

GENERAL ASSEMBLY OF NORTH CAROLINA
SESSION 2011

SESSION LAW 2012-128
SENATE BILL 347

AN ACT RELATING TO REASONABLE SAFETY AND CONTAINMENT MEASURES
FOR MANAGING PATIENTS PENDING INVOLUNTARY COMMITMENT
PLACEMENT.

The General Assembly of North Carolina enacts:

SECTION 1. Part 7 of Article 5 of Chapter 122C of the General Statutes is amended by adding a new section to read:

§ 122C-263.2. Mental health crisis management: reasonable safety and containment measures.

An acute care hospital licensed under Chapter 131E, a department thereof, or other site of first examination that that uses reasonable safety or containment measures and precautions to manage the population of patients being held under appropriate supervision pending involuntary commitment placement and that does not otherwise operate as a licensable mental health facility shall not be deemed to be acting as a 24-hour facility; operating a psychiatric, substance abuse, or special care unit; offering psychiatric or substance abuse services; or acting as a licensed or unlicensed mental health facility. Actions considered to be reasonable safety or containment measures and precautions shall include the following: (i) altering rooms or removing items to prevent injury; (ii) placing patients in a consolidated location of the hospital; (iii) improvements to security and protection of staff; and (iv) any other reasonable measures that do not violate applicable law.

Reasonable safety or containment measures and precautions shall not be considered a violation of rules regulating acute care hospitals or mental health facilities. Placing patients in a consolidated location of the hospital pursuant to this subsection shall not constitute a special care unit. Nothing in this subsection relieves an acute care hospital or other site of first examination from complying with all other applicable laws or rules."

SECTION 2. The Department of Health and Human Services shall study LME efforts and activities (i) to reduce the need for acute care inpatient admissions for patients with a primary diagnosis of a mental health disorder, developmental disability, or substance abuse disorder and (ii) to reduce the number of patients requiring three or more episodes of crisis services. For the purpose of this section, crisis services include facility-based crisis services, mobile crisis services, and emergency department services. As part of their efforts, LMEs shall ensure appropriate levels of community-based care, including assessment management, boarding, and placement of individuals during the involuntary commitment process. The Department shall report its findings to the General Assembly beginning October 1, 2012, and quarterly thereafter. This section shall expire December 31, 2013.



SECTION 3. This act is effective when it becomes law.
In the General Assembly read three times and ratified this the 26th day of June,
2012.

s/ Walter H. Dalton
President of the Senate

s/ Thom Tillis
Speaker of the House of Representatives

s/ Beverly E. Perdue
Governor

Approved 12:24 p.m. this 29th day of June, 2012