

NOTICE  
This order was filed under Supreme Court Rule 23 and may not be cited as precedent by any party except in the limited circumstances allowed under Rule 23(e)(1).

2011 IL App (4th) 100890-U

Filed 9/8/11

NO. 4-10-0890

IN THE APPELLATE COURT

OF ILLINOIS

FOURTH DISTRICT

In re: CHARLES K., a Person Found Subject to	)	Appeal from
Involuntary Admission,	)	Circuit Court of
THE PEOPLE OF THE STATE OF ILLINOIS,	)	Sangamon County
Petitioner-Appellee,	)	No. 10MH906
v.	)	
CHARLES K.,	)	Honorable
Respondent-Appellant.	)	Esteban F. Sanchez,
	)	Judge Presiding.

JUSTICE TURNER delivered the judgment of the court.  
Justices Pope and Cook concurred in the judgment.

**ORDER**

¶ 1 *Held:* Where respondent's appeal following his involuntary commitment is moot and none of the exceptions to the mootness doctrine apply, we dismiss the appeal.

¶ 2 In November 2010, a petition to involuntarily commit respondent, Charles K., was filed. Following a hearing, the trial court granted the petition, finding respondent had a mental illness and was in need of hospitalization.

¶ 3 On appeal, respondent argues his rights were violated when the State failed to present an adequate predispositional report. We dismiss the appeal.

¶ 4 I. BACKGROUND

¶ 5 On November 1, 2010, a petition to involuntarily commit respondent was filed pursuant to section 3-600 of the Mental Health and Developmental Disabilities Code (Mental Health Code) (405 ILCS 5/3-600 (West 2010)). The petition alleged respondent had a mental

illness and, because of that illness, was unable to provide for his basic physical needs so as to guard himself from serious harm without the assistance of others, unless treated on an inpatient basis. The petition also alleged respondent was unable to understand his need for treatment and was in need of immediate hospitalization for the prevention of harm. The petitioner noted the “poor condition” of respondent’s home, including the presence of bugs, empty food containers, dirty laundry, garbage, broken windows, and no utilities. Respondent was said to have not been bathing and wore unclean clothes.

¶ 6 Dr. Renee Cook, a psychiatrist, filed a certificate indicating she examined respondent, found he had a mental illness and was unable to provide for his basic physical needs, and was in need of immediate hospitalization for the prevention of harm. Dr. Cook stated respondent had a history of schizophrenia, had not been taking his medications, was becoming “more and more paranoid,” and was not caring for himself. Dr. Cook also stated respondent’s apartment was “uninhabitable” with feces, open food containers throughout, and no heat.

¶ 7 On November 5, 2010, the trial court conducted a hearing on the petition for involuntary admission. Dr. Cook testified she diagnosed respondent with schizophrenia, paranoid type. She stated his symptoms included delusions, inability to care for himself, paranoia, and auditory hallucinations. Dr. Cook stated respondent believed he was going on a trip to England and had expressed his belief in a government conspiracy. She opined respondent was unable to understand his need for treatment and, without treatment, he would be reasonably expected to suffer mental and emotional deterioration and be unable to provide for his basic physical needs.

¶ 8 Dr. Cook stated respondent had been wandering around the community and

borrowing money from people. After authorities were contacted, respondent's apartment was found to be "basically uninhabitable." The apartment had no heat and contained open food containers with bugs and feces. Respondent had not been taking care of his basic needs, including not bathing or taking his psychiatric medications.

¶ 9 Dr. Cook opined respondent was in need of hospitalization. She stated a treatment plan had been formulated. Based on respondent's current psychiatric condition and his behavior, Dr. Cook did not believe he was capable of living on his own. A nursing or group home would not be appropriate because respondent had not been cooperative with his care. Dr. Cook believed hospitalization was the least-restrictive alternative. The goal was to place respondent on antipsychotic medications to treat his schizophrenia to help get his symptoms under control and allow him more insight into his illness. Then, a nursing or group home would be a possibility. Dr. Cook recommended respondent be involuntarily admitted for a period not to exceed 90 days.

¶ 10 The State submitted into evidence respondent's social investigation, psychiatric history, and treatment plan. On cross-examination, Dr. Cook stated respondent had been eating and using the restroom. Since his admission, he had been cooperative in taking his medication prescribed for hypertension.

¶ 11 Respondent testified he intended to sell his house and "closed it down" to make it "a fixer-upper." He had been living with a friend in Auburn. He stated he was looking for an apartment or a house.

¶ 12 Following closing arguments, the trial court found by clear and convincing evidence that respondent was a person with a mental illness and was unable to understand the

need for treatment. Without inpatient treatment, the court stated respondent would suffer mental and emotional deterioration and be unable to guard himself from serious harm. The court granted the petition and ordered respondent hospitalized for a period not to exceed 90 days. This appeal followed.

¶ 13

## II. ANALYSIS

¶ 14 Initially, we must address the question of mootness in this case. Respondent acknowledges the 90-day commitment order entered on November 5, 2010, has expired, and thus he concedes this appeal is moot. Respondent, however, contends this case falls within two recognized exceptions to the mootness doctrine.

¶ 15 Generally, courts "do not decide moot questions, render advisory opinions, or consider issues where the result will not be affected regardless of how those issues are decided."

*In re Alfred H.H.*, 233 Ill. 2d 345, 351, 910 N.E.2d 74, 78 (2009).

"Reviewing courts, however, recognize exceptions to the mootness doctrine, such as (1) the public-interest exception, applicable where the case presents a question of public importance that will likely recur and whose answer will guide public officers in the performance of their duties, (2) the capable-of-repetition exception, applicable to cases involving events of short duration that are capable of repetition, yet evading review, and (3) the collateral-consequences exception, applicable where the involuntary treatment order could return to plague the respondent in some future proceedings or could affect other aspects of the respondent's life."

*In re Wendy T.*, 406 Ill. App. 3d 185, 189, 940 N.E.2d 237, 241  
(2010).

¶ 16 Respondent first argues this case falls under the public-interest exception to the mootness doctrine. Under this exception, a court may consider a moot case where "(1) the question presented is of a public nature; (2) there is a need for an authoritative determination for the future guidance of public officers; and (3) there is a likelihood of future recurrence of the question." *Alfred H.H.*, 233 Ill. 2d at 355, 910 N.E.2d at 80. This exception is to be "' narrowly construed and requires a clear showing of each criterion.' [Citation.]" *Alfred H.H.*, 233 Ill. 2d at 355-56, 910 N.E.2d at 80.

¶ 17 Involuntary-commitment proceedings have been found to be matters of public interest and questions of strict compliance with the Mental Health Code's statutory procedures have been found to involve matters of public importance, both of which make the public-interest exception applicable. *In re James H.*, 405 Ill. App. 3d 897, 903-04, 943 N.E.2d 743, 749 (2010). Respondent contends the issue of the State's compliance with section 3-810 of the Mental Health Code will likely recur in the future and a decision will guide the State in filing dispositional reports. However, the issue involving compliance with section 3-810 of the Mental Health Code has been analyzed in other appellate cases. See *In re Robinson*, 151 Ill. 2d 126, 131-36, 601 N.E.2d 712, 715-17 (1992); *In re Daryll C.*, 401 Ill. App. 3d 748, 755-57, 930 N.E.2d 1048, 1054-56 (2010); *In re Robin C.*, 395 Ill. App. 3d 958, 964-65, 918 N.E.2d 1284, 1289-90 (2009); *In re Alaka W.*, 379 Ill. App. 3d 251, 269-72, 884 N.E.2d 241, 255-58 (2008); *In re Louis S.*, 361 Ill. App. 3d 763, 771-72, 838 N.E.2d 218, 224-25 (2005). Thus, there is little need for an additional determination to guide public officials in the future. The public-interest exception

does not apply.

¶ 18 Respondent also argues the capable-of-repetition exception applies. To fall under this exception, two criteria must be met: "(1) the challenged action is in its duration too short to be fully litigated prior to its cessation and (2) there is a reasonable expectation that the same complaining party would be subjected to the same action again." *James H.*, 405 Ill. App. 3d at 901, 943 N.E.2d at 747 (quoting *In re Barbara H.*, 183 Ill. 2d 482, 491, 702 N.E.2d 555, 559 (1998)).

¶ 19 Given that the involuntary-commitment order here was set to last only 90 days, it could not have been fully litigated prior to its expiration. Thus, the only question "is whether there is a reasonable expectation respondent will be subject personally to the same action again." *James H.*, 405 Ill. App. 3d at 901, 943 N.E.2d at 748. As stated in *Alfred H.H.*, 233 Ill. 2d at 360, 910 N.E.2d at 83, "there must be a substantial likelihood that the issue presented in the instant case, and any resolution thereof, would have some bearing on a similar issue presented in a subsequent case."

¶ 20 Respondent has not met his burden in this case. His claim on appeal is the State failed to present an adequate dispositional report as required by section 3-810 of the Mental Health Code. Respondent, however, does not explain how a resolution of whether the State presented sufficient evidence regarding the predispositional report would have any bearing on any subsequent case involving his involuntary admission or treatment. As any determination as to the sufficiency of the November 2010 predispositional report and the testimony at the hearing would not likely have any impact on future litigation, the capable-of-repetition exception does not apply.

¶ 21 Because neither the public-interest exception nor the capable-of-repetition exception to the mootness doctrine are present in this case, and respondent does not argue the collateral-consequences exception, we dismiss this appeal as moot.

¶ 22 III. CONCLUSION

¶ 23 For the reasons stated, we dismiss this appeal as moot.

¶ 24 Appeal dismissed.