

House File 312 - Introduced

HOUSE FILE 312

BY COMMITTEE ON HEALTH AND HUMAN
SERVICES

(SUCCESSOR TO HF 123)

A BILL FOR

1 An Act relating to orders for treatment of persons experiencing
2 psychiatric deterioration.

3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

unofficial

1 Section 1. Section 125.75, subsection 2, paragraph a, Code
2 2025, is amended to read as follows:

3 a. State the applicant's belief that the respondent is a
4 person who is experiencing psychiatric deterioration as defined
5 in section 229.1, or who presents a danger to self or others and
6 lacks judgmental capacity due to ~~either~~ any of the following:

7 (1) A substance use disorder ~~as defined in section 125.2.~~

8 (2) A serious mental impairment as defined in section 229.1.

9 Sec. 2. Section 218.46, subsection 2, Code 2025, is amended
10 to read as follows:

11 2. The department may provide services and facilities for the
12 scientific observation, rechecking, and treatment of persons with
13 mental illness within the state. Application by, or on behalf
14 of, any person for such services and facilities shall be made
15 to the director on forms furnished by the department. The time
16 and place of admission of any person to outpatient or clinical
17 services and facilities for scientific observation, rechecking,
18 and treatment and the use of such services and facilities for
19 the benefit of persons who have already been hospitalized for
20 psychiatric evaluation and appropriate treatment or involuntarily
21 hospitalized ~~as seriously mentally ill~~ shall be in accordance
22 with rules and regulations adopted by the department.

23 Sec. 3. Section 225.11, Code 2025, is amended to read as
24 follows:

25 **225.11 Initiating commitment procedures.**

26 When a court finds upon completion of a hearing held pursuant
27 to section 229.12 that the contention that a respondent is
28 seriously mentally impaired, or is experiencing psychiatric
29 deterioration, has been sustained by clear and convincing
30 evidence, and the application filed under section 229.6 also
31 contends or the court otherwise concludes that it would be
32 appropriate to refer the respondent to the state psychiatric
33 hospital for a complete psychiatric evaluation and appropriate
34 treatment pursuant to section 229.13, the judge may order that
35 a financial investigation be made in the manner prescribed by

1 section 225.13. If the costs of a respondent's evaluation or
2 treatment are payable in whole or in part by a county, an
3 order under this section shall be for referral of the respondent
4 through the regional administrator for the respondent's county
5 of residence for an evaluation and referral of the respondent to
6 an appropriate placement or service, which may include the state
7 psychiatric hospital for additional evaluation or treatment.

8 Sec. 4. Section 229.1, Code 2025, is amended by adding the
9 following new subsection:

10 NEW SUBSECTION. 16A. "*Psychiatric deterioration*" means a
11 deterioration of a person's mental health described by all of the
12 following:

13 a. The deterioration makes the person unable to understand
14 the need to treat the person's mental health condition.

15 b. Based on the person's history the person is unlikely to
16 seek treatment for the deterioration.

17 c. Within a reasonable degree of medical certainty, unless
18 the person receives treatment, the deterioration is likely to
19 continue until the person has a serious mental impairment.

20 Sec. 5. Section 229.4, subsection 3, Code 2025, is amended to
21 read as follows:

22 3. If the chief medical officer of the hospital, not later
23 than the end of the next ~~secular~~ business day on which the
24 office of the clerk of the district court for the county
25 in which the hospital is located is open and which follows
26 the submission of the written request for release of the
27 patient, files with that clerk a certification that in the
28 chief medical officer's opinion the patient is seriously mentally
29 impaired, or experiencing psychiatric deterioration, the release
30 may be postponed for the period of time the court determines
31 is necessary to permit commencement of judicial procedure for
32 involuntary hospitalization. That period of time may not exceed
33 five days, exclusive of days on which the clerk's office is
34 not open unless the period of time is extended by order of a
35 district court judge for good cause shown. Until disposition of

1 the application for involuntary hospitalization of the patient is
2 determined, if an application is timely filed, the chief medical
3 officer may detain the patient in the hospital and may provide
4 treatment which is necessary to preserve the patient's life, or
5 to appropriately control behavior by the patient which is likely
6 to result in physical injury to the patient or to others if
7 allowed to continue, but may not otherwise provide treatment to
8 the patient without the patient's consent.

9 Sec. 6. Section 229.5, Code 2025, is amended to read as
10 follows:

11 **229.5 Departure without notice.**

12 If a voluntary patient departs from the hospital without
13 notice, and in the opinion of the chief medical officer
14 the patient is seriously mentally impaired, or experiencing
15 psychiatric deterioration, the chief medical officer may file an
16 application on the departed voluntary patient pursuant to section
17 229.6, and request that an order for immediate custody be entered
18 by the court pursuant to section 229.11.

19 Sec. 7. Section 229.6, subsection 2, paragraph a, Code 2025,
20 is amended to read as follows:

21 a. State the applicant's belief that the respondent is a
22 person who is experiencing psychiatric deterioration, or who
23 presents a danger to self or others and lacks judgmental capacity
24 due to either any of the following:

25 (1) A substance use disorder as defined in section 125.2.

26 (2) A serious mental impairment ~~as defined in section 229.1.~~

27 Sec. 8. Section 229.10, subsections 3 and 4, Code 2025, are
28 amended to read as follows:

29 3. If the report of one or more of the court-designated
30 physicians or mental health professionals is to the effect that
31 the individual is not seriously mentally impaired and is not
32 experiencing psychiatric deterioration, the court shall without
33 taking further action terminate the proceeding and dismiss the
34 application on its own motion and without notice.

35 4. If the report of one or more of the court-designated

1 physicians or mental health professionals is to the effect that
2 the respondent is seriously mentally impaired, or is experiencing
3 psychiatric deterioration, the court shall schedule a hearing
4 on the application as soon as possible. The hearing shall be
5 held not more than forty-eight hours after the report is filed,
6 excluding Saturdays, Sundays and holidays, unless an extension
7 for good cause is requested by the respondent, or as soon
8 thereafter as possible if the court considers that sufficient
9 grounds exist for delaying the hearing.

10 Sec. 9. Section 229.11, subsection 1, unnumbered paragraph 1,
11 Code 2025, is amended to read as follows:

12 If the applicant requests that the respondent be taken into
13 immediate custody and the judge, upon reviewing the application
14 and accompanying documentation, finds probable cause to believe
15 that the respondent has a serious mental impairment and is
16 likely to injure the respondent or other persons if allowed to
17 remain at liberty, or the respondent is experiencing psychiatric
18 deterioration, the judge may enter a written order directing that
19 the respondent be taken into immediate custody by the sheriff or
20 the sheriff's deputy and be detained until the hospitalization
21 hearing. The hospitalization hearing shall be held no more than
22 five days after the date of the order, except that if the fifth
23 day after the date of the order is a Saturday, Sunday, or a
24 holiday, the hearing may be held on the next succeeding business
25 day. If the expenses of a respondent are payable in whole or
26 in part by a mental health and disability services region, for
27 a placement in accordance with paragraph "a", the judge shall
28 give notice of the placement to the regional administrator for
29 the county in which the court is located, and for a placement
30 in accordance with paragraph "b" or "c", the judge shall order
31 the placement in a hospital or facility designated through the
32 regional administrator. The judge may order the respondent
33 detained for the period of time until the hearing is held, and
34 no longer, in accordance with paragraph "a", if possible, and if
35 not then in accordance with paragraph "b", or, only if neither

1 of these alternatives is available, in accordance with paragraph
2 "c". Detention may be in any of the following:

3 Sec. 10. Section 229.12, subsection 3, paragraph c, Code
4 2025, is amended to read as follows:

5 c. If upon completion of the hearing the court finds that the
6 contention that the respondent is seriously mentally impaired, or
7 is experiencing psychiatric deterioration, has not been sustained
8 by clear and convincing evidence, it shall deny the application
9 and terminate the proceeding.

10 Sec. 11. Section 229.13, subsection 1, unnumbered paragraph
11 1, Code 2025, is amended to read as follows:

12 If upon completion of the hospitalization hearing the court
13 finds by clear and convincing evidence that the respondent has
14 a serious mental impairment, or is experiencing psychiatric
15 deterioration, the court shall order the respondent committed as
16 expeditiously as possible for a complete psychiatric evaluation
17 and appropriate treatment as follows:

18 Sec. 12. Section 229.13, subsection 7, paragraph a,
19 subparagraph (3), Code 2025, is amended to read as follows:

20 (3) If the respondent chooses to be treated by the
21 appropriate medication which may include the use of oral
22 medicine or injectable antipsychotic medicine but the mental
23 health professional acting within the scope of the mental
24 health professional's practice at the outpatient psychiatric
25 clinic, hospital, or other suitable facility determines that
26 the respondent's behavior continues to be likely to result in
27 physical injury to the respondent's self or others if allowed
28 to continue, the mental health professional acting within the
29 scope of the mental health professional's practice shall comply
30 with the provisions of subparagraph (1) and, following notice and
31 hearing held in accordance with the procedures in section 229.12,
32 the court may order the respondent treated on an inpatient basis
33 requiring full-time custody, care, and treatment in a hospital
34 until such time as the chief medical officer reports that the
35 respondent does not require further treatment for serious mental

1 impairment or psychiatric deterioration, or has indicated the
2 respondent is willing to submit to treatment on another basis as
3 ordered by the court.

4 Sec. 13. Section 229.14, subsection 1, paragraphs a, b, c,
5 and d, Code 2025, are amended to read as follows:

6 a. That the respondent does not, as of the date of the
7 report, require further treatment for serious mental impairment
8 or psychiatric deterioration. If the report so states, the court
9 shall order the respondent's immediate release from involuntary
10 hospitalization and terminate the proceedings.

11 b. That the respondent is seriously mentally impaired and or
12 experiencing psychiatric deterioration, is in need of full-time
13 custody, care, and inpatient treatment in a hospital, and is
14 considered likely to benefit from treatment. The report shall
15 include the chief medical officer's recommendation for further
16 treatment.

17 c. That the respondent is seriously mentally impaired or
18 experiencing psychiatric deterioration, and is in need of
19 treatment, but does not require full-time hospitalization.
20 If the report so states, it shall include the chief medical
21 officer's recommendation for treatment of the respondent on an
22 outpatient or other appropriate basis.

23 d. The respondent is seriously mentally impaired or
24 experiencing psychiatric deterioration, and is in need of
25 full-time custody and care, but is unlikely to benefit from
26 further inpatient treatment in a hospital. The report shall
27 include the chief medical officer's recommendation for an
28 appropriate alternative placement for the respondent.

29 Sec. 14. Section 229.14, subsection 2, paragraph d, Code
30 2025, is amended to read as follows:

31 d. If the court orders treatment of the respondent on an
32 outpatient or other appropriate basis as described in the chief
33 medical officer's report pursuant to subsection 1, paragraph "c",
34 the order shall provide that, should the respondent fail or
35 refuse to submit to treatment in accordance with the court's

1 order, the court may order that the respondent be taken into
2 immediate custody as provided by section 229.11 and, following
3 notice and hearing held in accordance with the procedures of
4 section 229.12, may order the respondent treated on an inpatient
5 basis requiring full-time custody, care, and treatment in a
6 hospital until such time as the chief medical officer reports
7 that the respondent does not require further treatment for
8 serious mental impairment or psychiatric deterioration, or has
9 indicated the respondent is willing to submit to treatment
10 on another basis as ordered by the court. If a patient
11 is transferred for treatment to another provider under this
12 paragraph, the treatment provider who will be providing the
13 outpatient or other appropriate treatment shall be provided with
14 copies of relevant court orders by the former treatment provider.

15 Sec. 15. Section 229.16, Code 2025, is amended to read as
16 follows:

17 **229.16 Discharge and termination of proceeding.**

18 When the condition of a patient who is hospitalized pursuant
19 to a report issued under section 229.14, subsection 1, paragraph
20 "b", or is receiving treatment pursuant to a report issued
21 under section 229.14, subsection 1, paragraph "c", or is in
22 full-time care and custody pursuant to a report issued under
23 section 229.14, subsection 1, paragraph "d", is such that
24 in the opinion of the chief medical officer the patient no
25 longer requires treatment or care for serious mental impairment,
26 or psychiatric deterioration, the chief medical officer shall
27 tentatively discharge the patient and immediately report that
28 fact to the court which ordered the patient's hospitalization
29 or care and custody. Upon receiving the report, the court
30 shall issue an order confirming the patient's discharge from
31 the hospital or from care and custody, as the case may be, and
32 shall terminate the proceedings pursuant to which the order was
33 issued. Copies of the order shall be sent by regular mail to
34 the hospital, the patient, and the applicant if the applicant has
35 filed a written waiver signed by the patient.

1 Sec. 16. Section 229.17, Code 2025, is amended to read as
2 follows:

3 **229.17 Status of respondent during appeal.**

4 If a respondent appeals to the supreme court from a
5 finding that the contention the respondent is seriously mentally
6 impaired, or is experiencing psychiatric deterioration, has been
7 sustained, and the respondent was previously ordered taken into
8 immediate custody under section 229.11 or has been hospitalized
9 for psychiatric evaluation and appropriate treatment under
10 section 229.13 before the court is informed of intent to appeal
11 its finding, the respondent shall remain in custody as previously
12 ordered by the court, the time limit stated in section 229.11
13 notwithstanding, or shall remain in the hospital subject to
14 compliance by the hospital with sections 229.13 through 229.16,
15 as the case may be, unless the supreme court orders otherwise.
16 If a respondent appeals to the supreme court regarding a
17 placement order, the respondent shall remain in placement unless
18 the supreme court orders otherwise.

19 Sec. 17. Section 229.19, subsection 1, paragraph c, Code
20 2025, is amended to read as follows:

21 c. The advocate's responsibility with respect to any patient
22 shall begin at whatever time the attorney employed or appointed
23 to represent that patient as respondent in hospitalization
24 proceedings, conducted under sections 229.6 through 229.13,
25 reports to the court that the attorney's services are no longer
26 required and requests the court's approval to withdraw as
27 counsel for that patient. However, if the patient is found
28 to be seriously mentally impaired, or experiencing psychiatric
29 deterioration, at the hospitalization hearing, the attorney
30 representing the patient shall automatically be relieved of
31 responsibility in the case and an advocate shall be assigned to
32 the patient at the conclusion of the hearing unless the attorney
33 indicates an intent to continue the attorney's services and the
34 court so directs. If the court directs the attorney to remain
35 on the case, the attorney shall assume all the duties of an

1 advocate. The clerk shall furnish the advocate with a copy of
2 the court's order approving the withdrawal and shall inform the
3 patient of the name of the patient's advocate.

4 Sec. 18. Section 229.21, subsection 3, paragraphs a and b,
5 Code 2025, are amended to read as follows:

6 a. Any respondent with respect to whom the magistrate or
7 judicial hospitalization referee has found the contention that
8 the respondent is seriously mentally impaired, is experiencing
9 psychiatric deterioration, or is a person with a substance use
10 disorder sustained by clear and convincing evidence presented at
11 a hearing held under section 229.12 or section 125.82, may appeal
12 from the magistrate's or referee's finding to a judge of the
13 district court by giving the clerk notice in writing, within ten
14 days after the magistrate's or referee's finding is made, that an
15 appeal is taken. The appeal may be signed by the respondent or
16 by the respondent's next friend, guardian, or attorney.

17 b. An order of a magistrate or judicial hospitalization
18 referee with a finding that the respondent is seriously mentally
19 impaired, is experiencing psychiatric deterioration, or is a
20 person with a substance use disorder shall include the following
21 notice, located conspicuously on the face of the order:

22 NOTE: The respondent may appeal from this order to a judge of
23 the district court by giving written notice of the appeal to the
24 clerk of the district court within ten days after the date of
25 this order. The appeal may be signed by the respondent or by
26 the respondent's next friend, guardian, or attorney. For a more
27 complete description of the respondent's appeal rights, consult
28 section 229.21 of the Code of Iowa or an attorney.

29 Sec. 19. Section 229.22, subsection 1, Code 2025, is amended
30 to read as follows:

31 1. The procedure prescribed by this section shall be used
32 when it appears that a person should be immediately detained
33 due to serious mental impairment or psychiatric deterioration,
34 but an application has not been filed naming the person as the
35 respondent pursuant to section 229.6, and the person cannot be

1 ordered into immediate custody and detained pursuant to section
2 229.11.

3 Sec. 20. Section 229.22, subsection 2, paragraph a,
4 subparagraph (4), subparagraph division (a), Code 2025, is
5 amended to read as follows:

6 (a) If the examining physician, examining physician
7 assistant, examining mental health professional, or examining
8 psychiatric advanced registered nurse practitioner finds that
9 there is reason to believe that the person is seriously mentally
10 impaired, and because of that impairment is likely to physically
11 injure the person's self or others if not immediately detained,
12 or the person is experiencing psychiatric deterioration, the
13 facility shall have the authority to detain the person for
14 a period of no longer than twelve hours. Within twelve
15 hours of detaining a person pursuant to this section, the
16 examining physician, examining physician assistant, examining
17 mental health professional, or examining psychiatric advanced
18 registered nurse practitioner shall communicate with the nearest
19 available magistrate.

20 Sec. 21. Section 229.22, subsection 2, paragraph b, Code
21 2025, is amended to read as follows:

22 b. If the magistrate orders that the person be detained, the
23 magistrate shall, by the close of business on the next working
24 day, file a written order with the clerk in the county where it
25 is anticipated that an application may be filed under section
26 229.6. The order may be filed by facsimile if necessary. A
27 peace officer from the law enforcement agency that took the
28 person into custody, if no request was made under paragraph
29 "a", may inform the magistrate that an arrest warrant has been
30 issued for or charges are pending against the person and request
31 that any written order issued under this paragraph require the
32 facility or hospital to notify the law enforcement agency about
33 the discharge of the person prior to discharge. The order shall
34 state the circumstances under which the person was taken into
35 custody or otherwise brought to a facility or hospital, and

1 the grounds supporting the finding of probable cause to believe
2 that the person is seriously mentally impaired and likely to
3 injure the person's self or others if not immediately detained,
4 or the person is experiencing psychiatric deterioration. The
5 order shall also include any law enforcement agency notification
6 requirements if applicable. The order shall confirm the oral
7 order authorizing the person's detention including any order
8 given to transport the person to an appropriate facility or
9 hospital. A peace officer from the law enforcement agency that
10 took the person into custody may also request an order, separate
11 from the written order, requiring the facility or hospital to
12 notify the law enforcement agency about the discharge of the
13 person prior to discharge. The clerk shall provide a copy of
14 the written order or any separate order to the chief medical
15 officer of the facility or hospital to which the person was
16 originally taken, to any subsequent facility to which the person
17 was transported, and to any law enforcement department, ambulance
18 service, or transportation service under contract with a mental
19 health and disability services region that transported the person
20 pursuant to the magistrate's order. A transportation service
21 that contracts with a mental health and disability services
22 region for purposes of this paragraph shall provide a secure
23 transportation vehicle and shall employ staff that has received
24 or is receiving mental health training.

25 Sec. 22. Section 229.26, Code 2025, is amended to read as
26 follows:

27 **229.26 Exclusive procedure for involuntary hospitalization.**

28 Sections 229.6 through 229.19 constitute the exclusive
29 procedure for involuntary hospitalization of persons by reason of
30 serious mental impairment, or psychiatric deterioration, in this
31 state, except that this chapter does not negate the provisions
32 of section 904.503 relating to transfer of prisoners with mental
33 illness to state mental health institutes and does not apply to
34 commitments of persons under chapter 812 or the rules of criminal
35 procedure, Iowa court rules, or negate the provisions of section

1 232.51 relating to disposition of children with mental illness.

2 Sec. 23. Section 229.28, subsection 1, unnumbered paragraph
3 1, Code 2025, is amended to read as follows:

4 When a court finds that the contention that a respondent
5 is seriously mentally impaired, or is experiencing psychiatric
6 deterioration, has been sustained or proposes to order continued
7 hospitalization of any person, or an alternative placement, as
8 described under section 229.14, subsection 1, paragraph "b" or
9 "d", and the court is furnished evidence that the respondent or
10 patient is eligible for care and treatment in a facility operated
11 by the United States department of veterans affairs or another
12 agency of the United States government and that the facility is
13 willing to receive the respondent or patient, the court may so
14 order.

15 Sec. 24. Section 229.31, Code 2025, is amended to read as
16 follows:

17 **229.31 Commission of inquiry.**

18 A sworn complaint, alleging that a named person is
19 not seriously mentally impaired or experiencing psychiatric
20 deterioration, and is unjustly deprived of liberty in any
21 hospital in the state, may be filed by any person with the
22 clerk of the district court of the county in which such named
23 person is so confined, or of the county in which such named
24 person is a resident. Upon receiving the complaint, a judge
25 of that court shall appoint a commission of not more than three
26 persons to inquire into the truth of the allegations. One
27 of the commissioners shall be a physician and if additional
28 commissioners are appointed, one of the additional commissioners
29 shall be a lawyer.

30 Sec. 25. Section 229.33, Code 2025, is amended to read as
31 follows:

32 **229.33 Hearing.**

33 If, on such report and statement, and the hearing of testimony
34 if any is offered, the judge shall find that such person is not
35 seriously mentally impaired, and is not experiencing psychiatric

1 deterioration, the judge shall order the person's discharge;
2 if the contrary, the judge shall so state, and authorize the
3 continued detention of the person, subject to all applicable
4 requirements of this chapter.

5 Sec. 26. Section 229.37, Code 2025, is amended to read as
6 follows:

7 **229.37 Habeas corpus.**

8 All persons confined as seriously mentally impaired, or as
9 experiencing psychiatric deterioration, shall be entitled to the
10 benefit of the writ of habeas corpus, and the question of serious
11 mental impairment, or psychiatric deterioration, shall be decided
12 at the hearing. If the judge shall decide that the person
13 is seriously mentally impaired, or experiencing psychiatric
14 deterioration, such decision shall be no bar to the issuing of
15 the writ a second time, whenever it shall be alleged that such
16 person is no longer seriously mentally impaired or experiencing
17 psychiatric deterioration.

18 Sec. 27. Section 602.8102, subsection 41, Code 2025, is
19 amended to read as follows:

20 41. Carry out duties relating to the involuntary ~~commitment~~
21 ~~of persons with mental impairments~~ commitments as provided in
22 chapter 125 and involuntary hospitalizations as provided in
23 chapter 229.

24 **EXPLANATION**

25 The inclusion of this explanation does not constitute agreement with
26 the explanation's substance by the members of the general assembly.

27 This bill relates to orders for treatment of persons
28 experiencing psychiatric deterioration.

29 Under current law, a court may order the treatment of a
30 person if the court finds by clear and convincing evidence
31 that the person is seriously mentally impaired. The bill
32 allows a court to also order the treatment of a person if the
33 court finds by clear and convincing evidence that the person
34 is experiencing psychiatric deterioration. The bill defines
35 "psychiatric deterioration" as a deterioration of a person's

1 mental health such that based on that person's history the person
2 is unlikely to seek treatment, the person is unable to understand
3 the need to treat the person's mental health condition, and,
4 within a reasonable degree of medical certainty, the person is
5 likely to continue to deteriorate until they have a serious
6 mental impairment unless they receive treatment.

7 The bill makes conforming changes to Code sections 125.75
8 (substance abuse disorders — application), 218.46 (scientific
9 investigation), 225.11 (psychiatric hospital — initiating
10 commitment procedures), and 602.8102 (clerk of district court —
11 general duties) and Code chapter 229 (hospitalization of persons
12 with mental illness).

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