

Assisted Outpatient Treatment (AOT) in Utah

Definition and purpose

The Assisted Outpatient Treatment (AOT) program endorsed by the federal Substance Abuse Mental Health Services Administration (SAMHSA) is an involuntary outpatient mental health treatment for individual's 18 years of age or older. The purpose of the AOT program is to provide evidence-based mental health care in the least restrictive environment for adult individuals with serious mental illness who are experiencing psychosis and have difficulty complying with treatment.

AOT not only ensures individuals access to needed mental health care, it also uses the support of the courts to influence the individual's behavior in a positive direction also known as the "Black Robe Effect." The AOT commissioner or judge work with individuals to set and reach milestones necessary for their recovery.

Jurisdiction

The county mental health authorities where individuals with serious mental illness reside are responsible to provide or coordinate AOT either at their facility or by contract with another provider. AOT program services are currently being offered in Davis, Morgan and Weber counties. It is anticipated that AOT program services will start expand to other Utah counties toward the end of 2019.

AOT application process

Any responsible person with credible knowledge of an individual's mental illness and the condition or circumstances requiring AOT may file a written application in the county district court where the adult individual with the mental illness resides. For application information, see (will be DSAMH DE form link).

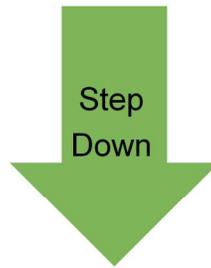
Utah has two pathways into AOT:

After a written application for AOT is filed with the court, a licensed professional will meet with the individual to determine which type of involuntary AOT status the individual meets.

The two pathways into AOT are:

1. Current SAMHSA AOT Program
2. New Court-ordered AOT (S.B. 39)

Current SAMHSA AOT Program



Helps the individual to **Step Down** from inpatient care or incarceration to the AOT Program

New Court-ordered AOT (S.B. 39)



Helps the individual to **Step Up** into court-ordered AOT



Helps the individual in the AOT Program to **Step Down** from civil commitment to court-ordered AOT

Current SAMHSA AOT Program (Weber, Morgan, Davis Counties)

Some individuals with serious mental illness require longer-term treatment and more support on the path to recovery. The AOT Program lasts a maximum of six months with the possibility of a six-month extension upon review. It provides comprehensive services, which include:

- Mental health treatment
- Substance use treatment
- Peer support
- Wrap around case-management services
- Enrollment into mainstream benefits (Medicaid, Medicare, SSI/SSDI, Food stamps, etc.)
- Assistance locating and maintaining housing.

An individual must meet the criteria below for civil commitment into the AOT Program:

- A. the proposed patient has a mental illness;
- B. because of the proposed patient's mental illness, he/she poses a substantial danger of physical injury to himself/herself, which may include the inability to provide the basic necessities of life such as food, clothing, and shelter, if allowed to remain at liberty;
- C. the patient lacks the ability to engage in a rational decision-making process regarding the acceptance of mental treatment as demonstrated by evidence of inability to weigh the possible risks of accepting or rejecting treatment;
- D. there is no appropriate less-restrictive alternative to a court order of commitment; and
- E. the local mental health authority can provide the individual with treatment that is adequate and appropriate to his conditions and needs.

New Court-ordered AOT (S.B. 39)

Some individuals with serious mental illness will start to deteriorate and will face further deterioration unless intercession is made on their behalf. Court-ordered AOT helps to prevent further relapse or deterioration by facilitating earlier intervention and hopefully, a path to a faster recovery.

Court-ordered AOT may not exceed 6 months without a review hearing and may be extended for 6 months. Court-ordered AOT services include:

- Case-management services
- Individualized-treatment plan developed in collaboration with the patient, when possible
- Other treatment and recovery services as described on the treatment plan.

An individual must meet the criteria below for court-ordered AOT:

- A. the proposed patient has a mental illness;
- B. there is no less restrictive alternative to a court order for assisted outpatient treatment; and
- C. (i) the proposed patient lacks the ability to engage in a rational decision-making process regarding the acceptance of mental treatment as demonstrated by evidence of inability to weigh the possible risks of accepting or rejecting treatment; or
(ii) the proposed patient needs assisted outpatient treatment in order to prevent relapse or deterioration that is likely to result in the proposed patient posing a substantial danger to self or others.

Associated Legalities

1. S.B. 38 (62A-15-626) law states that “a local mental health authority’s inability to locate a committed individual may not be the basis for the individual’s release, unless the court orders the release of the individual after a hearing.”
2. S.B. 38 (62A-15-632) law states that “except for good cause, a court may not terminate a civil commitment through a review hearing if the patient: (a) is under a conditional release agreement; and (b) does not appear at the review hearing.”
3. S.B. 38 (62A-15-618) law states that “a designated examiner may request a court order to obtain a proposed patient’s mental health record if a proposed patient refuses to share this information with the designated examiner.”
4. S.B. 39 (62A-15-630.5) law states that “if the proposed patient refuses to submit to an interview . . . or an examination . . . the court may issue an order, directed to a mental health officer or peace officer, to immediately place the proposed patient into the custody of a local mental health authority or in a temporary emergency facility . . . to be detained for the purpose of the examination.”
5. S.B. 39 (62A-15-631) law states that the applicant, “local mental health authority or its designee, or the physician in charge of the proposed patient’s care shall, at the time of the hearing provide the court with the following information (H) whether the proposed patient has previously been civilly committed or under an order for assisted outpatient treatment.”
6. S.B. 39 (31A-22-650) law states that “A health insurance provider may not deny an insured the benefits of the insured’s policy solely because the health care that the insured receives is provided under a court order for assisted outpatient treatment.”
7. S.B. 39 (62A-15-63.4) law states that “A court order for assisted outpatient treatment does not create independent authority to forcibly medicate a patient.

Helpful links

S.B. 38 <https://le.utah.gov/~2019/bills/static/SB0038.html>

S.B. 39 <https://le.utah.gov/~2019/bills/static/SB0039.html>

Treatment Advocacy Center

<https://www.treatmentadvocacycenter.org>

AOT Designated Examiner Information

<https://dsamh.utah.gov/education/certification/designated-examiner>