



Children's Hospital Colorado

Affiliated with
 University of Colorado
 Anschutz Medical Campus

MANUAL/DEPARTMENT	CLINICAL POLICY AND PROCEDURE MANUAL
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POLICY: Mental Health Hold for Involuntary Treatment

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PURPOSE

To summarize the procedure for placing an individual on a 72-Hour Hold as described more fully in the Colorado Revised Statutes, 27-65 101 et seq.

SCOPE

Children's Hospital Colorado (CHCO) – All Locations

PERSONNEL

- Refer to [Personnel](#) for definitions
- Medical Staff Credentialed Providers and Residents (Provider)
- Psychiatric Nurse Practitioner
- Licensed Psychologist
- Registered Nurse (RN)
- Unit Secretary
- Clinical Social Worker (LCSW)
- Licensed Professional Counselor

DEFINITIONS

Danger to Self	<ul style="list-style-type: none"> ○ The individual poses a substantial risk of physical harm to self as manifested by evidence of recent threats of or attempts at suicide or serious bodily harm to self.
Danger to Others	<ul style="list-style-type: none"> ○ With respect to other persons, that the individual poses a substantial risk of physical harm to another person or persons, as manifested by evidence of recent homicidal or other violent behavior by the person in question, or by evidence that others are placed in reasonable fear of violent behavior and serious physical harm to them, as evidenced by a recent overt act, attempt, or threat to do serious physical harm by the person in question.
Family Member	<ul style="list-style-type: none"> ○ Spouse, parent, adult child, or adult sibling of a person with a mental illness.
Gravely Disabled	<ul style="list-style-type: none"> ○ A condition in which a person, as a result of a mental health disorder, is incapable of making informed decisions about or providing for his or her essential needs without significant supervision and assistance from other people. As a result of being incapable of making these informed decisions, a person who is gravely disabled is at risk of substantial bodily harm, dangerous worsening of any concomitant serious physical illness, significant psychiatric deterioration, or mismanagement of his or her essential needs that could result in substantial bodily harm. A person of any age may be "gravely disabled", but such term does not include a person whose decision-making capabilities are limited solely by his or her developmental disability.
Independent Professional Person	<ul style="list-style-type: none"> ○ Professional person, as defined below who evaluates a minor's condition as an independent decision-maker and whose recommendations are based on the standard of what is in the best interest of the minor. The professional person may be associated with the admitting mental health facility if he or she is free to independently evaluate the minor's condition and need for treatment and has the authority to refuse admission to any minor who does not satisfy the statutory standards.
Legal Guardian	<ul style="list-style-type: none"> ○ An individual appointed by the court, or by will, to make decisions concerning an incapacitated individual's or minor's care, health and welfare.
Minor	<ul style="list-style-type: none"> ○ A person under eighteen years of age; except that the term does not include a person who

	is fifteen years of age or older who is living separately and apart from his or her parent or legal guardian and is managing his or her financial affairs, regardless of his or her source of income, or who is married and living separately and apart from his or her parent or legal guardian.
Person with a mental illness	<ul style="list-style-type: none"> ○ A person with one or more substantial disorders of the cognitive, volitional, or emotional processes that grossly impairs judgment or capacity to recognize reality or to control behavior. Developmental disability is insufficient to either justify or exclude a finding of mental illness within the provisions of this article.
Petitioner	<ul style="list-style-type: none"> ○ Any person who files any petition in any proceeding in the interest of any person who allegedly has a mental illness or is allegedly gravely disabled.
Professional Person	<ul style="list-style-type: none"> ○ a person (1) licensed to practice medicine in Colorado; or (2) a psychologist certified in Colorado
Respondent	<ul style="list-style-type: none"> ○ A person alleged in a petition to have a mental illness or be gravely disabled.
Ward	<ul style="list-style-type: none"> ○ An individual for whom a legal guardian has been appointed.

POLICY

1. Taking an Individual into Custody

- A. When any person appears to have a mental illness and, as a result of such mental illness, appears to be an imminent danger to others or to self or appears to be gravely disabled, an intervening professional upon probable cause and with such assistance as may be required, may take the person into custody, or cause the person to be taken into custody and placed in a designated or approved 27-65 facility for a 72-hour Hold for treatment and evaluation.
- 1) Note: Once a 72-hour Hold has been initiated, the person cannot voluntarily leave until the 72-hour hold has been resolved.

PROCEDURES

1. Placement of a 72-hour Hold

- A. The following persons may place a 72-hour hold:
- 1) Certified peace officer
 - 2) Physician or Licensed Psychologist with a license in the state of Colorado
 - 3) An APRN with psychiatric/mental health training (i.e. Psychiatric NP)
 - 4) Licensed marriage and family therapist, licensed professional counselor, or licensed addiction counselor who by reason of postgraduate education and additional preparation has gained knowledge, judgment, and skill in psychiatric or clinical mental health therapy, forensic psychotherapy, or the evaluation of mental disorders.
 - 5) Licensed clinical social worker.
- B. In the event an individual is taken into custody and/or a 72-hour hold is placed:
- 1) Documentation.
 - a. A person meeting the qualifications above must document:
 - On an [Emergency Mental Illness Report and Application \("Application"\)](#) the circumstance under which the person's condition was called to his/her attention
 - That he/she believes that the person is mentally ill and, as a result, is an imminent danger to self or others, or gravely disabled, and must state facts sufficient to establish the above conclusions
 - When the person was taken into custody
 - Who brought the person's condition to his/her attention
 - The Application may be photocopied in order to distribute to
 - The facility where the evaluation and treatment will take place,
 - The respondent or the parent/legal guardian, and
 - A copy of the Application must be left with the evaluation and treatment facility and made a part of the person's evaluation and treatment record.
 - 2) Advisement of Patient Rights.
 - a. Each person placed on a 72-hour hold must be advised of his/her rights (Rights of Patients [English/Spanish](#)) and documentation of same must be entered into the medical record demonstrating that this was performed.

- b. In case of a minor, parent or guardian is also advised of patient rights.
 - 3) Patients currently admitted on a medical floor that are placed on a 72 Hour hold after admission must be placed on one-to-one observation in order to prevent the patient from leaving the hospital from an unsecured unit. Refer to: [Observation of the Patient at Risk for Suicide, Elopement, Aggression and Unsafe Behavior](#)
2. 72-Hour Evaluation and Treatment
 - A. Evaluation and treatment.
 - 1) An individual admitted to a 72-hour treatment and evaluation facility must receive an evaluation as soon as possible after he or she is admitted and must receive such treatment and care as his or her condition requires for the full period that he or she is held.
 - B. Release of 72-hour hold.
 - 1) The person must be released before 72-hours have elapsed if, in the opinion of the professional person in charge of the evaluation determines that the individual no longer requires evaluation or treatment.
 - C. After 72 hours, the individual who has been detained on a 72-hour hold must be:
 - 1) Released
 - 2) Referred for further care and treatment on a voluntary basis; or
 - 3) Certified for treatment.
 - D. If the person has been evaluated under a court order ([Affidavit, Motion, and Order for Evaluation and Treatment](#)) the professional person who completed the evaluation must:
 - 1) Submit a report to the court ([Notice of Disposition](#)) regarding the disposition of the evaluation and a copy of the report is placed in the person's medical record.
 3. Transport of an Individual on a 72-Hours Hold
 - A. Patients under psychiatric care who are being transferred to another facility of equal or higher level of care for admission must be placed on a 72 hour Mental Health Hold. This is required for the purpose of facilitating a safe transfer of care because the patient meets state requirements for a hold (ie present an imminent danger to self, other and/or grave disability due to a mental health condition). Note: Transport by private occupancy vehicle (POV) is not permitted for patients on a 72-hour Hold.
 - 1) Transfer center arranges a basic life support (BLS) ambulance transport or an advance life support (ALS) ambulance transport, to transfer the patients to the needed location.
 - 2) ALS transport is considered if the Provider determines the patient may require additional assessment and intervention en route. All requirements as stated above apply to these circumstances.
 - B. Transportation via Sheriff.
 - 1) Whenever it appears to the court, by reason of a report by the treating professional person or any other report satisfactory to the court, that an individual should be transferred to another facility for treatment and the safety of the respondent or the public requires that the respondent be transported by a sheriff, the court may issue an order directing the sheriff or his or her designee to deliver the respondent to the designated facility.
 4. Ward of the State and Mental Health Treatment
 - A. A ward of the State may be admitted to a hospital for care and treatment for mental illness by consent of the guardian as long as the ward agrees to such care and treatment. Within ten days of any such admission, the guardian must notify in writing the court that appointed the guardian of the admission.
 5. Minors and Mental Health Services
 - A. A minor who is fifteen (15) years of age or older, may consent to receive mental health services provided by a facility or a professional person.
 - 1) Disclosure to Parent(s) or Legal Guardian(s).
 - a. The professional person rendering mental health services to a minor may, with or without the consent of the minor, advise the parent or legal guardian of the minor of the services given or needed.
 - 2) The parent(s) or legal guardian(s) must be contacted without the minor's consent if:
 - a. The individual presents a danger to self or others; or

- b. Essential medical information is necessary for the parent(s) or legal guardian(s) to make informed medical decisions on behalf of the minor.
- 6. Consent for Voluntary Hospitalization
 - A. Hospitalization of a minor who is fifteen (15) years of age or older.
 - 1) The minor or a parent or legal guardian of a minor may make voluntary application for hospitalization.
 - a. In order to assure that the minor's consent to such hospitalization is voluntary, the minor is advised, at or before the time of admission, of his or her right to refuse to sign the admission consent form and his or her right to revoke his or her consent at a later date.
 - b. If the individual chooses to sign in voluntarily he/she must be given orally and in writing ([Advisement to Person on 72-Hour Hold for Evaluation or Certified for Treatment](#)) the following advisement: "The decision to sign in voluntarily should be made by you alone and should be free from any force or pressure implied or otherwise. If you do not feel that you are able to make a truly voluntary decision, you may continue to be held at the hospital involuntarily. As an involuntary patient, you will have the right to protest your confinement and request a hearing before a judge."
 - B. Hospitalization of a minor who is under the age of fifteen (15).
 - 1) Whenever such application for voluntary hospitalization is made, an independent professional person interviews the minor and conducts a careful investigation into the minor's background, using all available sources, including, but not limited to, the parents or legal guardian, the school and any other social agencies.
 - 2) Prior to admitting a minor for hospitalization, the independent professional person makes these following findings:
 - a. That the minor has a mental illness and is in need of hospitalization;
 - b. That a less restrictive treatment alternative is inappropriate or unavailable; and
 - c. That hospitalization is likely to be beneficial.

RELATED DOCUMENTS

- [Psychotropic Medications](#)
- [Observation of the Patient at Risk for Suicide, Elopement, Aggression and Unsafe Behavior](#)
- [Psychiatric Patient Safe Room Checklist](#)
- [Checklist for Psychiatric Patient in the Network of Care](#)
- [Patient Belongings Checklist: Personal Belongings Inventory Worksheet](#)
- [Certification for Short Term Involuntary Treatment Policy](#)
- [Mental Health Forms](#)

REFERENCES

Refer to the [AACN Level of Evidence Table](#) for more information

Reference	Level of Evidence	Review Date
Colorado Revised Statutes, Title 27, Article 65 Care and Treatment of Persons with Mental Illness Act.		April 2015

REVIEWED BY

Title	Date
Associate General Counsel, Legal Affairs	February 2015
Restraint Oversight Committee	April 2015
MD, Psych Professionals	May 2015
MD, Psychology Training	May 2015
MD, Medical Director Emergency Medicine-PIC	May 2015
Clinical Nurse Specialist 8th Floor - Medical	June 2015
Director Patient Care Services Psych BS Administration	June 2015
Accreditation Compliance Spec	June 2015

Mental Health Counsellor III, Psychiatric Access Improvement
Director, Transport Team
Clinical Policy and Procedure Committee

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