

Not Guilty By Reason of Insanity (NGRI)



Patient Handbook

Michigan Department of
Health and Human Services



GRETCHEN WHITMER, GOVERNOR | ELIZABETH HERTEL, DIRECTOR

Not Guilty by Reason of Insanity (NGRI)

What You Need to Know

WHAT DOES NGRI MEAN?

- Not guilty by reason of insanity (NGRI) is often referred to as an insanity plea. It is a plea deal entered for you during your court hearing about your legal charge. It means that you admit to doing the act, but that you were not in your usual state of mind. NGRI makes sure you get mental health treatment instead of jail time.

HOW DID I GET TO THIS POINT?

- Prior to entering a plea for NGRI, you participated in an examination called a criminal responsibility evaluation to find out if you were legally insane at that time.
- If the court decided that you should be NGRI, Michigan law says that you must be sent to the Center for Forensic Psychiatry to be observed in a hospital for up to 60 days.
- During this diagnostic period, it will be determined if you have a mental condition that needs treatment. You may be given treatment voluntarily.
- You will be interviewed by two psychiatrists to see if you need continued treatment.
- Reports will be shared with the court.

WHAT SHOULD I EXPECT IN THE HOSPITAL?

- You may be recommended to participate in treatment.
- You will have a team of people who will help in your treatment in a hospital or outpatient setting. The entire treatment team will review your progress at least every 90 days and help to make plans so that you will succeed in the hospital and the community.
- The team will create and explain a plan for your treatment based on your personal needs. Your goals and plan for treatment are called an individualized plan of services or IPOS. You may also hear it called your treatment plan.
- You are also part of your treatment team.
- You will have meetings with your treatment team. The team will review your progress, discuss discharge planning, and answer any questions you may have about your treatment.
- You will be interviewed by psychiatrists for court.
- You will have court hearings about your need for treatment.

TRANSFERS/DISCHARGES/LEAVES OF ABSENCE

- The State Hospital Administration (SHA) works with the probate court to provide appropriate care for all persons found NGRI in the least restrictive setting.
- Once your team feels that you are ready for a discharge, transfer, or leave of absence, they will make a request to the NGRI committee. The request will include information about your history, present mental status, progress in treatment, as well as a detailed description of future treatment.
- If your request is denied, you may request to petition for discharge from treatment from the probate court or a review of the decision by the SHA senior deputy director.

NGRI COMMITTEE

- The NGRI committee is made up of specially trained forensic staff (psychiatrists, psychologists, and social workers) who are appointed by the hospital director at the Center for Forensic Psychiatry.
- The NGRI committee may work with your treatment team for support to help you remain stable, address safety risks, and to help you successfully meet your goals.
- The NGRI committee will work with your treatment team to include risk mitigation strategies in your IPOS. These risk mitigation strategies must be tied to your mental health treatment needs.

COURT PROCESS

- Your treatment team will monitor your progress and make recommendations to the court about whether you need to continue in treatment.
- Before your hearing, a doctor will interview you and review your medical records.
- You will get a copy of the court paperwork. These court reports are called petitions and clinical certificates.
- A lawyer will come to see you and discuss possible legal options.
- You can choose whether you go to court for a hearing or agree to treatment as recommended in the report.
- A mental health professional may testify at your hearing about whether you need to remain in treatment.
- The judge will make the final decision about your case. There may be a few options:
 1. Hospitalization Orders: The court will hear your case to determine if you need treatment. The judge may order you for treatment in a hospital setting. The court may order up to 60 days, 90 days, or one year of treatment within a hospital.

- Even if you are on a hospitalization order, your treatment team will be working with you to prepare for your discharge. You may be discharged to the community at any point during the hospitalization.
- A person on a one-year continuing treatment order can go to probate court as follows:
 1. Your treatment team will submit a six-month review report to the court. If you disagree with your need to stay in a hospital, you will have a chance to file a petition for discharge. Once the court receives this form, they will set a hearing date.
 2. Prior to the end of your one-year treatment order, your treatment team may file a petition to continue your treatment. If you disagree with the petition, a court hearing will be set.
 3. If a request by your team for discharge or leave of absence is denied by the NGRI committee, you may file a petition for discharge. Once the court receives this petition, they will set a hearing date.
- 2. Combined Hospital and Community Treatment: The judge may order assisted outpatient treatment (AOT) for combined hospital and outpatient treatment. This order allows, but does not require, treatment in a hospital for up to 90 days. Otherwise, treatment is in an outpatient setting.
- 3. Community Treatment: The judge may order AOT for outpatient treatment only.
- 4. Discharge with no court-ordered treatment: The judge may decide that you do not have a mental illness and/or do not need court ordered treatment.

APPEALS AND RIGHT TO OBJECT

- If it is recommended that you be transferred to another hospital, you, your patient advocate, your guardian, or your nearest relative will be notified and may object to the transfer. You, your patient advocate, your guardian, or your nearest relative will also be provided an opportunity to appeal the transfer. A Hospital Notice of Transfer and Right to Appeal form will be provided to you at the time of admission and discharge. If you complete this form, a hearing will be scheduled.
- If you have been on an authorized leave for more than 10 days and you are returned to the hospital, you may object to going back to the hospital and have an opportunity to appeal. Hospital staff will provide you a PCM-233, Notice of Right to Appeal Return to Hospital from Authorized Leave, form. Once completed and turned in to hospital staff, the court will set a hearing.
- If you are on an order for AOT or combined hospitalization and AOT and your treatment team determines that you are not complying with the court order or that

the AOT is not sufficient to prevent harm to you or others, the court will be notified. If you believe that the AOT program is not appropriate, you may notify the court of that fact.

- If you are hospitalized without a hearing after placement in an AOT program, you have the right to object to the hospitalization. The hospital must notify you of your right to object. Upon receipt of an objection to a hospitalization the court shall schedule a hearing to determine if you require hospitalization.
- If the NGRI committee denies a request for leave or discharge that your treatment team recommends, they must, in writing, tell you or your guardian of the reason for the denial and give treatment recommendations that will lead towards approval of the leave or discharge request. They must also notify you or your guardian of the ability to file a petition for discharge.
- Current authorized leave status contracts will be converted to “risk mitigation strategies” in your IPOS tied to your mental health treatment needs when your current hospitalization order expires, and a new AOT order is issued. You may request this change prior to expiration of your hospitalization order by informing your treatment team of your wishes.

The Michigan Department of Health and Human Services will not exclude from participation in, deny benefits of, or discriminate against any individual or group because of race, sex, religion, age, national origin, color, height, weight, marital status, gender identification or expression, sexual orientation, partisan considerations, or a disability or genetic information that is unrelated to the person's eligibility.