

# CLIENTS SERVED UNDER CHAPTER 611

## Direct Care and Treatment

Issue Date: December 9, 2025

Effective Date: December 23, 2025

DCT Policy Number: 215-1015

### **POLICY:**

Direct Care and Treatment (DCT) programs will provide care and treatment consistent with this policy to clients admitted under Minn. Ch. 611 following a finding of incompetency to stand trial on a criminal case.

### **AUTHORITY:**

[Minn. Stat. § 144.651 \(Health Care Bill of Rights\)](#)

[Minn. Stat. § 611.40-.59](#)

[Minn. R. of Crim. P., R. 20 \(Mentally Ill or Cognitively Impaired Defendants\)](#)

[Minn. R. of Juv. Delinquency P., R.20 \(Child Incompetent to Proceed and Defense of Mental Illness or Cognitive Impairment\)](#)

Minn. Stat. 253B.03 (Rights of Patients)

Minn. Stat. 253B.10, subd. 1 (Administrative Requirements)

Joint Commission Hospital Standard PC.01.01.01

### **APPLICABILITY:**

DCT-wide, excluding Outpatient Services

### **PURPOSE:**

To establish uniform procedures for serving individuals admitted under Minn. Ch. 611 after a finding of incompetency.

### **DEFINITIONS:**

Client admitted under Chapter 611 – a client DCT consented to admission for under Chapter 611 pursuant to [DCT Policy 210-1005, “Admissions under Chapter 611.”](#)

Emergency - a sudden, urgent, or unexpected occurrence or occasion requiring immediate action. Emergencies include but are not limited to imminent risk of harm, medical emergency, or expiration of a civil commitment.

Forensic Navigator – A person hired or contracted to facilitate competency attainment services, supervise certain defendants found to be incompetent, prepare bridge plans, and provide the other services under section [611.55, subdivision 3](#).

Leave Status- a patient is temporarily off-site from the facility for an approved reason, including medical treatment or recovery, attendance at court proceedings, or participation in short or extended visits. Individuals on Leave Status are expected to return as scheduled unless otherwise directed by medical providers, legal authorities, or facility policy.

Notice of Discharge - for the purposes of this policy, a notice of discharge includes a proposed discharge (a) from a secure treatment program to a non-secure treatment program; (b) a discharge to another DCT facility; (c) for an individual taken into custody by local or other law enforcement.

Refusal to Participate - an individual who is not meaningfully engaged in competency education services and the lack of engagement is not due to a cognitive impairment, the severity of their mental health symptoms, or a medical condition as determined by the clinical treatment team.

**PROCEDURES:**

- A. Clients referred for admission after a finding of incompetency under Minn. Ch. 611 will be admitted pursuant to [DCT Policy 210-1005, "Admissions Under Chapter 611."](#)
- B. Initiation of discharge for clients admitted to a DCT chapter 611 program.
  - 1. Non-Emergency Discharge
    - a) Clients admitted to a DCT Chapter 611 program only are discharged on a non-emergency basis when any of the below criteria apply:
      - (1) The client has been opined competent to stand trial by the assigned court examiner and the treatment team determines that discharge pending further court proceedings is medically appropriate.
      - (2) The client has been found competent to stand trial by the criminal court. See Procedures D of this policy.
      - (3) The client does not require the level of care provided at the Chapter 611 program, as determined by the treatment team and with the approval of the Competency Attainment Medical Director or designee, and an appropriate discharge plan has been developed.
      - (4) The client has been determined by the treatment team to be refusing to participate in competency attainment related treatment and has been consistently refusing to participate for two or more weeks despite ongoing attempts to engage client. The refusal is not due to a cognitive impairment, the severity of their mental health symptoms, or a medical condition as determined by the clinical treatment team. This is reviewed by the Competency Attainment Medical Director or designee.
      - (5) The client has been found by a criminal court to be unlikely to be restored to competency within the foreseeable future and the treatment team determines that discharge pending further court proceedings is medically appropriate. See Procedures E of this policy.
    - b) Clients admitted to a DCT Chapter 611 program and subject to civil commitment must be discharged in accordance with [MHSATS Policy 230-4010, "Provisional Discharge, Remote Provisional Discharge, and Community Holding Facility Provisional Discharge."](#)
    - c) When a client becomes appropriate for a non-emergency discharge, the treatment team/site discharge planner or designee notifies the Competency Coordinator or designee at [Competency.Attainment.Services.DCT@state.mn.us](mailto:Competency.Attainment.Services.DCT@state.mn.us).
    - d) The Competency Coordinator or designee completes the [Notice of Discharge Under Chapter 611 \(DHS-6618\)](#) form and submits to DCT Commitment Coordination team to e-file in the criminal case file(s). The Competency Coordinator notifies the Forensic Court Liaison at [fs.court.liaison.dhs@state.mn.us](mailto:fs.court.liaison.dhs@state.mn.us) of the proposed discharge plan and anticipated timeframe for the discharge.
      - (1) When a client is being discharged to a location other than a jail or correctional facility, this form will be e-filed no less than five business days prior to the date of discharge, not including the day of filing.

- (2) If a client has an active criminal hold or bail conditions in place at the time of proposed discharge, other than discharge to a jail or locked setting, staff coordinates with the Competency Coordinator and Forensic Navigator to ensure that bail conditions or criminal holds are resolved prior to discharge.
- (3) When a client is being discharged to a jail or correctional facility, the form will be e-filed five business days prior to discharge not including the day of filing, when possible, but otherwise will be e-filed prior to the discharge occurring.
- (4) In the event that a court orders a client be discharged from a Chapter 611 treatment program in a timeframe shorter than what is provided for in this section, DCT will comply with the discharge timeframe in the court order. If a discharge notice has not yet been filed, one will be filed as soon as possible.

## 2. Emergency Discharge

- a) Clients may only be discharged on an emergency basis with the approval of the Competency Attainment Medical Director or designee.
- b) When the treatment team is considering an emergency discharge, the designated DCT site staff must notify the Competency Attainment Medical Director or designee and Competency Coordinator Supervisor or designee to request a consultation. The consultation will be completed by DCT Competency Attainment Leadership staff, including the Competency Attainment Medical Director, the DCT site Medical Director (or designee) and DCT General Counsel's office (GCO) staff.
- c) When a client has been deemed appropriate for emergency discharge, the Competency Attainment Medical Director or designee notifies the designated DCT treating site and the Competency Coordinator or designee within 24 hours of the determination to proceed with an emergency discharge.
- d) The Competency Coordinator or designee completes the [Notification of Emergency Discharge from Chapter 611 Program \(DHS-6629\)](#) form and submits to the DCT Commitment Coordination team to e-file in the criminal case file(s). The Competency Coordinator notifies the Court Liaison of the proposed discharge plan and anticipated timeframe for the discharge.
  - (1) This form will be e-filed as soon as possible and whenever possible at least 24 hours prior to the emergency discharge.
  - (2) A client taken into custody by local or other law enforcement may be discharged under the emergency discharge process, if all discharge criteria has been met.
- e) The designated DCT treating site staff will notify the Executive Medical Director and the GCO of all emergency discharges within 24 hours of the decision to discharge.
- f) Clients also subject to civil commitment must be discharged in accordance with [MHSATS Policy 230-4010, "Provisional Discharge, Remote Provisional Discharge, and Community Holding Facility Provisional Discharge."](#)

## 3. Leave Status

- a) In the event a client is placed on leave status the treating site with notify the DCT

Commitment Coordination team and the Competency Coordinator Supervisor or designee at Competency.Attainment.Services.DCT@state.mn.us within 24 hours of the leave.

- (1) If applicable, the designated DCT treating site staff notify the client's County Case manager and/or Forensic Navigator and guardian (if applicable) of client's medical pass per [MHSATS Policy 315-4240, "Emergency Medical Response – Client"](#) or [MHSATS Policy 315-4230, "Emergency Medical Response – Patient."](#)
  - (2) If applicable, the designated DCT treating site staff notify the client's County Case manager and/or Forensic Navigator and guardian (if applicable) of client's elopement per [MHSATS Policy 415-4040, "Elopement Prevention and Response."](#)
- b) The Competency Coordinator Supervisor or designee will provide criminal case file(s) to the DCT Commitment Coordination team to complete the [Change of Status Report \(DHS-1185\)](#) and e-file in the criminal case file(s). The Competency Coordinator Supervisor or designee notifies the Forensic Court Liaison at fs.court.liaison.dhs@state.mn.us of the leave status.
- c) When the client returns from leave status to a DCT program, the treating site will notify the DCT Commitment Coordination team and the Competency Coordinator Supervisor or designee at Competency.Attainment.Services.DCT@state.mn.us within 24 hours of the clients return.
- (1) If applicable, the designated DCT treating site staff notify the client's County Case manager and/or Forensic Navigator and guardian (if applicable) of client's return from medical pass per [MHSATS Policy 315-4240, "Emergency Medical Response – Client"](#) or [MHSATS Policy 315-4230, "Emergency Medical Response – Patient."](#)
  - (2) If applicable, the designated DCT treating site staff notify the client's County Case manager and/or Forensic Navigator and guardian (if applicable) of client's return from elopement per [MHSATS Policy 415-4040, "Elopement Prevention and Response."](#)
- d) The Competency Coordinator Supervisor or designee will provide criminal case file(s) to the DCT Commitment Coordination team to complete the [Change of Status Report \(DHS-1185\)](#) and e-file in the criminal case file(s). The Competency Coordinator Supervisor or designee notifies the Forensic Court Liaison at fs.court.liaison.dhs@state.mn.us of the return to a DCT program.

#### C. Refusal to Participate

1. When a client refuses to participate in competency attainment programming, the designated treating site staff notify the Competency Attainment Medical Director and the Competency Coordinator or designee to request consultation. The consultation will be completed by DCT Competency Attainment Leadership staff, including the Competency Attainment Medical Director, the DCT site Medical Director (or designee) and DCT GCO staff.
2. The Competency Coordinator or designee promptly informs any entity assigned to supervise the individual, including the Forensic Navigator, that the individual is refusing to participate.

3. The Competency Coordinator or designee also notifies the referring criminal court(s) of the individual's refusal to participate and proposed discharge plan by completion of the [Notice of Discharge Under Chapter 611 \(DHS-6618\)](#) and submission to DCT Commitment Coordination team to e-file in the criminal case file(s). The Competency Coordinator notifies the Court Liaison of the proposed discharge plan and anticipated timeframe for the discharge.
4. If the treatment team is not recommending discharge, the competency coordinator or designees notifies the referring criminal courts of the individual's refusal to participate by completion of the [Notification of Refusal Under Chapter 611 \(DHS-7166\)](#) and submission to DCT Commitment Coordination team to e-file in the criminal case file(s).

D. Effect of a Finding of Competency - When a client is found competent to stand trial by a criminal court, the program works to discharge the individual in a manner consistent with the referring court order(s) and following the process laid out in Procedures B of this policy, and the applicable service line discharge policy (see references).

1. If a client remains subject to bail or other criminal court hold conditions, the program will work with the Forensic Navigator and county staff as needed to promptly discharge the individual back to jail custody. If the client is subject to commitment under 253B, discharge will occur consistent with the applicable service line discharge policy (see references) and any applicable court orders.
2. If a client is not subject to bail or other criminal court hold conditions or commitment under 253B, the program will work with the Forensic Navigator and any county support staff involved to promptly identify a plan for discharge to the community.
  - a) Clients not subject to bail or other criminal court hold conditions will be asked to consent to voluntary temporary treatment if a discharge plan is not immediately available via [Information and Notice of Rights - Voluntary Admission \(DHS-2596\)](#).
  - b) If the client declines voluntary treatment, the treating clinician will assess if the client meets emergency hold criteria. The treating clinician will notify the GCO and complete the [Emergency Hold Order Application \(DHS-2597\)](#).
3. If a court order finding a client competent to stand trial includes language requiring the immediate release of a client from competency programming, the Chapter 611 program will comply with the language of that court order. If the client is subject to commitment under 253B discharge will occur consistent with the applicable service line discharge policy (see references).

E. Effect of a Finding of Not Likely to be Restored - When a client is found unlikely to attain competency under Minn. Stat. 611.49 by a criminal court, the program will work to discharge the client in a manner consistent with the referring court order(s) and following the process laid out in Procedures B of this policy and the applicable service line discharge policy (see references).

1. If a client remains subject to bail or other criminal court hold conditions, the program will work with the Forensic Navigator and county staff as needed to promptly discharge the individual back to jail custody. If the client is subject to commitment under 253B, discharge will occur consistent with the applicable service line discharge policy (see references) and any applicable court orders.
2. If a client is not subject to bail or other criminal court hold conditions or commitment under 253B, the program will work with the Forensic Navigator and any county support staff involved to promptly identify a plan for discharge to the community. Clients not subject to bail or other criminal court hold conditions will be asked to consent to voluntary temporary treatment if a

discharge plan is not immediately available via [Information and Notice of Rights - Voluntary Admission \(DHS-2596\)](#).

3. If the client declines voluntary treatment, the treating clinician will assess if the client meets emergency hold criteria. The treating clinician will notify the GCO and complete the [Emergency Hold Order Application \(DHS-2597\)](#). If a court order finding a client unlikely to be restored includes language requiring the immediate release of a client from competency programming, the Chapter 611 program will comply with the language of that court order. If the client is subject to commitment under 253B discharge will occur consistent with the applicable service line discharge policy (see references).

- F. Rights of Clients Admitted Only Under Chapter 611 – Clients admitted only under Minn. Stat. Ch. 611 (who are not subject to civil commitment or a pending civil commitment petition under Minn. Ch. 253B) possess the rights contained in Minn. Stat. § 144.651 (Patient’s Bill of Rights), as applicable to the program where they are admitted. Clients will receive a copy of Minn. Stat. § 144.651 upon admission and at any thereafter time at their request.

#### **REVIEW:**

[Biennially](#)

#### **REFERENCES:**

[MHSATS Policy 230-4010, “Provisional Discharge, Remote Provisional Discharge, and Community Holding Facility Provisional Discharge”](#)

[MHSATS Policy 230-4005, “Discharge”](#)

[MHSATS Policy 230-4010, “Provisional Discharge Remote PD and Comm Hold Facility PD”](#)

[CBS Policy 230-2100, “Development of Provisional Discharge Remote Provisional Discharge”](#)

[CBS Policy 230-2300, “Discharge”](#)

[FS Policy 230-3000, “Prov Discharge Revocation and Voluntary Return for MI CD and DD Commitments”](#)

[FS Policy 230-3005, “Provisional Discharge Revocation and Voluntary Return for MID SDP and SPP”](#)

[FS Policy 230-3010, “Discharge and Transition to Community Planning”](#)

[MSOP Policy 230-5100, “MSOP Departure”](#)

[Information and Notice of Rights - Voluntary Admission \(DHS-2596\)](#)

[Emergency Hold Order Application \(DHS-2597\)](#)

[Notice of Discharge Under Chapter 611 \(DHS-6618\)](#)

[Notification of Emergency Discharge from Chapter 611 Program \(DHS-6629\)](#)

[Notification of Refusal Under Chapter 611 \(DHS-7166\)](#)


[Change of Status Report \(DHS-1185\)](#)

#### **ATTACHMENTS:**

None

#### **SUPERSESSON:**

DCT Policy 215-1015, “Clients Served Under Chapter 611”, December 10, 2024

/s/ 

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/s/ 

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