



STATE OF CONNECTICUT

DEPARTMENT OF MENTAL HEALTH
AND ADDICTION SERVICES
A HEALTHCARE SERVICE AGENCY

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**Testimony of Michael Norko, M.D., Director
Whiting Forensic Division, Connecticut Valley Hospital
Before the Judiciary Committee
February 5, 2007**

Good afternoon, Senator McDonald, Representative Lawlor, and distinguished members of the Judiciary Committee. I am Dr. Michael Norko, Director of the Whiting Forensic Division of Connecticut Valley Hospital, and I am here today to speak in support of **H.B. 6390, An Act Concerning Treatment Options for Defendants Found Not Competent to Stand Trial.**

When defendants are found not competent to stand trial—which means that they are unable to aid and assist in their defense, due to a psychiatric disorder—they may be sent to a DMHAS facility for treatment for the purpose of restoring competency, if the court determines that there is a substantial probability that such treatment will lead to restoration of competency.

At various stages of the proceedings related to competency determination, the court may enter a determination that the defendant is not competent and that there is not a substantial probability that the defendant can be restored to competency within the time period permitted by law. These determinations are made under subsection (m) of CGS § 54-56d.

Under the existing statute, when a court determines that a defendant is not restorable, based on testimony from the court clinic evaluation team or the DMHAS treatment team working

with the individual, the court enters an order that the Commissioner of DMHAS **shall** apply for civil commitment of that individual in a psychiatric hospital. Under many circumstances, such an application is clinically appropriate and warranted. However, there are situations in which defendants are being managed appropriately in the community or are simply not appropriate candidates for civil commitment.

The existing statute gives no opportunity for the court or the Commissioner's staff to exercise discretion on this matter; thus, we are forced to apply for civil commitment for individuals for whom we legitimately believe there is no cause for such an application, usually because we believe that the individual can be managed in a less restrictive environment.

The changes included in this bill would allow the court to receive expert advice as to whether a defendant does or does not meet criteria for civil commitment, and would give the court the authority to either order the Commissioner to apply for civil commitment or order the Commissioner to provide services to the defendant in a less restrictive setting.

This bill thus creates a mechanism for the court to receive information about the appropriateness of civil commitment, and to reach a decision as to whether to order the Commissioner to seek civil commitment or to provide services without using civil commitment provisions. This bill will allow us to avoid burdening the probate court with civil commitment applications that are not warranted, and will give us a way to provide services in the community to appropriate individuals, in keeping with the recovery-oriented and client-centered focus of the DMHAS mission.

Thank you for the opportunity to address the committee today in support of H.B. 6390. I would be happy to answer any questions you may have at this time.