Practice Standards

December, 2012

Section XXI, Representation of a Respondent in Proceeding for Involuntary Commitment – Alcoholism

1. TRAINING AND COMPETENCY:

A. A public defender assigned to represent a respondent in an involuntary commitment proceeding shall have a thorough understanding of involuntary commitment law, as well as the specifics of §53-24-303 and 304, MCA, and of the chemical dependency and mental health systems.

B. To be eligible for assignment to represent respondents in involuntary commitment proceedings, counsel shall demonstrate proficiency or receive training in the duties, skills, and ethics of representing involuntary commitment respondents, including supervised on-the-job training and visits to a variety of treatment facilities including the Montana Chemical Dependency Center, community service providers, and sober living group homes within the area served by the public defender if applicable. Counsel shall utilize training and support provided by the Office of the State Public Defender.

C. Counsel shall have basic knowledge of alcoholism and chemical dependence and the ability to read and understand medical terminology related to chemical dependence, addiction, alcoholism, and the medical and recovery treatment models. Counsel shall be familiar with the medications used to treat alcoholism, addiction, and chemical dependence. Counsel shall be familiar with the roles of intervention, treatment, voluntary abstinence, and support groups in long-term abstinence and recovery. Counsel shall be aware of how chemical dependence, addiction, or active alcoholism will affect attorney-client communications and shall recognize that effective communication may require special efforts on the part of counsel.

D. Counsel should be familiar with other resources for persons who are addicted to alcohol or other drugs available either within the area served by the public defender or reasonably accessible by respondents. Included in these resources are recovery programs, such as twelve step recovery programs, public and private medical and treatment facilities. Counsel should be familiar with the local recovery community and locate resources and supports for respondents.