites met:

- (1) The Court may not order detention of a respondent pending the hearing unless requested by the Tribal Prosecutor and only on a showing of probable cause for the detention. Respondent may then request a detention hearing which must be held before transportation to a detention facility.
- (2) In the event of detention, the respondent must be detained in the least restrictive setting necessary to assure his or her presence and assure his or her safety and the safety of others.
- (3) If the respondent is detained, he or she has the right to be examined additionally by a professional person of his or her choice. Unless objection is made by the respondent, he or she must continue to be evaluated and treated by the professional person pending the hearing.
- (4) A respondent may not be detained in a jail or other correctional facility pending a hearing on a petition for a commitment or trial to determine whether the respondent requires commitment to a mental health facility unless the court finds that no other option is currently available, in which case the person may be detained in jail under protective custody until an institutional placement can be arranged by the professional person and/or the Tribal Prosecutor.
- 11.XX.209. Request for Jury Trial. At any time prior to the date set for hearing, respondent may request a jury trial, whereupon the time set for hearing shall be vacated and the matter set on the court's jury calendar at the earliest date possible, the matter taking precedence over all other matters. If there is not a jury in attendance, a jury shall be selected in accordance with the Crow Law and Order Code process and a date set for trial by jury no later than seven (7) days from the request date, exclusive of Saturdays, Sundays, and holidays.

11.1.210. Hearing on Petition for Commitment. A hearing on a Petition for Commitment shall consist of:

- (1) The standard of proof in any hearing held pursuant to this section is proof beyond a reasonable doubt with respect to any physical facts or evidence and clear and convincing evidence as to all other matters, except that mental or behavioral disorders shall be evidenced to a reasonable medical certainty. Imminent threat of self-inflicted injury or injury to others shall be evidenced by overt acts, sufficiently recent in time as to be material and relevant as to the respondent's present condition.
- (2) The professional person upon whose judgment the petition was based must be present for the hearing and subject to cross-examination. The hearing shall be governed by the Rules of Civil Procedure except that, if tried by a jury, at least two-thirds of the jurors must concur on finding that the respondent is seriously mentally ill. The written report of the professional person that indicates the professional person's diagnosis may be attached to the petition, but must be verified by the professional person at the hearing before formal admission into evidence.
- (3) The professional person may testify as to the ultimate issue of whether the respondent is suffering from a mental disorder and requires commitment pursuant to this chapter. This testimony is insufficient unless accompanied by evidence from the professional person or others that:
 - (a) the respondent is suffering from a mental or behavioral disorder; and
 - (b) the mental or behavioral disorder has resulted in self-inflicted injury or injury to others or the imminent threat thereof, or has deprived the person afflicted of the ability to protect his or her life or health, or has rendered the person substantially unable to care for themselves.
 - (c) If, upon hearing or trial, it is determined that the respondent is not suffering from a mental disorder within the meaning of this part, he or she shall be discharged and the petition dismissed.
 - (d) If it is determined that the respondent is suffering from a mental disorder and requires commitment pursuant to this chapter, the court shall:
 - (i) commit the respondent to a facility for a period of not more than three (3) months if a facility subject to the Court's jurisdiction is available; or
 - (ii)enter the Court's Order of commitment, with findings of fact and conclusions of law, and instruct the Tribal Prosecutor to request the County Attorney for the county in which the respondent resides to file a petition with the state district court to recognize and enforce the Tribal Court order.

2007.JAN.18
Bill to Amend Title on Mental Health Commitments
FINAL AS AMENDED AND ADOPTED
Page 11 of 16

- (e) If it is determined that the respondent is not seriously mentally ill or seriously behaviorally disordered but is mentally ill or behaviorally disordered within the meaning of this part, the Court shall:
 - (i) order outpatient therapy not to exceed thirty (30) days; or
 - (ii) order the respondent be placed in the care and custody of a relative or guardian, or some other appropriate place other than an institution not to exceed thirty (30) days; or
 - (iii) make some other appropriate order for treatment other than commitment.
- (f) In determining which of the above alternatives to order, the court shall choose the least restrictive alternatives necessary to protect the respondent and the public and to permit effective treatment.
- 11.1.211. Appeal Procedure. Appellate review of any order of short-term evaluation and treatment or long-term commitment may be had by appeal to the Crow Appellate Court in the same manner as other civil cases, except that the appeal may be taken at any time within ninety (90) days of the actual service of the commitment order, or within ninety (90) days after discharge, whichever is later. Appeals under this chapter shall take priority over all other cases on appeal.
- 11.1.212. Diversion of Certain Mentally Ill Persons from Jail. If a tribal jail inmate is determined by a professional person to be suffering from a mental disorder after referral from the Crow Police Department, Indian Health Service or the Crow Tribe shall arrange for appropriate mental health treatment which may include:
- (1) a request for services from a crisis intervention program;
- (2) referral to the nearest community health center; or
- (3) transfer to a private mental health facility or hospital equipped to provide treatment and care of persons who are suffering from a mental disorder.
- 11.1.213. Establishment of Patient Treatment Plan Patient's Treatment Plan Patient's Rights. An individualized treatment plan shall be developed for all persons ordered to treatment.
- (1) A person ordered to treatment under Section 11.1.210 shall have an individualized treatment plan developed by appropriate professional persons, which shall include a psychiatrist or psychologist, and shall be implemented no later than ten (10) days after a person's admission. Each individualized treatment plan shall contain:
- (a) a statement of the nature of the specific problems and specific needs of the patient;

2007.JAN.18
Bill to Amend Title on Mental Health Commitments
FINAL AS AMENDED AND ADOPTED
Page 12 of 16

- (b) a statement of the least restrictive treatment conditions necessary to achieve the purposes of commitment;
- (c) a description of intermediate and long-range treatment goals, with a projected timetable for their attainment;
- (d) a statement and rationale for the plan of treatment for achieving these intermediate and long-range goals;
- (e) a specification of staff responsibility and a description of proposed staff involvement with the patient in order to attain these treatment goals;
- (f) criteria for release to less restrictive treatment conditions and criteria for discharge; and
- (g) a notation of any therapeutic tasks and labor to be performed by the patient.
- (2) An aftercare plan shall be developed by a professional person as soon as practicable after the patient's admission to the facility with an emphasis on reservation based services.
- (3) An identified professional person shall be responsible for supervising implementation of this treatment plan, integrating various aspects of the treatment program, and recording the patient's progress and coordinating with other programs providing mental health treatment.
- (4) A patient has the right:
 - (a) to ongoing participation, in a manner appropriate to the patient's capabilities, in the planning of mental health services to be provided and in the revision of the plan;
 - (b) to a reasonable explanation of the following, in terms and language appropriate to the patient's condition and ability to understand:
 - (i) the patient's general mental condition and, if given a physical examination, the patient's physical condition;
 - (ii) the objectives of treatment;
 - (iii) the nature and significant possible adverse effects of recommended treatments;
 - (iv) the reasons why a particular treatment is considered appropriate;
 - (v) the reasons why access to certain visitors may not be appropriate; and
 - (vi) any appropriate and available alternative treatments, services, or providers of mental health services; and

- (c) not to receive treatment established pursuant to the treatment plan in the absence of the patient's informed, voluntary, and written consent to the treatment, except treatment during an emergency situation if the treatment is pursuant to or documented contemporaneously by the written order of a responsible mental health professional.
- (5) In the case of a patient who lacks the capacity to exercise the right to consent to treatment, the right must be exercised on behalf of the patient by a guardian appointed by the Court.
- 11.1.214. Examination Following Commitment. No later than thirty (30) days after a patient is committed to a mental health facility, the professional person in charge of the facility or his or her appointed, professionally qualified agent shall reexamine the committed patient and shall determine whether he or she continues to require commitment to the facility and whether a treatment plan complying with this part has been implemented. If the patient no longer requires commitment to the facility in accordance with the standards for commitment, he or she must be released immediately unless he or she agrees to continue with treatment on a voluntary basis.
- 11.1.215. Crisis Intervention. The Indian Health Service or the Crow Tribe shall establish a crisis intervention procedure to provide twenty-four (24) hour emergency intervention by a professional person for alleged seriously mentally ill or seriously behaviorally disordered persons, mentally ill persons and persons with mental or behavioral disorders. Such intervention shall include assessment, forwarding reports to the Prosecutor's office for a Petition to Commit, admission arrangements to a mental health treatment facility, and direct services.
- <u>11.1.216.</u> Confidentiality of Records. All communications, oral or written, of any individual shall be confidential and privileged information.
- (1) All information obtained and records prepared in the course of providing any services under this part to individuals under any provision of this part shall be confidential and privileged matter and shall remain confidential and privileged after the individual is discharged from the facility. Except as otherwise provided by Tribal or Federal law, information and records may be disclosed only:
 - (a) in communication between qualified professionals in the provision of services or appropriate referrals;
 - (b) when the recipient of services designates persons to whom information or records may be released, provided that if a recipient of services is a ward and his guardian or conservator designates in writing persons to whom records or information may be disclosed, such designation shall be valid in lieu of the designation by the recipient; except that nothing in this section shall be construed to compel a physician, psychiatrist, psychologist, social worker, nurse, attorney, or other professional person, to reveal information which has been given to him or her in confidence by members of a patient's family;
 - (c) to the extent necessary to make claims on behalf of a recipient of aid, insurance, or medical assistance to which he may be entitled;

2007.JAN.18
Bill to Amend Title on Mental Health Commitments
FINAL AS AMENDED AND ADOPTED
Page 14 of 16

- (d) for research if the Indian Health Service or appropriate Crow agency has promulgated rules for the conduct of research; such rules shall include but not be limited to the requirements that all researchers must sign an oath of confidentiality;
- (e) to the courts as necessary to the administration of justice; and
- (f) to persons authorized by an order of court, after notice and opportunity for hearing to the person to whom the record or information pertains and the custodian of the records or information pursuant to the rules of civil procedure.
- 11.1.217. Care and Treatment Following Release. The Indian Health Service or appropriate Crow agency and their agents have an affirmative duty to provide adequate transitional treatment and care for all patients released after a period of involuntary confinement. Transitional care and treatment possibilities include but are not limited to psychiatric day care, treatment in the home by a visiting therapist, nursing home or extended care, a half-way house, outpatient treatment, and treatment in the psychiatric ward of a general hospital.

PART 3

Evaluation and Improvement

- 11.1.301. Evaluation of this Chapter. The Executive Branch shall establish a Crow Mental Health Advocacy Committee to conduct on-going evaluation of the application and effectiveness of this chapter. The Committee shall be comprised of appropriate legal and medical professionals, a legislator designated by the Crow Legislature, and at least two members of the Apsaalooke Nation with knowledge of and an interest in improving mental health services for Crow tribal members and their families.
- 11.1.302. Report of Mental Health Advocacy Committee. On or before October 1 of 2007, 2008 and 2009, the Committee shall provide a written report to the Chairman of the Executive Branch and to the Chairman of the Health and Human Services Subcommittee of the Legislative Branch and shall make an oral presentation concerning the report at a time to be scheduled by the Speaker of the Legislature. The report shall contain a thorough evaluation of the application and effectiveness of this chapter and shall include recommendations for amendments or additions which will promote achievement of the goals set forth in 11.1.101 of this chapter: to promote the health, safety, culture, and general welfare of the Tribal Community; to recognize mental illness as a disease subject to a variety of treatment alternatives and choices; and to recognize that the person who has a mental illness is entitled to heal in the least restrictive and most culturally relevant environment.

Section 2. Upon enactment of this Bill by the Crow Tribal Legislature and approval of the Chairman of the Executive Branch, the foregoing amendments are hereby adopted, with an immediate effective date.

2007.JAN.18
Bill to Amend Title on Mental Health Commitments
FINAL AS AMENDED AND ADOPTED
Page 15 of 16

CERTIFICATION

I hereby certify that this Bill was duly enacted by the Crow Tribal Legislature with a vote of $\underline{13}$ in favor, $\underline{1}$ opposed, and $\underline{0}$ abstained and that a quorum was present on this $\underline{18}^{th}$ day of $\underline{January}$, 2007.

Speaker of the House

Crow Tribal Legislature

~Servant of the Apsáalooke Nation~

ATTEST:

Secretary, Crow Tribal Legislature



EXECUTIVE ACTION

I hereby _____ veto this Bill pursuant to the authority vested in the Chairman of the Crow Tribe by Article V, Section 8 of the Constitution and Bylaws of the Crow Tribe of Indians, on this _____ day of ______, 2007.

Carl E. Venne, Chairman

Crow Tribal Executive Branch

Bill or Resolution Number CLB07-05 Introduced by Executive Date of Vote January 18, 2007

Representative:	·.]	Yes	No		Abstained
L. Plain Bull					
O. Costa					
V. Crooked Arm	<u> </u>				
M. Not Afraid	<u>u</u>				
R. Iron	<u> </u>				
B. House	<u> </u>				
E. Fighter	<u>. </u>				
L. Costa	<u>_</u>				
L. Hogan	<u> </u>				
S. Fitzpatrick	·				
K. Real Bird					
M. Covers Up	<u> </u>				
L. Not Afraid	<u></u>				
B. Shane	<u>_</u>				
J. Stone	<u></u>			_	
D. Wilson			_ <u> </u>	_	
R. Old Crow Secretary of the House	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·		
D. Goes Ahead Speaker of the House				٠.	
Totals:	1	3		-	0
Result of Vote:			•		
	Passed	Not Pass	ed Tabled	V	eto Override

Signature Officer Carbon Jose Ch. Date: 1-18-2007