



State of Wisconsin
2023 - 2024 LEGISLATURE

LRB-3783/1
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2023 SENATE BILL 722

November 21, 2023 - Introduced by Senator CABRAL-GUEVARA, cosponsored by Representatives SCHRAA, MAGNAFICI, MOSES, MURSAU and SAPIK. Referred to Committee on Mental Health, Substance Abuse Prevention, Children and Families.

AN ACT *to renumber* 51.01 (1); *to amend* 46.28 (1) (b), 49.45 (25) (am) 4., 51.37 (5) (a) and 51.37 (5) (b); and *to create* 51.01 (1d), 51.01 (8m), 51.37 (5) (bm) and 301.28 (3) of the statutes; **relating to:** active psychosis and mental health treatment for prisoners.

Analysis by the Legislative Reference Bureau

This bill provides that the Department of Corrections' training program for correctional officers must include training to identify symptoms of active psychosis among prisoners and training on how to report such symptoms to the superintendent of the correctional institution and to appropriate medical personnel at the correctional institution.

Under current law, DOC may authorize a voluntary transfer of a prisoner from a jail or prison to a mental health treatment facility if, in the opinion of a physician or psychologist of the jail, the prison, or DOC, the prisoner meets the requirements for the voluntary transfer. Under the bill, DOC may authorize a voluntary transfer if, in the opinion of a health care professional of the jail, the prison, or DOC, the prisoner meets the requirements for the voluntary transfer. The bill defines a "health care professional" as a physician, psychologist, registered nurse, licensed practical nurse, or physician assistant.

The bill also provides that DOC must authorize an emergency transfer of a

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prisoner from a prison or jail to a mental health treatment facility or the Wisconsin Resource Center if there is cause to believe the prisoner is in active psychosis and is a danger to himself or herself or to others. If 48 hours have passed since DOC authorized an emergency transfer of a prisoner in active psychosis, the bill requires the attending health care professional of the sending institution to evaluate the prisoner every 24 hours until the prisoner is transferred. Upon an emergency transfer of a prisoner from a prison or jail to a mental health treatment facility or the Wisconsin Resource Center, the correctional custodian and the attending health care professional of the sending institution must jointly execute a statement of emergency detention or a petition for emergency commitment for the prisoner and deliver it to the mental health treatment facility or the Wisconsin Resource Center. Under current law, only the correctional custodian of the sending institution must execute the statement of emergency detention or petition for emergency commitment.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 46.28 (1) (b) of the statutes is amended to read:

46.28 (1) (b) “Chronically disabled” means any person who is alcoholic, developmentally disabled, drug dependent, or mentally ill, as defined in s. 51.01 (~~4~~) (1h), (5), (8b), and (13), or any person who is physically disabled.

SECTION 2. 49.45 (25) (am) 4. of the statutes is amended to read:

49.45 (**25**) (am) 4. Is an alcoholic, as defined under s. 51.01 (~~4~~) (1h).

SECTION 3. 51.01 (1) of the statutes is renumbered 51.01 (1h).

SECTION 4. 51.01 (1d) of the statutes is created to read:

51.01 (**1d**) “Active psychosis” means a severe mental condition where an individual’s mental reality is separated from the individual’s physical reality and the individual experiences symptoms such as hallucinations or delusions.

SECTION 5. 51.01 (8m) of the statutes is created to read:

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51.01 (8m) "Health care professional" has the meaning given under s. 16.417 (1) (e).

SECTION 6. 51.37 (5) (a) of the statutes is amended to read:

51.37 (5) (a) When a ~~licensed physician or licensed psychologist~~ health care professional of a state prison, of a county jail, or of the department of corrections reports in writing to the officer in charge of a jail or institution that any prisoner is, in his or her opinion, mentally ill, drug dependent, or developmentally disabled and is appropriate for treatment as described in s. 51.20 (1), or is dangerous and is an alcoholic or a person who is drug dependent as described in s. 51.45 (13) (a) 1. and 2.; or that the prisoner is mentally ill, drug dependent, developmentally disabled or is an alcoholic and is in need of psychiatric or psychological treatment, and that the prisoner voluntarily consents to a transfer for treatment, the officer shall make a written report to the department of corrections which may transfer the prisoner if a voluntary application is made and the department of health services consents. If voluntary application is not made, the department of corrections may file a petition for involuntary commitment under s. 51.20 (1) or 51.45 (13). Any time spent by a prisoner in an institution designated under sub. (3) or s. 51.37 (2), 1983 stats., shall be included as part of the individual's sentence.

SECTION 7. 51.37 (5) (b) of the statutes is amended to read:

51.37 (5) (b) The department of corrections may authorize an emergency transfer of an individual from a prison, jail, or other criminal detention facility to a state treatment facility if there is cause to believe that the individual is mentally ill, drug dependent, or developmentally disabled and exhibits conduct which

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constitutes a danger as described in s. 51.20 (1) (a) 2. a., b., c., or d. of physical harm to himself or herself or to others, or is mentally ill and satisfies the standard under s. 51.20 (1) (a) 2. e. or is dangerous and is an alcoholic or a person who is drug dependent as provided in s. 51.45 (13) (a) 1. and 2. The department of corrections shall authorize an emergency transfer of an individual from a prison, jail, or other criminal detention facility to a state treatment facility or the Wisconsin Resource Center established under s. 46.056 if there is cause to believe that the individual is in active psychosis and exhibits conduct which constitutes a danger as described in s. 51.20 (1) (a) 2. a., b., c., or d. of physical harm to himself or herself or to others. The correctional custodian of the sending institution and the attending health care professional of the sending institution shall jointly execute a statement of emergency detention or petition for emergency commitment for the individual and deliver it to the receiving state treatment facility or the Wisconsin Resource Center established under s. 46.056. The department of health services shall file the statement or petition with the court within 24 hours after receiving the subject individual for detention. The statement or petition shall conform to s. 51.15 (4) or (5) or 51.45 (12) (b). After an emergency transfer is made, the director of the receiving facility or center may file a petition for continued commitment under s. 51.20 (1) or 51.45 (13) or may return the individual to the institution from which the transfer was made. As an alternative to this procedure, the emergency detention procedure in s. 51.15 or 51.45 (12) may be used, except that no prisoner may be released without the approval of the court which directed confinement in the

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institution. Any transportation expenses related to a transfer under this paragraph shall be paid for by the department of corrections.

SECTION 8. 51.37 (5) (bm) of the statutes is created to read:

51.37 (5) (bm) If an individual in active psychosis has not been transferred to a state treatment facility or the Wisconsin Resource Center established under s. 46.056 within 48 hours after the department of corrections authorized an emergency transfer under par. (b), the attending health care professional of the sending institution shall evaluate the individual every 24 hours until the individual is transferred.

SECTION 9. 301.28 (3) of the statutes is created to read:

301.28 (3) The training program approved by the department under sub. (2) (b) shall include a requirement that each correctional officer be trained to identify symptoms of active psychosis, as defined in s. 51.01 (1d), among prisoners and how to report such symptoms to the superintendent of the correctional institution and to appropriate medical personnel at the correctional institution.

(END)