

GENERAL ASSEMBLY OF NORTH CAROLINA
SESSION 2025

H.B. 1104
Apr 29, 2026
HOUSE PRINCIPAL CLERK

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HOUSE BILL DRH40681-NIz-171B

Short Title: IVC and Public Safety Committee.

(Public)

Sponsors: Representative Reeder.

Referred to:

1 A BILL TO BE ENTITLED
2 AN ACT TO REQUIRE THE NORTH CAROLINA DEPARTMENT OF HEALTH AND
3 HUMAN SERVICES, THE NORTH CAROLINA DEPARTMENT OF INFORMATION
4 TECHNOLOGY, AND THE ADMINISTRATIVE OFFICE OF THE COURTS TO STUDY
5 AND RECOMMEND SYSTEMIC IMPROVEMENTS TO THE INVOLUNTARY
6 COMMITMENT PROCESS, AS RECOMMENDED BY THE HOUSE SELECT
7 COMMITTEE ON INVOLUNTARY COMMITMENT AND PUBLIC SAFETY.

8 The General Assembly of North Carolina enacts:

9 **SECTION 1.** The North Carolina Department of Health and Human Services
10 (DHHS), the North Carolina Department of Information Technology (DIT), and the
11 Administrative Office of the Courts (AOC) shall study relevant statutes, judicial and clinical
12 practices, and available technological resources to identify areas for systemic improvement in
13 the involuntary commitment (IVC) process in the State. This study shall identify existing gaps in
14 the State's current IVC process and shall provide specific recommendations to address or
15 eliminate those gaps and ensure that individuals subject to involuntary commitment receive
16 timely, data-driven, and accessible support. On or before February 1, 2027, DHHS, DIT, and
17 AOC shall report to the Joint Legislative Committee on Health and Human Services on the results
18 of the study, which shall include, at a minimum, all of the following:

- 19 (1) A comprehensive evaluation of the legal and operational frameworks
20 governing involuntary commitment in the State to provide formal
21 recommendations for systemic improvement. This evaluation shall focus on
22 (i) ensuring that judicial officers receive timely clinical data from examiners
23 to make informed, legally sound decisions regarding an individual's safety and
24 treatment needs and (ii) establishing a foundation for more effective legal and
25 clinical outcomes, including:
- 26 a. Parameters for training judges and magistrates on community-based
27 services, such as Treatment Accountability for Safer Communities
28 (TASC), "Community Treatment" teams, and Forensic Assertive
29 Community Treatment (FACT) teams, to bolster treatment compliance
30 and reduce recidivism.
 - 31 b. Collaborating with the University of North Carolina School of
32 Government to develop clinical workflows, transport guidance, and
33 bench cards that ensure successful referrals across all agencies.
 - 34 c. The update of electronic examination forms, affidavits, and petitions
35 to capture consistent, high-quality data statewide.



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- 1 d. Strategies to increase data sharing between DHHS and the E-Courts
2 system regarding IVC exams and court proceedings, including the
3 feasibility of a public-facing dashboard.
4 (2) Any additional information deemed relevant by DHHS, DIT, and AOC to
5 ensure high-quality data collection and data-driven decision making across the
6 involuntary commitment system.
7 **SECTION 2.** This act is effective when it becomes law.