

DIVISION: MHDDAD	POLICY	No. 2.108
		ORIGINAL EFFECTIVE DATE: 3/21/1996
SUBJECT: MANAGEMENT AND RELEASE OF PATIENTS ACQUITTED AS NOT GUILTY BY REASON OF INSANITY (NGRI)		ANNUAL REVIEW MONTH: June
		REVISION EFFECTIVE: October 1, 2005
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REFERENCE: Official Code of Georgia Annotated (O.C.G.A.) [17-7-131](#)

I. PURPOSE

To provide guidelines for the management and release of patients committed to DHR following acquittal of criminal charges based on a finding of Not Guilty by Reason of Insanity (NGRI). This policy is in no way to abrogate the independent right of an NGRI acquittee to petition the court for release via a writ of habeas corpus.

II. APPLICABILITY

All hospitals operated by the Division of Mental Health, Developmental Disabilities and Addictive Diseases (MHDDAD).

III. DEFINITIONS

- A. **CD** – Hospital’s Clinical Director or designee
- B. **RHA** – Regional Hospital Administrator or designee.
- C. **Full Release** - The process by which an NGRI acquittee is discharged from the care of the Department of Human Resources (DHR) and released from NGRI status pursuant to a court order.
- D. **Conditional Release** - The process in which an NGRI acquittee is away from campus, unaccompanied by staff, for periods exceeding seven (7) consecutive days pursuant to a court-ordered period of supervised outpatient release in the community.
- E. **Unaccompanied Off-Campus Privileges** - The process in which an NGRI acquittee is away from campus (not to exceed seven (7) consecutive days), unaccompanied by staff, pursuant to a court order or written permission from the court, including but not limited to home visits, overnight passes, and community-based treatment, vocational and academic activities.
- F. **Forensic Treatment Team** - The interdisciplinary treatment team assigned by the Regional Hospital Administrator that is responsible for the overall treatment provided to patients on forensic units and is also responsible for certain decisions/reviews specified in this policy for forensic patients residing on adult mental health units. The team is comprised of a psychiatrists, registered nurse, behavior specialist, social

Responsible Sections/Office/Unit:	Approved:	Date:
	Gwendolyn B. Skinner Director	Oct. 1, 2005

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services provider and, at a minimum, has the consultative services of a licensed psychologist.

- G. NGRI Comprehensive Review Meeting** - A meeting of a forensic treatment team in which an NGRI patient's progress in treatment and status with regard to commitment criteria is reviewed.
- H. NGRI Comprehensive Review Packet** – The collection of documents prepared prior to and during an NGRI Comprehensive Review meeting containing the NGRI Summary Reports from each discipline, the treatment team's opinion regarding a patient's status with respect to commitment, supporting information and/or assessment data, and the proposed conditional release plan or discharge plan (whichever is applicable).
- I. Forensic Data Coordinator (FDC)** - The individual designated by a hospital to coordinate the management of data related to forensic patients, ensure accuracy of legal status and other information in forensic indictment/enrollment files in the hospital information system, monitor the records/documentation requirements, and maintain a tracking system to ensure compliance with applicable deadlines for review.
- J. Conditional Release Monitor** - The individual designated by a hospital to monitor conditionally-released NGRI acquittees' compliance with the conditions specified by their court-ordered conditional release plans. (May be the same individual as FDC.)
- K. Forensic Review Committee (FRC)** - A committee chaired by the hospital's Director of Forensic Services (or designee), the members of which are jointly appointed by the hospital's Clinical Director and Director of Forensic Services. This is a multidisciplinary committee, the majority of whom are from clinical service disciplines, and preferably consisting of at least five members. This committee does not have less than three members eligible to participate in any review, one of whom is a psychologist or psychiatrist. Members are not eligible to participate in reviews of patients who are under their direct clinical care or assigned to their treatment team. The purpose of this committee is to provide external review of, at a minimum: (a) changes to forensic patients' privilege levels that involve allowing unsupervised freedom of movement (on- or off-campus); (b) a forensic treatment team's opinion that a forensic patient does not meet inpatient commitment criteria; (c) any conditional release plan or other outpatient treatment plan developed for proposal to the court; (d) any opinion that an NGRI patient should be placed back into the community on an existing conditional release plan if that patient was returned to the hospital as a result of significant violation of conditions of the plan, (e) cases referred by the treatment team in which benefit from treatment is less than expected or in which progress toward placement in a less restrictive environment is not being achieved as expected, and (f) cases in which the NGRI acquittee requests a review of his/her treatment plan, treatment progress and/or commitment status. The NGRI acquittee may request such a review once every 12 months.

IV. POLICY STATEMENT

It is the policy of the Division of MHDDAD to provide for the management and treatment of consumers who have been found NGRI and to provide opinions within applicable time

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frames to the committing court regarding whether or not an NGRI acquittee meets inpatient and/or outpatient commitment criteria.

STATUTORY FRAMEWORK

Whenever a defendant is found NGRI, the court shall retain jurisdiction over the person and shall order the person to be detained in a state mental health facility, to be selected by DHR, for a period not to exceed thirty (30) days from the date of the acquittal order, for evaluation of the NGRI acquittee’s present mental condition. Upon completion of the evaluation, the proper officials of the mental health facility shall send a report to the trial judge, the prosecuting attorney and the NGRI acquittee’s attorney, if any.

Unless the judge decides to release the NGRI acquittee on the basis of the facility’s report alone, the judge must hold a hearing to determine if the acquittee meets the criteria for inpatient commitment in Chapter 3 or 4 of Title 37 of the Official Code of Georgia Annotated, whichever is applicable. This hearing, which is called the A30-day hearing”, shall be held within 30 days of the prosecuting attorney’s receipt of the facility’s report.

At the 30-day hearing, the judge may order the NGRI acquittee to be committed to DHR to receive involuntary inpatient treatment under Chapter 3 of Title 37 or to receive services under Chapter 4 of Title 37. The NGRI acquittee or the facility may, at any time during that commitment, ask the judge to fully or conditionally release the NGRI acquittee from DHR on the grounds that the NGRI acquittee no longer meets commitment criteria. If the finding of the court is adverse to release at such hearing, then a further release application by the defendant cannot be heard for 12 months. DHR has an independent right to request a release hearing once every 12 months.

If at the 30-day hearing, the judge determines that the NGRI acquittee meets the outpatient commitment criteria of Chapter 3 or 4 of Title 37, the judge may order the NGRI acquittee to undergo a conditional release, the treatment plan and conditions of release to be specified in the court order. The court is authorized to appoint an appropriate community service provider to work with DHR in monitoring the defendant’s compliance with these conditions and regular reporting to the court on the defendant’s progress.

V. PROCEDURES

- A.** The Director of Forensics at each facility designates a Forensic Data Coordinator (FDC) to be responsible for maintaining a tracking system for NGRI acquittees, ensuring that members of forensic treatment teams are aware of all applicable statutory and procedural deadlines for reviews and completion of documentation, and facilitating the timely notification of the committing court when an NGRI acquittee no longer meets inpatient or outpatient commitment criteria. The FDC also ensures that the legal status code and other information regarding the individual’s forensic involvement (e.g. forensic indictment and enrollment files) is correct in the facility’s computerized information management system.
- B.** The Director of Forensics at each facility designates one or more individuals as Conditional Release Monitor(s) to monitor conditionally-released NGRI acquittees’

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compliance with the conditions specified by their court-ordered conditional release plans.

- C. The Hospital Clinical Director and the hospital's Director of Forensic Services jointly appoint a Forensic Review Committee. The Director of Forensic Services or designee chairs the committee and ensures that committee members are informed regarding the requirements of applicable statutes (O.C.G.A. 37-3, 37-4, 17-7-130, 17-7-131), Division of MHDDAD and hospital policies, and are exposed to basic, relevant literature regarding the integration of risk assessment and risk management practices in treatment planning. Forensic treatment team members are not eligible to participate as members of the Forensic Review Committee in reviews of opinions regarding any of their assigned patients, but may participate in reviews of forensic patients not assigned to their treatment team or on their clinical caseload.
- D. Within 72 hours of admission of a new NGRI patient, the patient's treatment team is responsible for informing and providing new NGRI patients with a written copy of their rights (see Appendix A). If the patient has difficulty reading and/or comprehending the written notice of rights, the treatment team assists the patient in understanding these rights by reading and explaining these rights to the patient. All NGRI acquittees are provided with reminders of their rights as needed, but at least when a hearing is scheduled, at the time of each NGRI Comprehensive Review meeting, and at annual treatment plan review meetings. The original NGRI rights form signed by the patient and any subsequent forms presented at comprehensive review meetings are filed in the patient's medical record.
- E. Within 7 days of admission of a new NGRI patient, the Director of Forensic Services/designee notifies the Mental Health Advocacy Division of the Georgia Public Defenders' Standards Council and Division of MHDDAD's Office of Forensic Services and provides the name, admission date, charge(s) and county of the court that has jurisdiction.
- F. During the initial 30-day evaluation period, the assigned forensic treatment team is responsible for assessing and reviewing the commitment status of all NGRI acquittees within applicable time frames, developing conditional release plans, and if the court grants full release, making recommendations and ensuring the arrangement of necessary community treatment services. These specialized duties belong to a forensic treatment team regardless of where the NGRI acquittee is receiving services (i.e. adult mental health unit). The development of the essential elements of conditional release or discharge plans is formulated in conjunction with community providers, the patient, and any other individuals the patient identifies as members of his/her community support system whom the patient requests to be involved in development of discharge or conditional release plans.
- G. Unless fully or conditionally released at the 30-day hearing, NGRI acquittees progress through a program of treatment and/or habilitation goals outlined in the individual service plan or individualized program plan. Whenever possible, NGRI acquittees who are committed to DHR at their 30-day hearing are treated at the regional hospital that serves their county of residence in order to facilitate discharge planning.

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- H. The patient’s treatment team documents objective evidence of treatment/habilitation progress in the clinical record in accordance with the individualized service plan as defined in O.C.G.A. 37-3-1 (a) or the individualized program plan as defined in O.C.G.A. 37-4-2 (a).
- I. The FDC prompts the assigned forensic treatment team to schedule NGRI Comprehensive Review Meetings for all NGRI patients. For new NGRI patients, this meeting is scheduled in time to meet the requirements for submission of the 30-day report to the court. Subsequent NGRI Comprehensive Review Meetings are scheduled for each patient no less frequently than every 12 months thereafter until conditional or full release. NGRI acquittees who are returned to the hospital from conditional release, whether or not the conditional release is formally revoked by the court, are also scheduled for Comprehensive Review Meetings no less frequently than once every 12 months.
- J. Each discipline represented on the team prepares an up-to-date, discipline-specific NGRI summary reports for the NGRI Comprehensive Review Packet (see examples in Appendix B) within 10 days prior to 30-day NGRI Comprehensive Review Meetings and within 30-60 days prior to the Annual NGRI Comprehensive Review Meetings. The treatment team also develops, with the patient’s input, a draft conditional release plan with risk management and treatment elements prior to each Comprehensive Review meeting. This draft plan is a working document that is modified and refined as necessary during the course of the patient’s stay and forms the basis of the patient’s eventual conditional release or full release discharge plan.
- K. At the NGRI Comprehensive Review Meetings, the forensic treatment team::
1. Reviews and discusses the summary reports, and
 2. Reaches an opinion as to whether or not the patient meets the criteria for inpatient and/or outpatient commitment criteria and documents this opinion in the NGRI Review Packet. Individual team members do not document individual opinions regarding commitability in the record as this decision is one which is made by the treatment team as a whole.
- L. If it is the opinion of the forensic treatment team that the patient does not meet inpatient commitment criteria:
- a. The forensic treatment team:
 1. Forms an opinion as to whether or not the patient meets the outpatient commitment criteria.
 2. Examines and refines the draft conditional release plan (if the patient meets outpatient commitment criteria) or discharge plan (if the patient does not meet outpatient commitment criteria) developed in conjunction with the patient and community treatment providers who can provide the recommended treatment. (Due to time constraints often present (upcoming hearing), it is acceptable for the team to clearly describe the essential components of this plan, even if specific treatment providers have not been identified.)

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3. Forwards the NGRI Comprehensive Review Packet and conditional release or discharge plan to the Forensic Review Committee.
 4. Awaits review of the opinion at all levels within the hospital before the opinion is shared with either the patient or the court.
 5. If, at any point during this review process, it is determined that the clinical data indicate that the patient does meet the inpatient commitment criteria, the steps in M are followed
- b. The Forensic Review Committee reviews the NGRI Comprehensive Review Packet and conditional release or discharge plan, makes recommendations for changes or revisions, and, if the FRC concurs with the team's opinion regarding commitment and the proposed conditional release or discharge plan, forwards the NGRI Comprehensive Review Packet to the hospital's Clinical Director/designee.
 - c. Based on independent medical judgment and a review of the NGRI Comprehensive Review Packet and any other necessary documentation, the Clinical Director/designee determines whether the team's opinions as to inpatient and outpatient commitment are supported by the clinical evidence. If this determination is in agreement with the forensic treatment team, the Clinical Director reviews the conditions of the proposed conditional release plan or discharge plan (whichever is applicable) and makes recommendations for additions or revisions as needed.. If the Clinical Director concurs with the team's opinion, copies of the NGRI Comprehensive Review Packet, proposed plan and other supporting documentation will be forwarded by the Clinical Director to the Division of MHDDAD's Office of Forensic Services.
 - d. The DMHDDAD's Office of Forensic Services reviews the recommendations regarding commitment status and conditional release or discharge plan, provides feedback to the hospital's Clinical Director and Director of Forensic Services, and may require changes to the proposed conditional release or discharge plan. The Clinical Director then forwards all materials to the RHA/designee for consideration.
 - e. If the RHA concurs with the opinions regarding inpatient and outpatient commitment criteria and the proposed conditional release or discharge plan, the forensic treatment team is notified and within five (5) working days of receipt of the RHA's decision, a report is sent to the court (see Appendix C), DA and defense attorney along with a proposed conditional release or discharge plan and a request for a hearing.
 - f. If time constraints require (e.g. approaching court hearing), a proposed conditional release or discharge plan specifying the basic essential components, but not specific information, such as the name of providers, may be presented to the court with a request for additional time to identify providers or more specific details of the conditions. If the opinion is that the individual does not meet inpatient commitment criteria, the opinions regarding commitment criteria and proposed conditional release plan or discharge plan are approved through the process described in this section prior to submission of the 30-day report to the court. If needed, the team should request written permission from the court to extend the 30-day period

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to ensure a full review of the opinion and proposed conditional release plan prior to submission of this opinion to the court. If, at the 30-day hearing, the court finds that the criteria for inpatient commitment are not met and a detailed conditional release plan or discharge plan has not been finalized, the psychologist or psychiatrist representing the hospital requests an extension of time for presentation of such a plan to the court.

- g.** If a court orders conditional release even though this was not the hospital's recommendation, the lead forensic team member at the hearing requests a continuance in order for the treatment team to prepare a specific conditional release or discharge plan (whichever is applicable) to submit for the court's approval within a period not to exceed (30) thirty days after the hearing. Conditional release and discharge plans prepared in this situation are reviewed and approved according to the procedures specified in this section.

- M.** If the opinion of the team (or Forensic Review Committee, Clinical Director or RHA) is that the NGRI acquittee continues to meet the inpatient commitment criteria:

 - a. The team informs the patient of this decision and provides the patient with the written form (see Appendix A) describing his/her rights, including the independent right to request that the committing court hold a hearing regarding the issue of commitment.
 - b. The team provides assistance necessary to the patient to contact his or her attorney or judge so as to exercise this right.
 - c. The FDC ensures that a brief letter (see Appendix D) is sent to the committing court to inform the court of the review and the treatment team's opinion.
 - d. The FDC schedules a subsequent NGRI Comprehensive Review Meeting no later than twelve (12) months from the previous comprehensive review.

- N.** All NGRI Comprehensive Review Packets are filed in the clinical record at the conclusion of the review process. NGRI patients undergoing Comprehensive Reviews are informed of the final decision regarding their committability only after all levels of review have been completed and the hospital's decision is finalized. NGRI Comprehensive Review Packets are not routinely sent to the court or attorneys and are only furnished if specifically requested and with the same authorizations as apply to other parts of the clinical record (e.g. court order, request with signed authorization for release).

- O.** If, any time after the 30-day hearing, it is the opinion of the assigned forensic treatment team, Clinical Director, and Regional Hospital Administrator that the person no longer meets the criteria for inpatient civil commitment, the hospital may request a hearing on the issue of a patient's committability. If the court determines that the patient does meet the inpatient commitment criteria, the hospital may request subsequent hearings on this issue once every 12 months.

- P.** Each NGRI acquittee has an independent right to request a hearing on the issue of commitment status once every 12 months. If the patient requests a hearing, the treatment team reviews the patient's status with respect to committability and formulates an opinion. Prior to the hearing date set in response to the NGRI acquittee's request for

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release, the assigned forensic treatment team, if time permits, completes an NGRI Comprehensive Review Packet and hold a Comprehensive Review Meeting, or at a minimum, the forensic treatment team meets and clearly documents the opinion of the treatment team with respect to whether or not the NGRI acquittee meets the criteria for commitment. The same review procedures as outlined in Section L apply, expedited if necessary, to provide an approved hospital position by the scheduled court date.

- Q.** When an NGRI patient is placed on conditional release, he/she is not discharged from the hospital or from the hospital's computerized information management system. The FDC ensures that the patient's legal status code is modified to reflect placement on conditional release (266) and that the patient is placed on Conditional Release Leave status as of the date and time he/she leaves the hospital to begin conditional release.
- R.** The Conditional Release Monitor or a member of the assigned forensic treatment team has at least monthly contact with the respective community service providers for all NGRI acquittees on conditional release. These contacts may be in the form of written reports sent by the community service providers or they may be face-to-face or telephone contacts. The Conditional Release Monitor ensures that the community service providers are complying with the provisions in the plan regarding the reporting of any violations of the plan and immediately informs the Forensic Services Director of any known violations of conditional release plans. Contacts with community service providers and others are documented in the patient's medical record as are any meetings or consultations held among hospital staff for the purpose of reviewing a conditional releasee's progress or compliance with the plan.
- S.** The forensic treatment team reviews each conditionally released NGRI's progress on at least a quarterly basis with the Conditional Release Monitor.
- T.** Revisions or modifications to existing conditional release plans that will result in less intensive or less frequent supervision or treatment require, at a minimum, the review and approval of the Forensic Review Committee prior to implementation. These revisions to existing plans always require approval of the committing court before implementation. Neither of these requirements for review shall apply when transition to less restrictive settings or less intensive treatment is built-in to the original conditional release plan.
- U.** Approximately 30 to 60 days from the conclusion of an NGRI's authorized period of conditional release (or the date which is 12 months from the date the conditional release began, whichever is sooner), the forensic treatment team has a face-to-face meeting with the NGRI acquittee and discusses treatment progress and compliance with the conditional release plan and, considering all relevant information including historical and current risk factors and input from the client's community treatment providers, forms an opinion with regard to outpatient commitment criteria. This opinion is reviewed by the Forensic Review Committee and Clinical Director, at a minimum, and the hospital will send a written report to the court regarding compliance with conditions of the conditional release plan and an opinion regarding whether or not the patient continues to meet the outpatient commitment criteria. If the recommendation is that the patient continues to meet outpatient commitment criteria, the forensic treatment team

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will consult with the patient and community treatment providers and recommend appropriate modifications of the conditional release plan. This review is documented in the medical record.

- V. If an NGRI acquittee on conditional release is admitted to the hospital for a brief period of stabilization or medication adjustment and no significant violation of the conditional release plan occurred, the treatment team may determine when to place the patient back on conditional release without the need for additional review of this decision. If the NGRI acquittee is admitted to an adult mental health unit, the forensic treatment team is notified and participates in the determination of when the individual may be returned to conditional release leave.

- W. If an NGRI acquittee who is on conditional release violates a condition of the conditional release plan, the mandatory action listed in the plan is taken. If this requires a return from leave to inpatient status, the Director of Forensic Services or designee takes the following steps: contacts the community service provider to attempt to coordinate the consumer's voluntary return to the hospital; arranges with the Sheriff's Department for the consumer's return based on the court order which authorized conditional release; or, if appropriate, arranges for the consumer's return via emergency physician's certificate (1013). If these options are not feasible, successful or appropriate, the court is notified to request that a court order be issued to authorize law enforcement to return the patient to the hospital.

- X. If an acquittee commits a significant violation of a condition (including, but not limited to: elopement from a supervised setting, threats or harm to others, repeated substance use, repeated treatment or medication refusals) and must be returned to the hospital from conditional release leave as a result, the judge and attorneys involved in the case are informed, regardless of whether or not the plan mandates such notification.

- Y. If an NGRI acquittee on conditional release is returned to the hospital as a result of a violation of a condition of the release plan (as apposed to admission for stabilization or medication change), both the forensic treatment team and the Forensic Review Committee review the case and violation(s) at their next scheduled meetings, and the Clinical Director or designee and RHA will be notified within 72 hours. If the court does not revoke the conditional release, the patient may be placed back on the same conditional release plan upon the treatment team's recommendation and with the approval of the Forensic Review Committee.

APPENDICES

- A. Sample Advisement of Rights for Patients Admitted as Not Guilty by Reason of Insanity
- B. Sample forms for NGRI Comprehensive Review Packet
- C. Sample NGRI Report Format
- D. Sample Brief NGRI Letter (for use after annual NGRI Comprehensive Review Meetings when team's opinion is that individual continues to meet inpatient commitment criteria)

Policy 2.108, Appendix A

**(Hospital Name)
FORENSIC SERVICES**

**ADVISEMENT OF RIGHTS
FOR PATIENTS ADMITTED AS NOT
GUILTY BY REASON OF INSANITY
(NGRI)**

(Patient Identification)

A judge has found you not guilty by reason of insanity (NGRI) of a crime with which you were charged and ordered you committed to this state mental health facility for a period of evaluation and treatment. You have certain rights under the law as an NGRI patient. These rights are as follows:

1. You have the right to be notified if a hearing in your case will be held and you will be told the time and place of this hearing.
2. You have the right to an attorney and you or your representatives may apply immediately to the court to have an attorney appointed if you cannot afford to hire an attorney. The court will appoint an attorney for you unless you tell the court in writing that you do not want to be represented by an attorney.
3. You have the right to confront and cross-examine witnesses and offer evidence during court hearings in your case.
4. You have the right to subpoena witnesses and to require testimony before the court in person or by deposition from any person upon whose evaluation the decision of the court may rest.
5. You have the right to have an individualized service plan (as defined by law in Chapter 3 or Chapter 4 of Title 37 of the Georgia Code, whichever is applicable), that is established for you and specifically tailored to your needs.
6. You have the right to be examined by a physician or a licensed clinical psychologist of your choice and at your expense and to have that physician or psychologist submit a suggested service plan for you. This service plan must conform to the requirements in Chapter 3 or 4 of Title 37 of the Georgia Code, whichever is applicable.
7. You have the right to request have your treatment plan, treatment progress, and commitment status reviewed by the Forensic Review Committee once per year.

Date

Defendant's Signature

Witness

Policy 2.108, Appendix B

NGRI COMPREHENSIVE REVIEW

TREATMENT TEAM

_____ We have reviewed _____'s medical record, treatment plan, and the attached multidisciplinary Comprehensive Review documents and find that the patient is a mentally ill/retarded individual, requiring involuntary inpatient treatment or habilitation. The present location is the least restrictive alternative available. (Do not forward. File in medical record.)

_____ We have reviewed _____'s medical record, treatment plan, and the attached multidisciplinary Comprehensive Review documents and find that the patient does not meet the criteria for inpatient commitment, but does meet the criteria for outpatient commitment. A proposed conditional release plan is attached.

_____ We have reviewed _____'s medical record, treatment plan, and the attached multidisciplinary Comprehensive Review documents and find that the patient does not meet the criteria for inpatient or outpatient commitment.

_____ Other recommendations

Rationale:

Signature, Chairperson

Date

FORENSIC REVIEW COMMITTEE

_____ We have reviewed _____'s medical record, treatment plan, and the attached multidisciplinary Comprehensive Review documents and find that the patient is a mentally ill/retarded individual, requiring involuntary inpatient treatment or habilitation. The present location is the least restrictive alternative available. (Do not forward. File in medical record.)

_____ We have reviewed _____'s medical record, treatment plan, and the attached multidisciplinary Comprehensive Review documents and find that the patient does not meet the criteria for inpatient commitment, but does meet the criteria for outpatient commitment. A proposed conditional release plan is attached.

_____ We have reviewed _____'s medical record, treatment plan, and the attached multidisciplinary Comprehensive Review documents and find that the patient does not meet the criteria for inpatient or outpatient commitment.

_____ Other recommendations

Rationale:

Signature, Chairperson

Date

CLINICAL DIRECTOR

_____ I have reviewed _____'s treatment plan and the attached multidisciplinary Comprehensive Review documents and concur with the treatment team and Forensic Review Committee's opinion.

_____ I have reviewed _____'s treatment plan and the attached multidisciplinary Comprehensive Review documents and do not concur with the treatment team and Forensic Review Committee's opinion. (Do not forward. Return packet to treatment team). It is my opinion that the patient

_____ Does meet inpatient commitment criteria.

_____ Does not meet inpatient commitment criteria but does meet outpatient commitment criteria.

_____ Does not meet inpatient or outpatient commitment criteria.

_____ Other recommendations

Comments:

Signature, CMO

Date

DIVISION OF MHDDAD
OFFICE OF FORENSIC SERVICES

I/We have reviewed _____'s attached multidisciplinary Comprehensive Review documents, the opinions of the treatment team and Forensic Review Committee, and the proposed conditional release plan (if applicable). I/We have the following comments and/or recommendations:

Signature Title Date

Signature Title Date

HOSPITAL ADMINISTRATOR

_____ I have reviewed _____'s attached multidisciplinary Comprehensive Review documents, the opinions of the treatment team and Forensic Review Committee, and the proposed conditional release plan (if applicable) and concur with the opinion of the treatment team and Forensic Review Committee.

_____ I have reviewed _____'s attached multidisciplinary Comprehensive Review documents, the opinions of the treatment team and Forensic Review Committee, and the proposed conditional release plan (if applicable) and do not concur with the opinion of the treatment team and Forensic Review Committee. I have the following comments and recommendations:

Signature

Date

FORENSIC SERVICES
COMPREHENSIVE NGRI REVIEW
ACTIVITY THERAPY
TYPE OF REVIEW: NGRI Annual

(Patient Identification)

1. Summary of participation in activities (goals, methods, and patient's response to interventions:
2. Patient's assets as exhibited in activity therapy activities:
3. Areas that need further development; goals for future therapeutic activities:

Signature

Title

Date

FORENSIC SERVICES
COMPREHENSIVE NGRI REVIEW
BEHAVIOR SPECIALIST
TYPE OF REVIEW: NGRI 30-day

(Patient Identification)

1. Date of Admission:
2. Length of time on current privilege level:
3. Treatment Interventions/Modalities Used:
4. Compliance with Treatment Plan:
5. Negative Performance Factors (list by date of occurrence within each category, incidents of the following):
 - a. Physical assaults:
 - b. Significant verbal threats:
 - c. Sexual assaults/inappropriate sexual behavior:
 - d. Suicidal gestures, attempts or threats resulting in special observation:
 - e. Seclusion or restraint:
 - f. Destruction of property:
 - g. Escapes or attempts to escape:
 - h. Positive drug screen:
 - i. Behaviors resulting in loss of privilege:

Signature

Title

Date

FORENSIC SERVICES
COMPREHENSIVE NGRI REVIEW
REGISTERED NURSE
____ 30-day ____ Annual

(Patient Identification)

1. Medical Problems (Axis III, being treated or monitored):

2. Treatment Participation and -Compliance:

- a. Medication:

- b. Health Promotion/Teaching:

- c. Other Treatments:

3. Personal functioning:

- a. Staff-client rapport:

- b. Peer rapport:

- c. Recreational Skills:

- d. Coping Skills:

- e. Emotional Needs:

PATIENT NAME: _____

3. Allergies or Drug Reactions:

4. Special dietary requirements:

5. Physical limitations (i.e. activity restrictions due to physical problems, assistive devices needed, hearing aid, speech deficits):

6. Other nursing problems/issues:

Signature

Title

Date

FORENSIC SERVICES
COMPREHENSIVE NGRI REVIEW
PSYCHIATRIST
____ 30-day ____ Annual

(Patient Identification)

Based on a clinical evaluation of the patient, complete the following:

Diagnosis: **Axis I:** _____

Axis II: _____

Axis III: _____

Current Mental Status and Level of Functioning

(address cognitive, emotional and behavioral functioning)

Clinical Course

1. Describe the signs and symptoms of the patient's disorder. Include historical information which indicates how this client's disorder has been manifested in the past.

2. Describe the patient's response to treatment. Include both positive and negative responses to treatment.

3. List current medications and duration of current medication regimen.

Signature

Title

Date

FORENSIC SERVICES
COMPREHENSIVE NGRI REVIEW
SOCIAL SERVICE PROVIDER
 30-day Annual

(Patient Identification)

1. **Prior psychiatric treatment** (give dates, duration of and reason for past inpatient and outpatient treatment):

<u>Place</u>	<u>Dates</u>	<u>Diagnosis</u>	<u>Medications</u>
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Outpatient:

Inpatient:

2. **Records available for review:** Yes No

3. **If not available, what action has been taken to obtain them and give latest progress:**

4. **History of Drug/Alcohol abuse or dependence:** Yes No

If **Yes**, describe substances used, duration, frequency, quantity, and whether ever has had drug/alcohol treatment:

PATIENT NAME: _____

4. **Positive Features/Assets** (ex: supportive family, insight, good premorbid history, cooperative behavior, compliance with treatment, etc.):

5. **Vocational Skills and Needs** (describe participation in vocational programs or reason for lack of participation):

6. **Discharge Plan** (if release is not being considered, at least address anticipated living arrangement and after-care for future discharge. If release is anticipated, briefly summarize the services likely or recommended to be a part of the conditional release plan, or a draft of the conditional release plan may be attached):

Signature

Title

Date

FORENSIC SERVICES
COMPREHENSIVE NGRI REVIEW
PSYCHOLOGIST
____30-day ____Annual

(Patient Identification)

1. Factors to Consider in Patient's Risk to Self or Others:

a. Assets:

b. Limitations:

2. Circumstances Needed to Minimize Risk:

3. Psychological Testing Results (intellectual, personality, other--if indicated):

Signature

Title

Date

Policy 2.108, Appendix C: Sample NGRI Report format

(Date)

Honorable (Judge's name)
Judge of the <State/Superior> Court
(Judge's address)

RE: NGRI 30-day Evaluation
(Patient's name)
(County Name), Georgia
Indictment No(s): (Numbers)
Charge(s): (List of charges)

Judge #:

Mr./Ms (Patient's name) was found Not Guilty by Reason of Insanity per your Superior Court order dated (Date). He was admitted to (Georgia Regional Hospital) on (Date) and has been treated in accordance with O.C.G.A. 17-7-131 since that time. The purpose of this letter is to provide you with an update of his current clinical condition and status with respect to the issue of whether or not he/she meets commitment criteria as specified in Chapter 3 or 4 of Title 37 of the Official Code of Georgia.

SOURCES OF INFORMATION:

[List of all sources of information used in the evaluation, including your review of hospital chart and medical records. Include the interview with the patient, providing the duration of the interview]

NOTIFICATION OF RIGHTS:

At the time of his/her admission, Mr./Ms (Name) was educated about his/her legal status and was advised of his/her rights as a patient who has been found Not Guilty by Reason of Insanity (NGRI). (S)He also signed the form indicating notification and understanding of these rights. (S)He was informed that reports regarding his evaluation and treatment during this admission would be sent to his/her judge, district attorney and defense counsel. (Patient) indicated that he/she understood this explanation and has been cooperative with all evaluation and treatment during his hospitalization.

RELEVANT BACKGROUND INFORMATION:

[Include information here that is relevant to the legal questions asked. It is advisable to give information related to social, educational, vocational, legal, medical, psychiatric and substance abuse history.

In an NGRI report, the pretrial (and IST, if applicable) evaluation report(s) may be referenced for details of the background history, but this report should include any new, relevant information discovered during the hospitalization.

COURSE OF HOSPITALIZATION

(Provide an overview of the patient's hospitalization, describing his/her clinical condition upon admission, diagnosis, treatment (pharmacological and groups/individual sessions), response to treatment, and any significant events during hospitalization.

MENTAL STATUS EXAM AND BEHAVIOR OBSERVATIONS:

[Description of your mental status examination and the examinee's behavior during the interview]

STATUS WITH RESPECT TO COMMITMENT:

Provide an opinion about whether or not the patient meets the commitment criteria and refer to the data that support your position. (If the opinion is that the patient does not meet inpatient commitment criteria, ensure that all required reviews of this opinion has been completed through necessary committees/individuals at the facility.) If the patient does not meet inpatient commitment criteria, provide an opinion about whether or not the patient meets outpatient commitment criteria. If you are proposing that the patient be placed on conditional release, provide an outline of the type and intensity of treatment and supervision the patient will require in the community. If you have developed a conditional release plan and it has been approved through the necessary committees/individuals at the hospital, you may provide this to the court at the time of this report. If not, provide the court with an update of the progress of its development and when you expect to be able to provide the specifics of the plan to the court.

CLINICAL SUMMARY AND RECOMMENDATIONS:

Summary of opinion regarding inpatient/outpatient commitment.

Request hearing on commitment issue.

(Examiner's name)
(Title)

CC: (Name), Defense counsel
(Name) Office of the District Attorney
Forensic File

Policy 2.108, Appendix D: Sample NGRI Brief Letter format

(Date)

Honorable (Judge's name)
Judge of the <State/Superior> Court
(Judge's address)

RE: Annual NGRI Evaluation
(Patient's name)
(County Name), Georgia
Indictment No(s): (Numbers)
Charge(s): (List of charges)

Judge #:

Mr./Ms (Patient's name) was found Not Guilty by Reason of Insanity per your Superior Court order dated (Date). He was admitted to (Georgia Regional Hospital) on (Date) and has been treated in accordance with O.C.G.A. 17-7-131 since that time. The purpose of this letter is to notify you that his/her commitment status has recently been reviewed by his/her treatment team.

Mr./Ms. (Name)'s treatment team conducted an annual review of his/her treatment progress and clinical status on (Date) and it is the opinion of the treatment team that he/she continues to meet the criteria for inpatient commitment as defined in Chapter 3 (or 4) of Title 37 of the Official Code of Georgia. Accordingly, we do not request a hearing before the court at this time. Mr./Ms. (Name) has been advised of his/her independent right to request a hearing with the court regarding his her commitment.

(Name)
(Director of Forensic Services)

CC: (Name), Defense counsel
(Name) Office of the District Attorney
Forensic File