## **HOUSE BILL NO. 5615**

March 12, 2020, Introduced by Reps. Green, Markkanen, Whiteford, Vaupel and Berman and referred to the Committee on Health Policy.

A bill to amend 1974 PA 258, entitled "Mental health code,"

by amending sections 134, 147, and 720 (MCL 330.1134, 330.1147, and 330.1720), section 134 as amended by 2015 PA 59, section 147 as amended by 2006 PA 27, and section 720 as added by 1995 PA 290.

## THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

Sec. 134. (1) The director shall must establish a
 comprehensive system of licensing for psychiatric hospitals and





- 1 psychiatric units in the state to protect the public by ensuring
- 2 that these psychiatric hospitals and psychiatric units provide the
- 3 facilities and the ancillary supporting services necessary to
- 4 maintain a high quality of patient care. Separate criteria shall
- 5 must be developed for licensing hospital beds for minors.
- 6 (2) The director shall must coordinate all functions within
- 7 state government affecting psychiatric hospitals and psychiatric
- 8 units, and shall must cooperate with other state agencies, that as
- 9 necessary to establish standards or requirements for facilities
- 10 providing mental health care to assure ensure necessary, equitable,
- 11 and consistent state regulation of these facilities without
- 12 duplication of inspections or services. The director may enter into
- 13 agreements with other state agencies to accomplish this purpose. The
- 14 department's office of recipient rights has oversight authority to
- 15 ensure operation of an effective recipient rights system at all
- 16 psychiatric hospitals and psychiatric units.
- 17 Sec. 147. Except as otherwise provided in sections 134a, and
- 18 149b, and 720(2), psychiatric hospitals or psychiatric units
- 19 operated by the state or federal government are exempt from
- 20 sections 134 through 150.
- 21 Sec. 720. (1) Each psychiatric hospital and psychiatric unit
- 22 must report the death of a recipient to the department within 3
- 23 business days after the death of that recipient while the recipient
- 24 was in the hospital or psychiatric unit, or if known, within 30
- 25 days after the recipient's release from that hospital or
- 26 psychiatric unit. If known, the report must include, but is not
- 27 limited to, the following:
- 28 (a) The recipient's name.
- 29 (b) The recipient's gender.



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- 1 (c) The recipient's date of birth.
- 2 (d) Date, time, and place of the recipient's death.
- 3 (e) Any medical or psychiatric diagnosis.
  - (f) The cause of the recipient's death.
- 5 (g) Recent changes in the recipient's medical or psychiatric 6 status, including notation of the recipient's most recent
- 7 hospitalization.

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- 8 (h) Summary of the recipient's condition, treatment, and
  9 support programs and services provided to the recipient before the
  10 recipient's death.
  - (i) The date of the recipient's most recent hospital admission, and if relevant, most recent hospital discharge.
    - (j) Any other relevant history.
  - (k) Autopsy findings, including toxicology report, if a toxicology test was performed and is available. If an autopsy report and toxicology report are not available at the time the hospital or psychiatric unit files the report with the department, the hospital or psychiatric unit must forward the autopsy report and toxicology report to the department and state protection and advocacy agency upon receipt.
- 21 (l) Any action taken as a result of the recipient's death.
- 22 (m) Any notification to the medical examiner, police, or 23 recipient rights office at the psychiatric hospital or psychiatric 24 unit and the recipient's service agency.
- 25 (n) Whether or not the recipient was in restraint or seclusion 26 at the time of death.
- 27 (2) Each state-operated psychiatric hospital and psychiatric 28 unit must report the death of a recipient to the department and to 29 the state protection and advocacy agency. The information reported



1 must conform to the reporting requirements in subsections (1) and 2 (5).

- 3 (3) For the death of recipients who received service from a 4 state-operated psychiatric hospital or psychiatric unit, the 5 reports must include all recipient deaths occurring during the 6 recipients' period of hospitalization and all recipient deaths 7 occurring within 12 months after a recipient is released from a 8 psychiatric hospital or psychiatric unit. For the death of 9 recipients who received service from a community mental health 10 services program or prepaid inpatient health plan, the reports must 11 include all recipient deaths occurring while recipients are receiving services from the community mental health services 12 13 program or prepaid inpatient health plan and all recipient deaths 14 occurring within 60 days after a recipient is discharged from 15 service or within 60 days from the date of closure of service to 16 the recipient.
  - (4) The department must include in the annual report to the legislature under subsection (6) a summation and analysis of the information provided under this section regarding recipients' deaths.
  - (5) The department must review and verify the information in each death report it receives. The department must report as needed to other investigative authorities, conduct its own investigation of potential licensing or rights violations, and take any corrective action warranted.
  - (6) The department shall must provide an annual statistical report to the members of the house and senate standing committees and appropriations subcommittees with legislative oversight of mental health issues summarizing all deaths and causes of deaths,



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- 1 if known of mental health care recipients that have been reported
- 2 to the department and all deaths that have occurred in state
- 3 facilities.

