

## OUTPATIENT COMMITMENT (OPC) V. GUARDIANSHIP

\*Updated 1/13/2017\*

### OUTPATIENT COMMITMENT (OPC)

1. Impairment in functioning (i.e. effective decision making regarding treatment, personal care, health & safety) may be acute or chronic.
2. Must have a physician willing to complete an Affidavit of Mental Illness
3. Problems in functioning is directly related to an individual's mental illness.
4. Other clinical means have been attempted to increase engagement in treatment
5. Criteria under ORC 5122.01 is met
6. Unlikely to survive safely in the community without added supervision to support positive/healthy/safe decisions for self
7. NO criminal court involvement
8. The individual has previously failed attempts to living in the community and is directly linked to non-adherence to treatment recommendations
9. The individual expresses an interest to live in the community
10. The individual has demonstrated a benefit from treatment in the past
11. Does not present with an active substantial risk of physical harm to self or others
12. Treatment recommendations are likely to improve functioning in the community, and court oversight is assumed as a supportive addition to these recommendations
13. The individual has capacity to understand and stipulate to the involuntary commitment to OPC
14. The individual has the capacity to cooperate with the involuntary treatment in the community

### GUARDIANSHIP

1. Impairment in functioning (i.e. effective decision making regarding personal care, health and safety) is chronic.
2. Must have a physician willing to complete an Affidavit of Mental Illness
3. Problems in functioning is directly related to an individual's mental illness.
4. Consideration when natural supports and other alternatives are not available or appropriate
5. Guardianship Decision Tree AND Guardianship-CPST Responsibility Chart has been followed.
6. Unlikely to survive safely in the community without a guardian to make decisions impacting his/her health/safety/wellbeing.
7. May/may not have criminal court involvement
8. The individual continuously struggles to safely live in the community. This may be related to non-adherence to treatment recommendations.
9. Potential guardian and providers agree to work to achieve least restrictive setting that individual can be successful in.
10. Even with treatment in place, chronic instability remains and impacts treatment.
11. Does not present with an active substantial risk of physical harm to self or others
12. All treatment recommendations have been attempted and the individual continues to struggle to live safely in the community.
13. The individual does not have the capacity to understand and/or stipulate to the court proceedings and a guardian is needed to look-out for his/her best interest
14. The individual lacks insight into their mental illness, which impacts his/her ability to make safe decisions on his/her own.
15. Must be a clt of a StarkMHAR provider agency