

STATE OF MINNESOTA
COUNTY OF WINONA

DISTRICT COURT
THIRD JUDICIAL DISTRICT

In the Matter of the Civil Commitment of:
David Austin Russell,
Respondent.

FINDINGS OF FACT,
CONCLUSIONS OF LAW,
AND ORDER AUTHORIZING
TREATMENT WITH
NEUROLEPTIC MEDICATIONS

Court File No. 85-PR-24-46

The above-entitled action came before District Court Judge Carmaine Sturino on January 22, 2024 for a hearing on the Petition for Authorization to Administer Treatment by Dr. Lisa Schock, Prairie St. John's. Respondent David Austin Russell appeared for part of the hearing. Attorney David Jones appeared on behalf of Respondent. Assistant Winona County Attorney Paul R. Ellison appeared on behalf of the petitioner. Dr. Travis Tomford, court examiner and Dr. Lisa Schock, Prairie St. John's were also present. The hearing was conducted by Zoom.

The Court, being duly advised in the premises and upon the evidence adduced at the hearing, the petition and its attachments, and all the files, records and proceedings held herein, now finds, by clear and convincing evidence, the following:

FINDINGS OF FACT

1. At a hearing on January 22, 2024, Winona County District Court committed Respondent as a person who poses a risk of harm due to a mental illness to the custody of Prairie St. John's and the Commissioner of the Minnesota Department of Human Services for a period not to exceed six (6) months.
2. Respondent has been hospitalized for treatment at Prairie St. John's where he has been under the care of a treatment team including Dr. Lisa Schock.

3. Respondent has a major mental illness. Medical professionals have diagnosed Respondent with Schizophrenia or Bipolar I Disorder. Respondent has exhibited symptoms consistent with his major mental illness including paranoia, agitation, and delusions.
4. The Court admitted the following documents as exhibits without objection:
 - a. Exhibit 1: Report of court examiner Dr. Travis Tomford.
 - b. Exhibit 2: Medical records from Prairie St. John's filed January 19, 2024.
 - c. Exhibit 3: Medical records from Mayo Clinic filed January 18, 2024.
 - d. Exhibit 4: Medical Records from Horizon Homes filed January 18, 2024.
5. Dr. Lisa Schock, Prairie St. John's and Dr. Travis Tomford, court examiner testified at the hearing. The Court finds the testimony to be credible. The testimony matched the information contained in the exhibits received and reviewed by the Court.
6. Respondent attended the start of the hearing. Shortly after the start of the hearing, Respondent left the hearing. Respondent briefly came back into the hearing, before leaving again. The Court finds that Respondent voluntarily waived his right to appear at the hearing. All parties, including Respondent, were properly notified of the hearing, Respondent voluntarily left the hearing, even after being told that he would be allowed to testify if he desired.
7. Respondent has not taken neuroleptic medications while at Prairie St. John's. This is consistent with Respondent not taking medications in the community, which resulted in a decompensation in Respondent's psychiatric condition. Respondent has referred to neuroleptic medications as poisons and as a chemical lobotomy.
8. Respondent lacks capacity to make decisions regarding the administration of neuroleptic medications. Respondent has been unable to participate in rational conversations with medical providers about treatment options, including neuroleptic medications. Respondent

lacks insight into his mental illness and his need for treatment. Respondent has expressed multiple delusional beliefs regarding medications.

9. Neuroleptic medications are an effective and generally accepted treatment for major mental illnesses. Neuroleptic medications are used to eliminate or reduce symptoms. For Respondent, the medications will be used to stabilize his mood and treat Respondent's symptoms of psychosis. The neuroleptic medications listed in the petition are not experimental.
10. Respondent has not demonstrated an awareness of his situation, including the reasons for his hospitalization and the consequences of refusing treatment with neuroleptic medications. Respondent has not acknowledged that his mental illness is the cause of his hospitalization. Instead, Respondent refers to delusional beliefs about being trafficked and being a slave. Respondent's persecutory delusions impact his understanding of his hospitalization.
11. Respondent has not demonstrated an understanding of the risks, benefits, and alternatives of treatment with neuroleptic medications. Respondent has not been able to participate logically in discussions about medications. Respondent is not able to weigh the risks and benefits of neuroleptic medications. Respondent has made it clear that he will not take neuroleptic medications voluntarily and has exhibited no understanding of the benefits of such medications.
12. Respondent has not demonstrated a clear choice regarding treatment with medication that is reasoned. Respondent decompensated when in the community and not taking medications. Respondent has shown some short improvement when given emergency medications. Respondent has not expressed a reasoned decision for his opposition to taking medications. Rather, Respondent expresses inaccurate and delusional beliefs about medications and refuses to acknowledge any benefits of the medications.

13. The evidence in the record supports the need for neuroleptic medications. Respondent's prognosis is poor if Respondent does not receive further mental health treatment, including with neuroleptic medications. There are no realistic alternatives to the use of neuroleptic medications.
14. Neuroleptic medications have been prescribed for Respondent by his treatment team for the treatment of his mental illness and to improve Respondent's symptoms. The use of neuroleptic medications is generally accepted for the treatment of Respondent's mental illness.
15. Previous treatment with neuroleptic medications has been helpful for Respondent. Respondent has been able to reside in a less restrictive setting. Respondent has shown some improvement for short periods in the hospital when given emergency medications. Without the medications, Respondent has not shown improvement while hospitalized.
16. There is a lack of evidence of any family, community, moral, religious, or social values that impact or impair Respondent taking neuroleptic medications.
17. Respondent needs neuroleptic medications to treat his mental illness. The use of neuroleptic medications in this situation is reasonable. There are no realistic alternatives to the use of neuroleptic medications.
18. Further mental health treatment is necessary for Respondent. Respondent's mental illness is untreated or undertreated currently. Neuroleptic medications are a necessary and vital component of Respondent's treatment. Respondent requires a court order for the administration of neuroleptic medications.
19. There are side effects associated with neuroleptic medications. Respondent will be monitored and treated for any such side effects.

CONCLUSIONS OF LAW

1. Respondent lacks the capacity to make decisions regarding treatment of his major mental illness with neuroleptic medications.
2. Upon application of the standards set forth in Minn. Stat. § 253B.092, Subd. 7, involuntary administration of neuroleptic medications to Respondent should be authorized. The known benefits of treatment with neuroleptic medications and Respondent's need for treatment outweigh the possible risks to Respondent.

NOW, THEREFORE, IT IS ORDERED:

1. Prairie St. John's; Minnesota Department of Human Services; and any other community or treatment facility to which Respondent may be transferred or provisionally discharged are authorized to administer neuroleptic medications to Respondent without his consent.
2. If physical force is required to administer the neuroleptic medications, medications may only be administered in a setting where Respondent's condition can be reassessed, and medical personnel qualified to administer medication are available. If physical force is required to administer the neuroleptic medication, the facility or program may only use injectable medications.
3. The authorization is limited to the following medications as requested in the Petition for Authorization to Impose Neuroleptic Drugs:
 - a. Zyprexa – oral, IM, up to 30 mg daily
 - b. Invega – oral up to 12 mg daily
 - c. Invega – IM up to 234 mg every 4 weeks
 - d. Risperdal – oral up to 12 mg daily
 - e. Abilify – oral up to 30 mg daily
 - f. Abilify – up to 400 mg every 4 weeks IM
4. All medications shall be administered in medically indicated dosages.

5. The authorization shall be effective through the period of Respondent's commitment, including any period of continued commitment, or until further Order of the Court.

BY THE COURT:

01/23/2024 04:29:12 PM


Carmaine Sturino
Judge of District Court