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**DISTRICT II**

June 20, 2018

To:

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Circuit Court Judge  
521 W. Riverview, Room JC 103  
Waukesha, WI 53188-3636

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Waukesha, WI 53186-4748

You are hereby notified that the Court has entered the following opinion and order:

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2018AP460-NM

In the matter of the mental commitment of K.R.H.:  
Waukesha County v. K.R.H. (L.C. #2004ME461)

Before Neubauer, C.J.<sup>1</sup>

**Summary disposition orders may not be cited in any court of this state as precedent or authority, except for the limited purposes specified in WIS. STAT. RULE 809.23(3).**

K.R.H. appeals WIS. STAT. ch. 51 orders committing her to the custody of Waukesha County for outpatient mental health care to include being involuntarily medicated, should she not consent to its administration. Her appellate counsel has filed a no-merit report pursuant to WIS.

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<sup>1</sup> This appeal is decided by one judge pursuant to WIS. STAT. § 752.31(2)(d) (2015-16). All references to the Wisconsin Statutes are to the 2015-16 version unless otherwise noted.

STAT. RULE 809.32 and *Anders v. California*, 386 U.S. 738 (1967). K.R.H. was provided a copy of the report but has submitted no response. Upon consideration of the report and an independent review of the record, we are satisfied that the appeal has no merit. We summarily affirm the orders, *see* WIS. STAT. RULE 809.21, and grant counsel's motion to withdraw.

K.R.H. has a nearly four-decade history of mental illness. Since an emergency detention in 2004, she has had four inpatient commitments, the most recent in 2008. Since then, she has been committed with conditions as an outpatient.

In April 2017, the County filed a petition to extend K.R.H.'s current commitment. She was examined by a psychiatrist and a psychologist. Both doctors opined that K.R.H. continues to suffer from a mental illness, that she would be a proper subject for commitment if treatment was withdrawn, and that she was a proper subject for treatment with psychotropic medication. Both advised her of the advantages and disadvantages of her medications and noted that K.R.H. is incapable of applying an understanding of the medications' benefits and drawbacks. Both observed that K.R.H. does not believe she is mentally ill but, instead, that her medications cause her psychiatric symptoms. Both doctors recommended an extension of her commitment and an involuntary medication order.

At the commitment-extension hearing, K.R.H., through counsel, stipulated to the doctors' reports and findings and to the County's report. K.R.H. opted not to testify but stated, again through counsel, that she wanted to be free from the County's doctors' "evil judgment" and does not want to continue her medications as they make her physically sick. The circuit court extended her commitment and issued an order for involuntary medication. This no-merit appeal followed.

The no-merit report considers whether: (1) proper procedures were used in obtaining a hearing for a commitment extension and an involuntary medication order; (2) sufficient evidence was presented at the commitment-extension hearing to adequately support the commitment order; and (3) sufficient evidence was presented at the commitment-extension hearing to allow a finding that K.R.H. was not competent to refuse medication or treatment.

We agree with appellate counsel that these issues do not have arguable merit for appeal. The circuit court followed the applicable statutory procedures and the time limits set forth in WIS. STAT. ch. 51. *See generally* WIS. STAT. §§ 51.15 and 51.20. Both mental health professionals' reports established by clear and convincing evidence that, to a substantial probability, K.R.H. continues to exhibit behavior indicating that she is mentally ill and poses a danger to herself or others, that her illness likely can be controlled by medication administered on an outpatient basis, and that she is not competent to refuse medication or treatment. *See* § 51.20(1)(a)2., (13)(a), (e).

Based on the doctors' and the County's reports, the circuit court found that the County proved by clear and convincing evidence that K.R.H. is mentally ill, continues to be treatable and to meet the recommitment standard for dangerousness, can continue to be treated on an outpatient basis, essentially is incapable of making an informed choice about medications,<sup>2</sup> and thus is incompetent to refuse them. *See* WIS. STAT. § 51.20(1)(a)1.-2., (13)(e). The court's

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<sup>2</sup> The court noted she has "falsely placed" notions that her medications cause her mental illness and are responsible for all of her physical ailments and about her desire to resume taking Lithium, which led to a past hospitalization due to Lithium toxicity.

findings are not clearly erroneous and must be upheld. *See Milwaukee Cty. Combined Cmty. Servs. Bd. v. Athans*, 107 Wis. 2d 331, 336, 320 N.W.2d 30 (Ct. App. 1982).

Our review of the record discloses no other potential issues for appeal. Accordingly, this court accepts the no-merit report, affirms the orders, and discharges appellate counsel of the obligation to represent K.R.H. further in this appeal.

Upon the foregoing reasons,

IT IS ORDERED that the orders for outpatient commitment and for involuntary medication are summarily affirmed. *See* WIS. STAT. RULE 809.21.

IT IS FURTHER ORDERED that Attorney Gregory Bates is relieved from further representing K.R.H. in this appeal. *See* WIS. STAT. RULE 809.32(3).

IT IS FURTHER ORDERED that this summary disposition order will not be published.

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*Sheila T. Reiff*  
*Clerk of Court of Appeals*