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| **STATE OF WISCONSIN CIRCUIT COURT**  **BRANCH** | **COUNTY** | For Official Use |
| In the Matter of the Mental Condition of:  Case No.     ME  CLIENT  Alleged to be in need of an involuntary  mental commitment. | |
| **MOTION TO DISMISS PETITION** | | |

The respondent, CLIENT, appearing specially by Atty.      , moves to dismiss the petition for failing to comply with the requirements of Wis. Stat.   
§ 51.20(1)(ar).

The petition, filed by the County on DATE, fails to comply with the requirements of Wis. Stat. § 51.20(1)(ar). CLIENT is an inmate at the Wisconsin Resource Center, a state prison. The statute provides that “the petition ***may***allege that the inmate is mentally ill, is a proper subject for treatment and is in need of treatment” (emphasis added) as an option for commitment when the subject individual is an inmate. However, the statute requires for an individual who is an inmate:

The petition ***shall*** allege that appropriate less restrictive forms of treatment have been attempted with the individual and have been unsuccessful and it ***shall*** include a description of the less restrictive forms of treatment that were attempted. The petition ***shall*** also allege that the individual has been fully informed about his or her treatment needs, the mental health services available to him or her and his or her rights under this chapter and that the individual has had an opportunity to discuss his or her needs, the services available to him or her and his or her rights with a licensed physician or a licensed psychologist. The petition ***shall*** include the inmate's sentence and his or her expected date of release as determined under s. 302.11 or 302.113, whichever is applicable. The petition ***shall*** have attached to it a signed statement by a licensed physician or a licensed psychologist of a state prison and a signed statement by a licensed physician or a licensed psychologist of a state treatment facility attesting either of the following:

1. That the inmate needs inpatient treatment at a state treatment facility because appropriate treatment is not available in the prison.

2. That the inmate's treatment needs can be met on an outpatient basis in the prison.

(emphasis added)

The petition fails to comply with these requirements for an inmate that “shall” apply regardless of how the county “may allege” the petition.

Dated at      , Wisconsin, this       day of      , 20     .

Respectfully submitted,

Electronically signed by Attorney

Attorney, Bar No.

Attorney for Respondent

State Public Defender's Office

Address

Address

Phone