IN THE COURT OF COMMON PLEAS OF LYCOMING COUNTY, PENNSYLVANIA

IN RE: YVONNE HILLER, a person : NO. 15-80,023 Alleged to be mentally disabled :

OPINION AND ORDER

:

Respondent is an inmate at the State Correctional institution at Muncy. She was committed to Muncy and is now serving a life sentence as a result of a first degree murder conviction. She was institutionalized at Muncy on October 10, 2012. By Order of Court dated May 22, 2015, the Court directed that she remain involuntarily committed for a period of no longer than sixty days following April 30, 2015 to the Mental Health Unit at Muncy and complete an involuntary inpatient commitment including medication as directed.

On August 11, 2015, Muncy filed a petition to involuntarily commit and treat the Respondent for an additional sixty days pursuant to 50 P.S. §7305. According to the petition which was verified by Patricia Lockridge, a licensed social worker employed at the prison, and Dr. Robert Sena, a psychiatrist contracted by the Department of Corrections, the Respondent remains delusional, she lacks insight concerning her need for medication in order to get healthy, and she must continue treatment.

On August 12, 2015, a hearing was held before Steve Sholder, Esquire, a mental health review officer. Respondent was found to be severely mentally disabled and in need of inpatient treatment and committed to the Mental Health Unit at Muncy for a period not to exceed sixty days.

By Order of Court dated August 12, 2015, upon consideration of the report of Mr. Sholder, President Judge Nancy Butts of the Court of Common Pleas of Lycoming County,

directed that Respondent be committed for additional treatment not to exceed sixty days.

Respondent subsequently filed a petition for review. The argument on said petition was held before the Court on August 21, 2015. The Court was provided with the initial petition, along with the verifications, along with an audio tape of the hearing before Mr. Sholder. The Court reviewed the audio tape.

Ms. Lockridge testified that the Respondent's paranoid delusions and her noncompliance with her medication are the overriding issues. While the Respondent is taking care of her hygiene needs, eating and drinking appropriately, and interacting with others appropriately, she is reluctant to take her medication and still exhibits paranoid delusions.

Dr. Sena testified that he has been treating the Respondent since April 30, 2015. He testified in detail regarding statements that the Respondent recently made to him which exhibit paranoia and a reluctance to take her Risperdal.

The Respondent had been taking Haldol by injection. Because of the side effects of the Haldol it was discontinued and the Respondent was prescribed Risperdal. She takes one milligram in the morning and three milligrams at night. According to Dr. Sena, the full effects of the Risperdal will "not happen until a few weeks".

Unfortunately for the Respondent and according to Dr. Sena, she is reluctant to take her medication because it "disturbs" her in connection with "her religion". As well, the Respondent claims that the side effects of the Risperdal are the same as the Haldol, which is not correct. Finally, and perhaps most importantly, the Respondent claims that other individuals are sabotaging her time in the law library, medical staff are advising her of the wrong effects of the medication,

and while she is not being disturbed by any toxins, she "doesn't know what will happen when [she] leaves" the Mental Health Unit and goes into general population.

Unfortunately, Respondent's delusions contributed to her prior criminal conduct. Dr. Sena testified that when she was previously employed by Kraft Corporation, she was complaining that she was being "toxified" by others. She is making similar indirect claims at Muncy which causes Dr. Sena great concern.

Dr. Sena testified that the Respondent is still in the middle of treatment and resolution of her symptoms is only fifty percent complete. The Respondent continues to lack insight into her diagnosis of paranoid schizophrenia. The Inpatient Mental Health Unit is the only environment available to the Respondent which can successfully treat her through medication.

The Respondent testified as well. She testified that she is not refusing her medication, that there is no truth in what Dr. Sena testified to, and that he was being "very vicious". She testified that she is not a threat to anyone and that she takes her medications voluntarily. While the Court finds the Respondent's testimony credible, the Court also finds that she lacks insight into her diagnosis and symptoms. The Court also finds that she lacks insight into the critical role that medicine plays in her treatment. The Court also finds that should the Defendant be released to general population, that she in all likelihood will stop taking her medicine and become a substantial risk to herself and others.

Her treating physician's testimony supports a conclusion that there is a real potential for danger and that the Respondent remains a clear and present danger to herself and others in light of the fact that she in all likelihood will

stop taking the medication if she is released to general population and that she needs additional inpatient treatment in order for the medication to become effective and in order to stop her paranoid thoughts.

As the Court noted in its previous Order, the petitioner is in a State Correctional Institution surrounded by numerous other individuals who have committed various crimes and who are a danger society. As the Court noted, it cannot and will not ignore the Respondent's history of acting out under similar circumstances. The Court will not wait until another tragedy occurs. Respondent's history of acting out following noncompliance is clear evidence along with her present paranoid thinking that she must remain in treatment, must continue to take medication, and can only be released when the medication is fully effective and her delusions will not cause her to act out.

ORDER

And Now, this 21st day of August, 2015, following a review of the certifications and a review of the evidence received at the hearing, the Court denies the petition for mental health review. The Court finds by clear and convincing evidence that the Respondent is severely mentally disabled and in need of treatment and that remaining committed to the Mental Health Unit at Muncy is the least restrictive alternative. Respondent shall remain involuntarily committed for a period of no longer than sixty (60) days following August 11, 2015. Although, should her symptoms significantly improve to the extent that the medical staff is confident that she will

continue to take her medication once released to general population, the Court directs that she be released. If she is not released under said circumstances, the Court will entertain an appropriate petition.

> BY THE COURT, MARC F. LOVECCHIO, JUDGE

cc: SCI-Muncy J. Frankenburger, Esquire Lycoming County MH/ID c/o Jim Wilkerson Steve Sholder, Esquire Work File Gary Weber - The Lycoming Reporter MFL/clj