ESSENTIAL INFORMATION
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Short-Term Emergency Commitment Laws
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SUMMARY
This map focuses on the state laws and regulations that govern the procedures used to place a person into short-term emergency commitment. The map catalogs when the state may place a person in a short-term emergency commitment, who can initiate this process, and what hospitals must provide for those held in a short-term emergency commitment.

ABOUT SHORT-TERM EMERGENCY COMMITMENT LAWS & THE DATA
Short-term emergency commitment laws authorize authorities to hospitalize individuals who are displaying dangerous symptoms of mental illness in a health care facility for evaluation and treatment for a predetermined amount of time—typically up to 72 hours—without their consent or a court order. In general, the assessment of one or two physicians or mental health professionals (qualifications required vary across jurisdictions) is required to initiate the process. If the person to be committed is not already in the facility, the laws authorize police officers to detain and transport the person to an appropriate facility. Short-term emergency commitment gives mental health care providers a chance to assess the patient and control the crisis. Once the short-term emergency commitment ends, the patient may consent to further voluntary treatment or end treatment entirely. If medical professionals determine that the patient continues to pose a danger to self or others, is mentally incompetent, or (in some states) is unable to meet their basic needs, they may petition a court for a hearing on longer-term involuntary civil commitment in a judicial proceeding where the patient is afforded due process with the opportunity to be represented by a lawyer.

Every state and the District of Columbia has emergency commitment laws, but they vary in terms of how and when a person may be committed without their consent, and the rights that person is entitled to during and after their commitment. All but Georgia have short-term emergency commitment laws that comply with the U.S. Supreme Court decision in O'Connor v. Donaldson. The Supreme Court held that a person may not be involuntarily committed if they are non-dangerous and capable of surviving safely independently or with assistance in the community. In Georgia, the law's language allows commitment more broadly when a person has a mental illness and is in need of treatment. In 45 states, the law requires that a person may be held for emergency commitment if they are found to be a danger to themselves or others because of mental illness. Five states allow short-term emergency commitment when people are a danger to themselves or others without requiring an initial judgment as to whether or not they have a mental illness. Eighteen states also allow the hospitalization of people who are unable to meet their basic needs.

There is also considerable variation in how states authorize emergency short-term commitment. In order to provide oversight and due process, 23 states have some form of judicial review of
the short-term emergency commitment process. Of these 23 states, nine require a judge to certify the commitment before a person is placed in a psychiatric facility. This variation reflects differing views on the balance required for providing care to those in crisis while still protecting individual liberties.

Many states include special rights for patients in their short-term emergency commitment laws. These rights vary from state to state, but include the right to written notification of the reason for commitment, the right to make phone calls, the right to privacy, the right to an attorney, the right to refuse treatment, and the right to have an assessment conducted by a qualified practitioner within a reasonable amount of time.

Federal law makes it illegal to sell a firearm or ammunition to any person who has been adjudicated as a mental ill or has been committed to any mental institution. Whether short-term emergency commitment triggers the loss of firearm rights is subject to differing interpretations; under federal law, commitment confers restriction from purchasing or possessing firearms if there is an adjudicatory process or a determination by a judicial authority that the patient poses a danger or is incompetent to manage his or her own affairs. However, some states impose their own restrictions on firearms, at least on a temporary basis, at the lower threshold of a physician-initiated or ex parte short-term emergency hospitalization. Since civil commitment criteria are determined by states (within constitutional limits), the conditions of gun restrictions associated with commitment in both federal and state laws vary considerably from state to state. This dataset provides insight into the action taken by states to prevent people with mental illnesses from having access to firearms. As of 2016, only 22 states restrict the firearm rights of someone who was hospitalized under short-term emergency commitment.

**NAVIGATING THE DATA**

There are two ways to navigate the data by clicking the **Filter** tab or the **Explore** tab — for each option, the data can be visualized in a map and table format or in jurisdiction profiles.

**Filter**

The dataset homepage will default to the Filter tab. Here, users may answer a series of questions to learn more about the characteristics of the laws. Answering more than one question will show all the jurisdictions that meet the combined criteria. Criteria selected will be listed above the questions, and can be removed by clicking the white X or by clicking “Reset” above the questions.

**Explore**

Users can access Explore by clicking the Explore tab in the bar above the questions. Using Explore, users will see the answers to one question across all jurisdictions.

The primary questions in this dataset are:

1. Is there a state law regulating the emergency commitment of an individual?
2. Under which circumstances can an individual be held for emergency commitment?
3. What is the duration of an emergency commitment?
4. Who can initiate emergency commitment?
5. Is judicial review of the emergency commitment required?
6. Can the emergency commitment be extended without a court order?
7. What must be provided to a patient who has been committed?
8. Must the hospital provide the patient transportation when he/she is discharged?
9. Does short-term commitment limit an individual’s right to possess a firearm?

DISPLAYING THE RESULTS

There are two display modes once criteria have been selected by using either the Filter or Explore tab — **Map** display mode and **Profiles** display mode.

**Map Display**
LawAtlas.org dataset homepages default to the map display mode. When querying the data using the Filter tab, all jurisdictions that meet the criteria selected will display in one tone of yellow. Those jurisdictions that do not meet the criteria selected will be colored gray. When querying the data using the Explore tab, the map will illuminate with colors from yellow to red that are associated with the various answer choices (the color-coding is defined by the key to the left of the map).

Below the map, a table will appear. Using the Filter or Explore tab to navigate the questions will change the display:

- Using the Filter tab, you can select an unlimited number of criteria and the applicable jurisdictions that meet the combined criteria will be displayed in the table below.
- Using the Explore tab, you can isolate a single criterion and the applicable jurisdictions will appear in the table below.

**Profiles Display**
The Profiles display presents the results of the criteria selected in a text-based format for each applicable jurisdiction. Using the Filter tab, jurisdictions that meet the criteria selected will display. Using the Explore tab, jurisdictions that meet the criterion selected will display. If no criteria are selected, the full profiles for each state will appear under both Filter and Explore.

**Profile Legend**
Within each Profile box, above the questions and answers, there are additional options and information useful in exploring the law:

| ☮️ | **Toggle Legal Text** – Selecting this option will show all the legal text used to answer questions for this jurisdiction. |
| ☮️ | **Toggle Full Place Profile** – Selecting this option will show all questions and answers for this jurisdiction, regardless of what was selected using the Filter or Explore tabs. |
| ☮️ | **Toggle Size** – Selecting this option will make the profile larger, but will not change the information displayed. |
Legal Text History – This interactive timeline displays when changes in the law have occurred within a jurisdiction. Using the arrows to the left or right, users may explore how the law has changed over time as new amendments to the law have been enacted. The timeline will change from gray to a shade of yellow when the jurisdiction passed its first relevant law. Each change in the law after that is marked by a break in the timeline.

Map and Profile Legend
There are a few symbols to be aware of in both Map and Profiles display modes:

- § Section Symbol – Clicking this symbol will open a window that displays excerpts from the law that correspond to the question and answer.
- ⚠️ Caution Note – Clicking on this symbol will open a small window that displays text that describes important caveats about the question and answer.

DATASET RESOURCES
Each dataset homepage includes the following resources available for download:

- Data: The Data file exports in CSV format and may contain two tabs. The “Statistical Data” tab contains the legal variables coded in the dataset, displayed as values defined in the accompanying Codebook. The “Summary Data” tab contains the legal variables coded in the dataset in text form, as well as the accompanying citations and any caution notes that may be included. Note: if there is only one tab available for download it will be the “Statistical Data” as described above.

- Codebook: The Codebook defines all of the coded variables in the dataset. The Codebook lists the question, question type, variable name, variable value and variable label. The Codebook should be used in conjunction with the Statistical Data extract.

- Research Protocol: The Research Protocol is a comprehensive document that outlines the entire methodology of the project, including the scope, inclusion and exclusion criteria, data collection methods, definitions, coding scheme decisions, as well as the quality control process.

- Summary Report: The Summary Report provides a snapshot of important findings from the dataset.
ADDITIONAL INFORMATION

For more public health law research on how governments deliver treatment to non-consenting individuals, please see Police Interventions with Persons Affected by Mental Illnesses, by Jennifer Wood, PhD, Jeffrey Swanson, PhD, Scott Burris, JD, and Allison Gilbert, PhD, MPH. For more information about mental illness and firearms, please see the scholarship of Jeffrey Swanson, PhD on Firearms Laws, Mental Disorders, and Violence.

This collection of laws does not provide legal advice nor does it address enforcement of laws, administrative policies, case law, or any other sources of law. Should you have a specific question about these laws in your state, please contact an attorney in your jurisdiction.