MENTAL HEALTH CODE (EXCERPT) Act 258 of 1974

CHAPTER 4A

CIVIL ADMISSION AND DISCHARGE PROCEDURES FOR EMOTIONALLY DISTURBED MINORS

330.1498a Hospitalization of minors.

Sec. 498a. A minor shall be hospitalized only pursuant to the provisions of this chapter.

History: Add. 1984, Act 186, Imd. Eff. July 3, 1984;—Am. 1995, Act 290, Eff. Mar. 28, 1996.

330.1498b Definitions; C to M.

Sec. 498b. As used in this chapter, unless the context requires otherwise:

- (a) "Court" means the probate court or the court with responsibility with regard to mental health services for the county in which a minor who has requested hospitalization, for whom a request for hospitalization has been made, or who has been hospitalized pursuant to this chapter either resides or was found.
 - (b) "Minor requiring treatment" means either of the following:
- (i) A minor with a substantial disorder of thought or mood that significantly impairs judgment, behavior, capacity to recognize reality, or ability to cope with the ordinary demands of life.
- (ii) A minor having a severe or persistent emotional condition characterized by seriously impaired personality development, individual adjustment, social adjustment, or emotional growth, which is demonstrated in behavior symptomatic of that impairment.

History: Add. 1984, Act 186, Imd. Eff. July 3, 1984;—Am. 1988, Act 155, Imd. Eff. June 14, 1988;—Am. 1995, Act 290, Eff. Mar. 28, 1996.

330.1498c Definitions; P to S.

Sec. 498c. As used in this chapter, unless the context requires otherwise:

- (a) "Person in loco parentis" means a person who is not the parent or guardian of a minor, but who has either legal custody of a minor or physical custody of a minor and is providing support and care for the minor.
- (b) "Suitable for hospitalization" means a determination concerning a minor that all of the following criteria are met:
 - (i) The minor is a minor requiring treatment.
 - (ii) The minor is in need of hospitalization and is expected to benefit from hospitalization.
 - (iii) An appropriate, less restrictive alternative to hospitalization is not available.

History: Add. 1984, Act 186, Imd. Eff. July 3, 1984;—Am. 1995, Act 290, Eff. Mar. 28, 1996;—Am. 1998, Act 524, Imd. Eff. Jan. 12, 1999.

330.1498d Hospitalization of minor; conditions; request by department of human services or county juvenile agency; suitability for hospitalization; determination; "county juvenile agency" defined.

Sec. 498d. (1) Subject to section 498e and except as otherwise provided in this chapter, section 1074, and section 18s of chapter XIIA of the probate code of 1939, 1939 PA 288, MCL 712A.18s, a minor of any age may be hospitalized if both of the following conditions are met:

- (a) The minor's parent, guardian, or a person acting in loco parentis for the minor or, in compliance with subsection (2) or (3), the department of human services or county juvenile agency, as applicable, requests hospitalization of the minor under this chapter.
 - (b) The minor is found to be suitable for hospitalization.
- (2) The department of human services may request hospitalization of a minor who is committed to the department of human services under 1935 PA 220, MCL 400.201 to 400.214.
- (3) As applicable, the department of human services may request hospitalization of, or the county juvenile agency may request an evaluation for hospitalization of, a minor who is 1 of the following:
- (a) A ward of the court under chapter X or XIIA of the probate code of 1939, 1939 PA 288, MCL 710.21 to 710.70 and 712A.1 to 712A.32, if the department of human services or county juvenile agency is specifically empowered to do so by court order.
- (b) Committed to the department of human services or county juvenile agency under the youth rehabilitation services act, 1974 PA 150, MCL 803.301 to 803.309, except that if the minor is residing with his or her custodial parent, the consent of the custodial parent is required.
- (4) Subject to sections 498e, 498f, and 498j, and except as provided in section 1074 and section 18s of chapter XIIA of the probate code of 1939, 1939 PA 288, MCL 712A.18s, a minor 14 years of age or older may be hospitalized if both of the following conditions are met:

- (a) The minor requests hospitalization under this chapter.
- (b) The minor is found to be suitable for hospitalization.
- (5) In making the determination of suitability for hospitalization, a minor shall not be determined to be a minor requiring treatment solely on the basis of 1 or more of the following conditions:
 - (a) Epilepsy.
 - (b) Developmental disability.
- (c) Brief periods of intoxication caused by substances such as alcohol or drugs or by dependence upon or addiction to those substances.
 - (d) Juvenile offenses, including school truancy, home truancy, or incorrigibility.
 - (e) Sexual activity.
 - (f) Religious activity or beliefs.
 - (g) Political activity or beliefs.
- (6) As used in this section, "county juvenile agency" means that term as defined in section 2 of the county juvenile agency act, 1998 PA 518, MCL 45.622.

History: Add. 1984, Act 186, Imd. Eff. July 3, 1984;—Am. 1995, Act 290, Eff. Mar. 28, 1996;—Am. 1998, Act 524, Imd. Eff. Jan. 12, 1999;—Am. 2012, Act 540, Eff. Mar. 28, 2013.

330.1498e Evaluation; second opinion; transfer; alternative program; applicability of section.

Sec. 498e. (1) Except as provided in section 1074 and section 18s of chapter XIIA of the probate code of 1939, 1939 PA 288, MCL 712A.18s, a minor requesting hospitalization or for whom a request for hospitalization was made shall be evaluated to determine suitability for hospitalization according to this section as soon as possible after the request is made.

- (2) The executive director of the community mental health services program that is responsible for providing services in the county of residence of a minor requesting hospitalization or for whom a request for hospitalization was made shall evaluate the minor to determine his or her suitability for hospitalization according to this section. In making a determination of a minor's suitability for hospitalization, the executive director shall utilize the community mental health services program's children's diagnostic and treatment service. If a children's diagnostic and treatment service does not exist in the community mental health services program, the executive director shall, through written agreement, arrange to have a determination made by the children's diagnostic and treatment service of another community mental health services program, or by the appropriate hospital.
- (3) In evaluating a minor's suitability for hospitalization, the executive director shall do all of the following:
 - (a) Determine both of the following:
 - (i) Whether the minor is a minor requiring treatment.
 - (ii) Whether the minor requires hospitalization and is expected to benefit from hospitalization.
- (b) Determine whether there is an appropriate, available alternative to hospitalization, and if there is, refer the minor to that program.
 - (c) Consult with the appropriate school, hospital, and other public or private agencies.
- (d) If the minor is determined to be suitable for hospitalization under subdivision (a), refer the minor to the appropriate hospital.
- (e) If the minor is determined not to be suitable for hospitalization under subdivision (a), determine if the minor needs mental health services. If it is determined that the minor needs mental health services, the executive director shall offer an appropriate treatment program for the minor, if the program is available, or refer the minor to any other appropriate agency for services.
- (f) If a minor is assessed and found not to be clinically suitable for hospitalization, the executive director shall inform the individual or individuals requesting hospitalization of the minor of appropriate available alternative services to which a referral should be made and of the process for a request of a second opinion under subsection (4).
- (4) If the children's diagnostic and treatment service of the community mental health services program denies hospitalization, the parent or guardian of the minor may request a second opinion from the executive director. The executive director shall arrange for an additional evaluation by a psychiatrist, other physician, or licensed psychologist to be performed within 3 days, excluding Sundays and legal holidays, after the executive director receives the request. If the conclusion of the second opinion is different from the conclusion of the children's diagnostic and treatment service, the executive director, in conjunction with the medical director, shall make a decision based on all clinical information available. The executive director's decision shall be confirmed in writing to the individual who requested the second opinion, and the confirming document shall include the signatures of the executive director and medical director or verification that the Rendered Monday, July 7, 2025 Michigan Compiled Laws Complete Through PA 5 of 2025 Page 2

decision was made in conjunction with the medical director.

- (5) If a minor has been admitted to a hospital not operated by or under contract with the department or a community mental health services program and the hospital considers it necessary to transfer the minor to a hospital under contract with a community mental health services program, the hospital shall submit an application for transfer to the appropriate community mental health services program. The executive director shall determine if there is an appropriate, available alternative to hospitalization of the minor. If the executive director determines that there is an appropriate, available alternative program, the minor shall be referred to that program. If the executive director determines that there is not an appropriate, alternative program, the minor shall be referred to a hospital under contract with the community mental health services program.
- (6) Except as provided in subsections (1) and (5), this section only applies to hospitals operated under contract with a community mental health services program.

History: Add. 1984, Act 186, Imd. Eff. July 3, 1984;—Am. 1995, Act 290, Eff. Mar. 28, 1996;—Am. 1996, Act 588, Imd. Eff. Jan. 21, 1997;—Am. 2012, Act 540, Eff. Mar. 28, 2013.

330.1498f Admission; examination; waiting list; interim services; referral.

Sec. 498f. If a minor is referred to a hospital by an executive director pursuant to section 498e, the hospital director may accept the referral and admit the minor, or the hospital director may order an examination of the minor to confirm the minor's suitability for hospitalization. The examination shall begin immediately. If the hospital director confirms the minor's suitability for hospitalization, the minor shall be scheduled for admission to the hospital. If the minor cannot be admitted immediately because of insufficient space in the hospital, the minor shall be placed on a waiting list and the executive director shall provide necessary interim services, including periodic reassessment of the suitability for hospitalization. The minor may be referred to another hospital. If the hospital director does not confirm the minor's suitability for hospitalization, the minor shall be referred to the executive director, who shall offer an appropriate treatment plan for the minor or refer the minor to any other agency for services.

History: Add. 1984, Act 186, Imd. Eff. July 3, 1984;—Am. 1995, Act 290, Eff. Mar. 28, 1996.

330.1498g Examination, tests, and evaluations.

Sec. 498g. If a minor is admitted to a hospital pursuant to this chapter, the director of the hospital shall cause the minor to be examined by a child psychiatrist within 48 hours after the admission of the minor and shall immediately initiate any of the following tests and evaluations of the minor pursuant to section 498j which, in the hospital director's opinion may aid in the preparation of a treatment plan for the minor:

- (a) A comprehensive social and family history including family relationships.
- (b) A comprehensive educational test and an assessment of educational development.
- (c) Psychological testing.
- (d) An evaluation by the staff participating in the treatment of the minor.
- (e) Any relevant test, assessment, or study of, or related to, the minor.

History: Add. 1984, Act 186, Imd. Eff. July 3, 1984.

330.1498h Emergency admission of minor.

Sec. 498h. (1) Except as provided in section 1074 and section 18s of chapter XIIA of the probate code of 1939, 1939 PA 288, MCL 712A.18s, a minor's parent, guardian, or person in loco parentis may request emergency admission of the minor to a hospital, if the person making the request has reason to believe that the minor is a minor requiring treatment and that the minor presents a serious danger to self or others.

- (2) If the hospital to which the request for emergency admission is made is not under contract to the community mental health services program, the request for emergency hospitalization shall be made directly to the hospital. If the hospital director agrees that the minor needs emergency admission, the minor shall be hospitalized. If the hospital director does not agree, the person making the request may request hospitalization of the minor under section 498d.
- (3) If the hospital to which the request for emergency admission is made is under contract to the community mental health services program, the request shall be made to the preadmission screening unit of the community mental health services program serving in the county where the minor resides. If the community mental health services program has a children's diagnostic and treatment service, the preadmission screening unit shall refer the person making the request to that service. In counties where there is no children's diagnostic and treatment service, the preadmission screening unit shall refer the person making the request to the appropriate hospital. If it is determined that emergency admission is not necessary, the person may request hospitalization of the minor under section 498d. If it is determined that emergency admission is necessary, the minor shall be hospitalized or placed in an appropriate alternative program.

- (4) If a minor is assessed by the preadmission screening unit and found not to be clinically suitable for hospitalization, the preadmission screening unit shall inform the individual or individuals requesting hospitalization of the minor of appropriate available alternative services to which a referral should be made and of the process for a request of a second opinion under subsection (5).
- (5) If the preadmission screening unit of the community mental health services program denies hospitalization, a minor's parent or guardian may request a second opinion from the executive director. The executive director shall arrange for an additional evaluation by a psychiatrist, other physician, or licensed psychologist to be performed within 3 days, excluding Sundays and legal holidays, after the executive director receives the request. If the conclusion of the second opinion is different from the conclusion of the preadmission screening unit, the executive director, in conjunction with the medical director, shall make a decision based on all clinical information available. The executive director's decision shall be confirmed in writing to the individual who requested the second opinion, and the confirming document shall include the signatures of the executive director and medical director or verification that the decision was made in conjunction with the medical director.
- (6) If a person in loco parentis makes a request for emergency admission and the minor is admitted to a hospital under this section, the hospital director or the executive director of the community mental health services program immediately shall notify the minor's parent or parents or guardian.
- (7) If a minor is hospitalized in a hospital that is operated under contract with a community mental health services program, the hospital director shall notify the appropriate executive director within 24 hours after the hospitalization occurs.
- (8) If a peace officer, as a result of personal observation, has reasonable grounds to believe that a minor is a minor requiring treatment and that the minor presents a serious danger to self or others and if after a reasonable effort to locate the minor's parent, guardian, or person in loco parentis, the minor's parent, guardian, or person in loco parentis cannot be located, the peace officer may take the minor into protective custody and transport the minor to the appropriate community mental health preadmission screening unit, if the community mental health services program has a children's diagnostic and treatment service, or to a hospital if it does not have a children's diagnostic and treatment service. After transporting the minor, the peace officer shall execute a written request for emergency hospitalization of the minor stating the reasons, based upon personal observation, that the peace officer believes that emergency hospitalization is necessary. The written request shall include a statement that a reasonable effort was made by the peace officer to locate the minor's parent, guardian, or person in loco parentis. If it is determined that emergency hospitalization of the minor is not necessary, the minor shall be returned to his or her parent, guardian, or person in loco parentis if an additional attempt to locate the parent, guardian, or person in loco parentis is successful. If the minor's parent, guardian, or person in loco parentis cannot be located, the minor shall be turned over to the protective services program of the family independence agency. If it is determined that emergency admission of the minor is necessary, the minor shall be admitted to the appropriate hospital or to an appropriate alternative program. The executive director immediately shall notify the minor's parent, guardian, or person in loco parentis. If the hospital is under contract with the community mental health services program, the hospital director shall notify the appropriate executive director within 24 hours after the hospitalization occurs.
- (9) An evaluation of a minor admitted to a hospital under this section shall begin immediately after the minor is admitted. The evaluation shall be conducted in the same manner as provided in section 498e. If the minor is not found to be suitable for hospitalization, the minor shall be released into the custody of his or her parent, guardian, or person in loco parentis, and the minor shall be referred to the executive director who shall determine if the minor needs mental health services. If it is determined that the minor needs mental health services, the executive director shall offer an appropriate treatment program for the minor, if the program is available, or refer the minor to another agency for services.
- (10) A hospital director shall proceed under either the estates and protected individuals code, 1998 PA 386, MCL 700.1101 to 700.8206, or chapter XIIA of the probate code of 1939, 1939 PA 288, MCL 712A.1 to 712A.32, as warranted by the situation and the best interests of the minor, under any of the following circumstances:
- (a) The hospital director cannot locate a parent, guardian, or person in loco parentis of a minor admitted to a hospital under subsection (8).
- (b) The hospital director cannot locate the parent or guardian of a minor admitted to a hospital by a person in loco parentis under this section.

History: Add. 1984, Act 186, Imd. Eff. July 3, 1984;—Am. 1995, Act 290, Eff. Mar. 28, 1996;—Am. 1996, Act 588, Imd. Eff. Jan. 21, 1997;—Am. 2000, Act 57, Eff. Apr. 1, 2000;—Am. 2012, Act 540, Eff. Mar. 28, 2013.

330.1498i Notice.

Sec. 498i. The parent or guardian of a minor shall be notified immediately of the admission of a minor to a hospital in any case where the parent or guardian of the minor did not execute the application for hospitalization. The notice shall be in the form most likely to reach the person being notified in an expeditious manner, and shall inform the person of the right to participate in any proceedings under this act.

History: Add. 1984, Act 186, Imd. Eff. July 3, 1984.

330.1498j Consent.

Sec. 498j. A hospital shall request a parent or guardian of a minor admitted to a hospital under this chapter to give written consent for the minor's treatment and for the release of information from agencies or individuals involved in treating the minor before the hospitalization considered necessary by the hospital for the minor's treatment. If the hospital cannot obtain consent for treatment, the director of the hospital may proceed under either the estates and protected individuals code, 1998 PA 386, MCL 700.1101 to 700.8102, or chapter XIIA of the probate code of 1939, 1939 PA 288, MCL 712A.1 to 712A.32, as warranted by the situation and the best interests of the minor.

History: Add. 1984, Act 186, Imd. Eff. July 3, 1984;—Am. 2000, Act 57, Eff. Apr. 1, 2000.

330.1498k Leaving hospital without knowledge and permission of staff; notice; transporting minor to hospital; protective custody; appeal.

Sec. 498k. (1) If a minor who has been admitted to a hospital under this chapter leaves the hospital without the knowledge and permission of the appropriate hospital staff, the hospital must immediately notify the minor's parent, guardian, or person in loco parentis, the executive director if appropriate, and the appropriate police agency.

- (2) If a minor has left a hospital without the knowledge and permission of the appropriate hospital staff or has refused a request to return to the hospital while on an authorized absence from the hospital, and the hospital director believes that the minor should be returned to the hospital, the hospital director must request that the minor's parent, guardian, or person in loco parentis transport the minor to the hospital. If the parent, guardian, or person in loco parentis is unable, after reasonable effort, to transport the minor, a request may be submitted to the court for an order to transport the minor. If the court is satisfied that a reasonable effort was made to transport the minor, the court must order a peace officer to take the minor into protective custody. After the minor is taken into protective custody, a peace officer or a security transport officer shall transport the minor to the hospital.
- (3) An opportunity for appeal, and notice of that opportunity, shall be provided to any minor and to the parent or guardian of any minor who is returned over the minor's objection from any authorized leave in excess of 10 days. In the case of a minor less than 14 years of age, the appeal shall be made by the parent or guardian of the minor or person in loco parentis.

History: Add. 1984, Act 186, Imd. Eff. July 3, 1984;—Am. 1988, Act 155, Imd. Eff. June 14, 1988;—Am. 1995, Act 290, Eff. Mar. 28, 1996;—Am. 2022, Act 146, Eff. (sine die);—Am. 2022, Act 214, Imd. Eff. Oct. 14, 2022.

330.1498/ Review.

Sec. 498*l*. (1) Not more than 90 days after the admission of a minor to a hospital pursuant to this chapter, and at 60-day intervals after the expiration of the 90-day period, the director of the hospital shall perform or arrange to have performed a review of the minor's suitability for hospitalization. If the minor is in a hospital under contract with a community mental health services program, the executive director shall participate in the reviews.

- (2) Subject to section 114a, the reviews of the minor's suitability for continued hospitalization shall be conducted under rules promulgated by the department. Results of the reviews shall be transmitted promptly to all of the following:
 - (a) The minor, if the minor is 14 years of age or older.
 - (b) The parent, guardian, or person in loco parentis of the minor.
 - (c) The executive director.
 - (d) The court, if there was a court hearing on the admission of the minor.

History: Add. 1984, Act 186, Imd. Eff. July 3, 1984;—Am. 1995, Act 290, Eff. Mar. 28, 1996.

Administrative rules: R 330.1001 et seq. of the Michigan Administrative Code.

330.1498m Objection to hospitalization; violation as misdemeanor.

Sec. 498m. (1) An objection to the hospitalization of a minor may be made to the court by any of the following persons:

(a) A person found suitable by the court.

- (b) The minor's parent, guardian, or person in loco parentis if the request for hospitalization was made by the minor pursuant to section 498d(3) or by a peace officer pursuant to section 498h(6).
 - (c) The minor who has been hospitalized, if the minor is 14 years of age or older.
- (2) An objection made to the court pursuant to subsection (1) shall be made in writing not more than 30 days after the admission of a minor to a hospital, and may be made subsequently within not more than 30 days after the receipt of the periodic review of the minor's suitability for continued hospitalization as provided for in section 498*l*. The objection shall state the basis on which it is being raised.
- (3) If a minor who has been hospitalized for not less than 7 days pursuant to this chapter informs a hospital employee of the minor's desire to object to hospitalization, the hospital employee or a person designated by the hospital shall assist the minor in properly submitting an objection to hospitalization pursuant to this section. An employee of the hospital shall not interfere with or fail to act upon a minor's objection to hospitalization. A person who violates this subsection is guilty of a misdemeanor.

History: Add. 1984, Act 186, Imd. Eff. July 3, 1984.

330.1498n Judicial hearing.

Sec. 498n. (1) Upon receipt of an objection to hospitalization filed under section 498m, the court shall schedule a hearing to be held within 7 days, excluding Sundays and holidays. After receipt of the objection, the court shall notify all of the following persons of the time and place for the hearing:

- (a) The parents or guardian of the minor to whom the objection refers.
- (b) The person filing the objection.
- (c) The minor to whom the objection refers.
- (d) The person who executed the application for hospitalization of the minor.
- (e) The hospital director.
- (f) The executive director.
- (2) The court shall sustain an objection to hospitalization and order the discharge of the minor unless the court finds by clear and convincing evidence that the minor is suitable for hospitalization. If the court does not sustain the objection, an order shall not be entered, the objection shall be dismissed, and the hospital shall continue to hospitalize the minor.
 - (3) The hearing required by subsection (1) shall be governed by sections 451 to 465.
- (4) The court shall not dismiss the objection and refuse to order a discharge of a hospitalized minor on the grounds that the minor's parent or guardian is unwilling or unable to provide or arrange for the management, care, or residence of the minor. If an objection is sustained and the minor's parent or guardian is unwilling or unable to provide or arrange for the management, care, or residence of the minor, the objecting person may, or a person authorized by the court shall, file promptly a petition under section 2(b) of chapter XIIA of Act No. 288 of the Public Acts of 1939, being section 712A.2 of the Michigan Compiled Laws, to ensure that the minor is provided with appropriate management, care, or residence.
- (5) If a hospital has officially agreed to admit a minor, but admission has been deferred until a subsequent date, an objection to hospitalization of the minor may be made to the court under section 498m before the minor is admitted to the hospital. Subject to section 114a, a minor 14 years of age or older shall be notified of the right to object in accordance with rules promulgated by the department. If the objection is sustained by the court, the minor shall not be hospitalized.

History: Add. 1984, Act 186, Imd. Eff. July 3, 1984;—Am. 1995, Act 290, Eff. Mar. 28, 1996.

Administrative rules: R 330.1001 et seq. of the Michigan Administrative Code.

330.1498o Notice of intent or oral request to terminate hospitalization; petition to continue hospitalization; hearing.

Sec. 4980. (1) Except as provided in subsection (4), a minor hospitalized under this chapter shall not be kept in the hospital more than 3 days, excluding Sundays and holidays, after receipt by the hospital of a written notice of intent to terminate the hospitalization of the minor executed by the minor's parent, guardian, or person in loco parentis or by the minor if the minor is 14 years of age or older and was admitted to the hospital upon his or her own request.

- (2) Upon receipt of an oral request to terminate hospitalization of a minor pursuant to subsection (1), the hospital promptly shall supply the necessary form for termination of hospitalization to the person giving notice.
- (3) Upon receipt of notice or an oral request under subsection (1) or (2) by a hospital under contract with the community mental health services program, the hospital director immediately shall notify the executive director.
- (4) If notice of intent to terminate hospitalization is received by a hospital under subsection (1) or (2), and Rendered Monday, July 7, 2025

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the director of the hospital determines that the minor to whom the notice applies should remain in the hospital, the director of the hospital or a person designated by the director of the hospital shall file, within 3 days, excluding Sundays and holidays, after receipt of the notice, a petition with the court requesting an order to continue hospitalization of the minor. The petition shall be accompanied by 1 certificate executed by a child and adolescent psychiatrist and 1 certificate executed by either a physician or a licensed psychologist. If a petition is filed with the court under this subsection, the hospital shall continue to hospitalize the minor pending a court hearing on the petition.

- (5) Upon receipt of a petition to continue hospitalization of a minor under subsection (4), the court shall schedule a hearing to be held within 7 days, excluding Sundays and holidays, after receipt of the petition. The hearing shall be convened in accordance with sections 451 to 465.
- (6) If the court finds the minor to be suitable for hospitalization by clear and convincing evidence, the court shall order the minor to continue hospitalization for not more than 60 days. If the court does not find by clear and convincing evidence that the minor is suitable for hospitalization, the court shall order the minor discharged from the hospital.

History: Add. 1984, Act 186, Imd. Eff. July 3, 1984;—Am. 1995, Act 290, Eff. Mar. 28, 1996.

330.1498p Discharge; notice; prerelease plan; refusal of parent or guardian to assume custody; petition.

Sec. 498p. (1) Upon periodic review of a hospitalized minor under section 498 *l*, or at any other time, if it is determined that the minor is no longer suitable for hospitalization, the director of the hospital shall discharge the minor from the hospital.

- (2) If a minor discharged under subsection (1) has been hospitalized under a court order, or if court proceedings are pending, the court shall be notified of the minor's discharge from the hospital.
- (3) The director of a hospital shall notify the appropriate executive director of the pending discharge of a minor not less than 7 days before the minor is discharged from the hospital.
- (4) Before a minor is discharged from a hospital under subsection (1), the executive director, with the assistance of the hospital, shall develop an individualized prerelease plan for the minor in accordance with section 209a.
- (5) If the parent or guardian of a minor admitted to a hospital under this chapter refuses to assume custody of the minor upon discharge of the minor from the hospital, the hospital director shall file or cause to be filed a petition in the juvenile division of the probate court alleging that the minor is within the provisions of section 2(b) of chapter XIIA of Act No. 288 of the Public Acts of 1939, being section 712A.2 of the Michigan Compiled Laws, to ensure that the minor is provided with appropriate management, care, and residence. Arrangements considered suitable by the hospital director and agreed to by the parent or guardian for care of the minor outside the home of the parent or guardian do not constitute refusal to assume custody of the minor.

History: Add. 1984, Act 186, Imd. Eff. July 3, 1984;—Am. 1995, Act 290, Eff. Mar. 28, 1996.

330.1498q Governing provisions.

Sec. 498q. Notwithstanding the provisions of chapter 4, the civil admission and discharge procedures for emotionally disturbed minors shall be governed by this chapter.

History: Add. 1984, Act 186, Imd. Eff. July 3, 1984.

330.1498r, 330.1498s Repealed. 1995, Act 290, Eff. Mar. 28, 1996.

Compiler's note: The repealed sections pertained to specialized units.

330.1498t Transporting minor for evaluation.

Sec. 498t. If a person who requests hospitalization of a minor under section 498d or 498h is unable, after reasonable efforts, to transport the minor for the evaluation required by section 498e, a request may be submitted to the court for an order to transport the minor. If the court is satisfied that a reasonable effort was made by the person requesting hospitalization to transport the minor for evaluation, the court must order a peace officer to take the minor into protective custody. After the minor is taken into protective custody, a peace officer or a security transport officer must transport the minor immediately to the evaluation site, and if necessary, from the evaluation site to the hospital for admission. The person requesting the transport order must meet the minor at the evaluation site and remain with the minor for the duration of the evaluation.

History: Add. 1988, Act 155, Imd. Eff. June 14, 1988;—Am. 2022, Act 146, Eff. (sine die);—Am. 2022, Act 214, Imd. Eff. Oct. 14, 2022.