

229.13 Evaluation order — treatment — unauthorized departure or failure to appear.

1. If upon completion of the hospitalization hearing the court finds by clear and convincing evidence that the respondent has a serious mental impairment, the court shall order the respondent committed as expeditiously as possible for a complete psychiatric evaluation and appropriate treatment as follows:

a. The court shall order a respondent whose expenses are payable in whole or in part by a mental health and disability services region placed under the care of an appropriate hospital or facility designated through the regional administrator for the county on an inpatient or outpatient basis.

b. The court shall order any other respondent placed under the care of an appropriate hospital or facility licensed to care for persons with mental illness or substance abuse on an inpatient or outpatient basis.

c. If the court orders evaluation and treatment of the respondent on an inpatient basis under [this section](#), the court may order the respondent placed under the care of an appropriate subacute care facility licensed under [chapter 135G](#).

2. The court shall provide notice to the respondent and the respondent's attorney of the placement order under [subsection 1](#). The court shall advise the respondent and the respondent's attorney that the respondent has a right to request a placement hearing held in accordance with the requirements of [section 229.14A](#).

3. If the respondent is ordered at a hearing to undergo outpatient treatment, the outpatient treatment provider must be notified and agree to provide the treatment prior to placement of the respondent under the treatment provider's care.

4. The court shall furnish to the chief medical officer of the hospital or facility at the time the respondent arrives at the hospital or facility for inpatient or outpatient treatment a written finding of fact setting forth the evidence on which the finding is based. If the respondent is ordered to undergo outpatient treatment, the order shall also require the respondent to cooperate with the treatment provider and comply with the course of treatment.

5. The chief medical officer of the hospital or facility at which the respondent is placed shall report to the court no more than fifteen days after the respondent is placed, making a recommendation for disposition of the matter. An extension of time may be granted, not to exceed seven days upon a showing of cause. A copy of the report shall be sent to the respondent's attorney, who may contest the need for an extension of time if one is requested. An extension of time shall be granted upon request unless the request is contested, in which case the court shall make such inquiry as it deems appropriate and may either order the respondent's release from the hospital or facility or grant an extension of time for psychiatric evaluation. If the chief medical officer fails to report to the court within fifteen days after the individual is placed under the care of the hospital or facility, and an extension of time has not been requested, the chief medical officer is guilty of contempt and shall be punished under [chapter 665](#). The court shall order a rehearing on the application to determine whether the respondent should continue to be detained at or placed under the care of the hospital or facility.

6. If, after placement of a respondent in or under the care of a hospital or other suitable facility for inpatient treatment, the respondent departs from the hospital or facility or fails to appear for treatment as ordered without prior proper authorization from the chief medical officer, upon receipt of notification of the respondent's departure or failure to appear by the chief medical officer, a peace officer of the state shall without further order of the court exercise all due diligence to take the respondent into protective custody and return the respondent to the hospital or facility.

7. a. If the respondent is ordered to undergo outpatient treatment and the respondent's failure to comply with the course of treatment results in behavior by the respondent which, in the opinion of the respondent's mental health professional acting within the scope of the mental health professional's practice, is likely to result in physical injury to the respondent's self or others if allowed to continue, all of the following shall occur:

(1) The respondent's mental health professional acting within the scope of the mental health professional's practice shall notify the committing court, with preference given to the committing judge, if available, in the appropriate county and the court shall enter a written

order directing that the respondent be taken into immediate custody by the appropriate sheriff or sheriff's deputy. The appropriate sheriff or sheriff's deputy shall exercise all due diligence in taking the respondent into protective custody to a hospital or other suitable facility.

(2) Once in protective custody, the respondent shall be given the choice of being treated by the appropriate medication which may include the use of oral medicine or injectable antipsychotic medicine by a mental health professional acting within the scope of the mental health professional's practice at an outpatient psychiatric clinic, hospital, or other suitable facility or being placed for treatment under the care of a hospital or other suitable facility for inpatient treatment.

(3) If the respondent chooses to be treated by the appropriate medication which may include the use of oral medicine or injectable antipsychotic medicine but the mental health professional acting within the scope of the mental health professional's practice at the outpatient psychiatric clinic, hospital, or other suitable facility determines that the respondent's behavior continues to be likely to result in physical injury to the respondent's self or others if allowed to continue, the mental health professional acting within the scope of the mental health professional's practice shall comply with the provisions of subparagraph (1) and, following notice and hearing held in accordance with the procedures in [section 229.12](#), the court may order the respondent treated on an inpatient basis requiring full-time custody, care, and treatment in a hospital until such time as the chief medical officer reports that the respondent does not require further treatment for serious mental impairment or has indicated the respondent is willing to submit to treatment on another basis as ordered by the court.

b. A region shall contract with mental health professionals to provide the appropriate treatment including treatment by the use of injectable antipsychotic medicine pursuant to [this section](#).

[R60, §1479; C73, §1401; C97, §2266; C24, 27, 31, 35, 39, §3552, 3553; C46, 50, 54, 58, 62, 66, 71, 73, 75, §229.9, 229.10; C77, 79, 81, §229.13]

90 Acts, ch 1020, §3; 91 Acts, ch 108, §5; 92 Acts, ch 1165, §3; 96 Acts, ch 1183, §21; 2001 Acts, ch 155, §30; 2004 Acts, ch 1090, §33; 2013 Acts, ch 90, §52; 2015 Acts, ch 61, §2; 2015 Acts, ch 69, §64; 2015 Acts, ch 138, §34, 161, 162; 2016 Acts, ch 1073, §78; 2016 Acts, ch 1094, §1; 2016 Acts, ch 1138, §23; 2018 Acts, ch 1056, §11

Referred to in §218.92, 222.7, 225.11, 225.15, 225.17, 226.9, 226.31, 227.10, 227.15, 229.14, 229.14A, 229.14B, 229.17, 229.18, 229.19, 229.21, 229.22, 229.23, 229.24, 229.26, 229.27, 229.38, 229.44, 229.45, 230.5

Subsection 7, paragraph a, subparagraphs (2) and (3) amended