

**COURT OF APPEALS
DECISION
DATED AND RELEASED**

March 11, 1997

A party may file with the Supreme Court a petition to review an adverse decision by the Court of Appeals. See § 808.10 and RULE 809.62(1), STATS.

NOTICE

This opinion is subject to further editing. If published, the official version will appear in the bound volume of the Official Reports.

No. 96-2091

STATE OF WISCONSIN

**IN COURT OF APPEALS
DISTRICT III**

**IN THE MATTER OF ALLISON S.C.,
ALLEGED MENTALLY ILL:**

MARATHON COUNTY,

Petitioner-Respondent,

v.

ALLISON S.C.,

Respondent-Appellant.

APPEAL from an order of the circuit court for Marathon County:
RAYMOND F. THUMS, Judge. *Affirmed.*

MYSE, J. Allison S.C. appeals an order for involuntary commitment for six months and the involuntary administration of psychotropic medication based upon the court's finding that Allison was mentally ill and that there was a substantial probability of physical impairment or injury to herself because her judgment was so impaired by her psychotic episodes. Allison contends that there was insufficient evidence to support the court's finding that she was a danger to herself. Because this court concludes there is sufficient evidence to support the court's findings of fact, the order of involuntary commitment is affirmed.

Allison S.C. was first taken to the Marathon County Health Care Center when she presented herself at the county jail asking to speak with an officer. Officer Frederick Peters, who had past contact with Allison, talked with her at the jail concerning her request that she be taken to the Health Care Center. Allison indicated that neighbors living below her were involved in Satanism, that her former boyfriends, whom she could not identify, had installed video cameras in her bedroom to monitor her sex life and that people were stalking her. In response to Peter's questions, Allison indicated that she was considering suicide but had taken no steps to harm herself. Peters took her to the Marathon County Health Care Center where she was detained pursuant to an emergency detention proceeding before a Marathon County court commissioner.

Michael Galli, a psychologist, and Sheldon Schooler, a psychiatrist, examined Allison and testified at the hearing for involuntary commitment concerning their observations. Both doctors indicated that Allison was having psychotic episodes, was delusional, appeared unwilling to take medication on a regular or routine basis, that the medical records indicated she expressed thoughts of suicide to some identified staff person and that she was unable to care for herself because of her psychotic condition and her inability to regularly medicate herself on a voluntary basis.

The court found that Allison suffered from thought disorganization and judgment deficit and that her judgment impairment was such that there was a substantial probability of physical impairment or injury. The court ordered her involuntary commitment for a period of six months and that she be involuntarily medicated in accordance with the doctors' treatment protocol.

Both sides acknowledged that because Allison has served the six months' involuntary commitment ordered by the court the case is moot. Allison requests that we nonetheless address the issues presented so as to clarify the evidence necessary to sustain an order for involuntary commitment for future cases. This court has the discretion to address issues that are otherwise moot when the issues presented are of great public importance or are likely to arise again yet evade review because the appellate process cannot be completed in time to have a practical legal effect on the parties. *In re Shirley J.C.*, 172 Wis.2d 371, 375, 493 N.W.2d 382, 384 (Ct. App. 1992). Because the issues in this case are

likely to arise again yet evade review because the appellate process cannot be completed in time to have a practical legal effect on the parties, the court will exercise its discretion and address the issue presented on its merits.

Allison vigorously argues that there is insufficient evidence to support the court's finding that she was likely to harm herself. Allison argues that the statement that she had contemplated suicide in response to Peters' question is an insufficient basis for such a finding because she made no attempt to harm herself, that it was a single isolated threat made on a single occasion at some time in the past so as not to be persuasive of her state of mind at the time of the hearing and that the doctors' references to her discussion of suicide with a staff person is inadmissible hearsay which could not be properly considered by the court.

These arguments fail for two reasons. First, the evidence of suicidal thoughts expressed to Peters and to an undesignated staff person are a sufficient basis for a court to conclude that Allison presented a danger to herself. These statements were allegedly made at the time of her temporary commitment. The fact that a woman with a long history of mental problems who was experiencing psychotic episodes contemplated suicide presents a sufficient evidentiary basis for the court to make the necessary finding that she presented a danger to herself, even though the threats were made in response to a police inquiry and made at the time of her temporary detention and not repeated since.

Allison argues that the statement made to an undesignated staff person as testified from the medical records by both physicians who examined Allison is inadmissible hearsay. This court does not agree. The medical records relied upon by a physician in his treatment of a patient are admissible as evidence under § 907.03, STATS.

The second and more compelling reason that Allison's argument must fail is that the trial court did not rely solely on the finding of harm to herself in ordering her involuntary detention. The trial court concluded that her judgment was impaired by virtue of her psychotic episodes and that the impairment presented a substantial probability of physical impairment or injury. There is ample evidence in the record to support such a finding.

Doctors Schooler and Galli both testified to her severe mental illness at the time of their examinations. She was delusional and was experiencing psychotic episodes. This mental illness was so extensive that Allison appeared unable and unwilling to take the necessary medication to stabilize her condition and that without such medication she would be unable to care for herself. The doctors' opinions and Allison's frank concession that there was ample evidence to support the finding that she was experiencing a severe mental illness up to and at the time of hearing as well as the doctors' opinions in regard to her impaired judgment are all sufficient to support the court's findings that her mental illness was sufficiently severe that there was a substantial probability of physical impairment or injury.

Allison argues that this standard is not met if there is a reasonable probability that the individual will avail herself of care at an appropriate treatment facility. Section 51.20(1)(a)2.c, STATS. Allison suggests that she would avail herself of the appropriate care necessary at some future time because she initially asked to be taken to the health care center.

The problem with this argument is two-fold. First, the doctors opined that her thoughts were so disorganized, her psychotic condition and delusions so severe that she could not make appropriate judgments about her own welfare and safety. Moreover, after being institutionalized on a temporary basis she refused to accept the treatment offered, refused to agree to medication necessary to her condition and refused to cooperate with the physicians offering health care. Indeed, the extent of her delusions was so great that the social worker indicated that Allison could not tell the date or time correctly.

Sufficient evidence exists to support the trial court's findings of fact which we are required to review under a clearly erroneous standard. Section 805.17(2), STATS. This record amply supports the findings made by the trial court in regard to Allison's condition, the extent of her psychotic illness and the substantial probability that this illness would cause physical impairment or injury.

Allison contends that her involuntary detention for a temporary six-month period represents shoddy and unacceptable conduct by those involved. This court cannot agree. A person experiencing severe psychotic

episodes who acknowledged on two occasions contemplating suicide should have received inpatient treatment even on an involuntary basis. Indeed, had the police ignored the substantial warning signs that she was unable to care for herself in any meaningful way, those who were involved may have been properly criticized for ignoring an individual in dramatic need of treatment. There is nothing to support the assertion that those involved in Allison's treatment and care did anything other than protect her best interests. The order for involuntary detention for six months and for the involuntary administration of drugs is affirmed.

By the Court. – Order affirmed.

This opinion will not be published. RULE 809.23(1)(b)4, STATS.