

# Assisted Outpatient Treatment General Steps and Roles



This resource is a general overview of the steps and responsibilities relating to AOT orders. It is by no means a comprehensive representation of what every individual's AOT journey will look like, as each case is different depending on where that individual lives, what their history with serious mental illness is, and what community and human resources that individual has around them. This document will be updated quarterly. **Please send any feedback about this brief to [cbhj@wayne.edu](mailto:cbhj@wayne.edu).**

**1** **Individual** identified as potential candidate for **AOT**. Find out who is best suited [here](#). AOT should only be used after other, less restrictive treatment engagement options have been tried.

**Individual** | **CMH** | **Court** | **Law Enforcement** | **Inpatient psych** | **Hospital ED** | **Psychiatrist** | **Families/Advocates**

Can petition

**2** Petition filed with **probate court** for either combined AOT order (AOT and hospitalization) or AOT only. If asking for hospitalization, 2 clinical certificates are required. If a transport order for evaluation is deployed, **law enforcement** is to take individual for an evaluation. If an individual is currently in an inpatient unit, they can defer the order. See [court process map](#)

- Court**: Appoints attorneys, Schedules hearing within 7 days, Deploys transport order if necessary
- Law Enforcement**: Executes transport order for assessment if necessary
- Inpatient psych**: Assesses individual if hospitalization requested and provides clinical certificate, Schedules deferment conference if applicable

**3** Hearing happens. Petition is dismissed, or the judge grants either a combined order or an AOT-only order. **Court sends order to psychiatric hospital or unit** (if combined order) **and to CMH** to oversee and develop individualized plan of service (IPOS) and coordinate delivery.

- Psychiatrist**: Testifies at hearing
- Court**: Grants order, Sends order to CMH and hospital if applicable
- CMH**: Assumes responsibility for connection to and delivery of ordered services for AOT only, and once released from inpatient for combined orders, Oversight of individual's progress and communication with the court

**4** If hospitalization is ordered, **the psychiatric hospital or unit must notify CMH and court 5 days prior to individual being discharged**. The **psychiatric hospital or unit and CMH work together** to ensure that service coordination and delivery are in place immediately after discharge.

- Psychiatric Hospital/Unit**: Ensure hospital treatment records are complete, including medications
- CMH**: Coordinates with CMH in discharge planning
- CMH**: Engages client immediately after hospital discharge for warm hand-off into community services

**5** **CMH works with individual** to create an individualized plan of service, connects them to resources, provides case management, documents regular encounters and fidelity to the IPOS.

- Individual**: Participates in treatment plan development with CMH case worker
- CMH**: Works with individual to create treatment/case management plan
- Court**: Receives confirmation of case management plan from CMH

**6** If the **individual is not adhering to treatment**, a notice of noncompliance is sent to the **court** from the case manager with a demand for hearing. An order for examination/ transport can be issued to get individual reevaluated. **Law enforcement** executes transport order and takes the **individual** for assessment or hospitalization

- CMH**: Files noncompliance court documents
- Court**: Arranges hearing
- Law Enforcement**: Executes transport order if necessary to either evaluation or inpatient hospitalization
- Psychiatrist**: Facilitates a psych assessment at a designated assessment center
- Psychiatric Hospital/Unit**: Admits to inpatient care

**7** If the **CMH** or their contracted providers are not providing the services ordered, the individual and/or their **family/advocate** can demand a hearing. The **judge** can hold a show cause hearing to ask why the **CMH** is violating the court order.

- Individual/Family/Advocate**: Demand a hearing
- Court**: Hold show cause hearing and can hold CMH accountable if they have not been providing services
- CMH**: Must be present at show cause hearing

**8** **Case manager to note when order is due to expire, and then coordinate with system of care and the individual to determine if an extension is warranted**. If extension needed, case manager to file extension paperwork. Alternatively, **an individual can be discharged from their AOT order prior to the expiration** if the individual and their clinical team feel they have improved to the point of engaging in voluntary treatment.

- CMH**: Files necessary paperwork for an AOT extension if it is deemed advantageous
- Court**: Grants or denies extension
- Individual**: Continues to participate in treatment and treatment planning