



5/3-601 (West 2010)), naming respondent, Terri M., as a person with a mental illness in need of immediate hospitalization. Respondent is a 54-year-old woman.

¶ 5 On August 23, 2012, the trial court held a hearing on the petition. Respondent's treating psychiatrist, Dr. Scott McCormick, testified respondent suffers from paranoid schizophrenia. He has observed formal thought disorder where respondent "rambles incoherently" and "has difficulty staying on topic." Respondent has "no insight whatsoever regarding her clinical condition." She refused all standard pharmacologic treatments. He offered her three different medications for treatment of schizophrenia but she rejected each one. Respondent believes she has attention deficit disorder and has been taking dextroamphetamine, which, McCormick stated, "exacerbate[s] paranoid and psychotic conditions." In May, respondent had a recorded weight of 110 pounds and upon admission in August had a recorded weight of 99 pounds. In the 12 days after admission, she had gained back 10 pounds. McCormick opined respondent "is on a chronic, steady, downward slide medically, psychiatrically, and socially." McCormick testified he believed there was no less restrictive treatment appropriate for respondent.

¶ 6 Respondent's brother, Scott M., testified the food in respondent's apartment is "spoiled or unhealthy to eat." He opined respondent's residence looks "disheveled and unkept." During the previous year, respondent's teeth became rotten and decayed and he arranged for respondent to have these teeth surgically removed. Respondent leaves him "very needy messages" about things she cannot obtain on her own such as food and medical care. Respondent calls from various entities, such as Village Hall, and has not had a phone or a way for family to make direct contact for the past year.

¶ 7 Respondent's brother, Brian M., testified on the day leading to her admission he, another brother, Dawn Wall, and Heyworth Chief of Police Chris Lane went to respondent's apartment to check on her. The apartment was in "a state of disarray" with the electricity turned off, the stove pulled away from the wall, and the heating element removed. Respondent mentioned to him the food in the refrigerator might be outdated, or "science projects," which he explained to mean moldy food. Brian had noticed respondent's weight loss over the past year. He believed respondent was unable to care for herself. Brian stated respondent "has no place to go" once she is removed from her apartment.

¶ 8 Officer Ryan Kemp of the Heyworth police department testified respondent would regularly contact the police department to conduct an investigation. When asked about her concerns, police could not figure out what respondent wanted. Kemp noticed respondent's health, including her weight and teeth, had declined.

¶ 9 Heyworth Chief of Police Chris Lane testified respondent came to the village hall several times to file a police report and when he questioned respondent about her complaint her reply was "noncoherent ramblings of everything" but the issue at hand. Lane noticed respondent had lost weight and her teeth had diminished and he was very concerned about respondent's health and ability to care for herself.

¶ 10 Dawn Wall, an attorney in Bloomington, testified she tried to assist respondent with finding new housing. Respondent's lease at her apartment was expired and she was supposed to have moved out in March 2012. Wall stated the power was turned off at respondent's apartment on August 1. Wall testified respondent would not move into a senior apartment because she was concerned about neighbors following her and knowing what she was

doing. Wall had not been able to obtain housing for respondent as she would not consider making application due to various issues, including safety. Wall opined the other side of the duplex is unoccupied "because her living situation is an encumbrance to anyone living next door." Respondent did not operate the air conditioning because she was "concerned about people venting poison in from the neighboring duplex." Respondent would not keep food in her apartment or drink the local water, but rather, she would get a jug of water from the grocery store and subsist on nutritional supplements. Respondent claimed people track her through cellphones. On the day leading to respondent's admission, Wall went to respondent's apartment and saw her "completely dehydrated" and noticed she had "lost a substantial amount of weight."

¶ 11 Respondent testified and stated she is able to get food from the local grocery store and through other services. She described her apartment as appearing "like a tornado blew through." Respondent did not offer a clear response for what she would do after moving from her apartment. On cross-examination, respondent stated she disagreed with Dr. McCormick's diagnosis and was not willing to take medication for the treatment of schizophrenia.

¶ 12 After the hearing, the trial court, as relevant to this appeal, found respondent (1) suffered from a mental illness, (2) is unable to provide for her basic physical needs so as to guard herself from serious harm, and, alternatively, (3) if not treated on an inpatient basis, is reasonably expected to suffer mental or physical deterioration. The court ordered respondent hospitalized in the Department of Human Services for a period not to exceed 90 days.

¶ 13 In January 2013, appointed counsel, the Commission, moved to withdraw as counsel on appeal pursuant to *Anders*, 386 U.S. 738, and *In re Keller*, 138 Ill. App. 3d 746, 486 N.E.2d 291 (1985), asserting no justiciable issues warrant appeal. The record shows service of

the motion on respondent. On our own motion, this court granted respondent leave to file additional points and authorities by March 1, 2013. She filed none. After examining the record in accordance with our duties under *Anders*, we grant the Commission's motion to withdraw as counsel on appeal.

¶ 14

## II. ANALYSIS

¶ 15 The Commission asserts the record shows no meritorious issues can be raised on appeal. Specifically, the Commission contends no colorable argument can be made the State failed to demonstrate the need for involuntary admission by clear and convincing evidence. We agree.

¶ 16

### A. Mootness

¶ 17 As respondent's 90-day commitment has ended, this appeal is moot. The Commission contends the record does not indicate whether respondent's December 2009 admission to Advocate BroMenn Health Center was involuntary and the collateral-consequences exception applies. Our review of the record does not indicate whether respondent has ever been (1) convicted of a felony or (2) properly subject to an order for involuntary commitment or administration of medication. Therefore, we apply the collateral-consequences exception to the mootness doctrine and address the merits. See *In re Alfred H.H.*, 233 Ill. 2d 345, 362-63, 910 N.E.2d 74, 84 (2009) (collateral-consequences exception will not apply when a respondent has previously been involuntarily committed); *In re Joseph P.*, 406 Ill. App. 3d 341, 347, 943 N.E.2d 715, 720 (2010) (where a respondent has not been previously forcibly medicated or convicted of a felony, collateral consequences have not attached).

¶ 18

### B. Merits

¶ 19 The Commission contends the trial court's finding respondent was subject to involuntary admission was not against the manifest weight of the evidence.

¶ 20 A trial court's decision in an involuntary-admission proceeding is given great deference and will not be set aside at the appellate level unless it is against the manifest weight of the evidence. *In re Alfred H.*, 358 Ill. App. 3d 784, 788, 832 N.E.2d 964, 967 (2005). "A judgment is against the manifest weight of the evidence only when an opposite conclusion is apparent or when findings appear to be unreasonable, arbitrary, or not based on evidence." *Id.*

¶ 21 Pursuant to section 1-119(2) of the Code (405 ILCS 5/1-119(2) (West 2010)), a "[p]erson subject to involuntary admission on an inpatient basis" means:

"(2) A person with mental illness who because of his or her illness is unable to provide for his or her basic physical needs so as to guard himself or herself from serious harm without the assistance of family or others, unless treated on an inpatient basis[.]" 405 ILCS 5/1-119(2) (West 2010).

No respondent may be found subject to involuntary admission on an inpatient basis unless that finding is established by clear and convincing evidence. 405 ILCS 5/3-808 (West 2010).

¶ 22 Here, Dr. McCormick, respondent's treating psychiatrist, diagnosed respondent as suffering from paranoid schizophrenia, a mental illness. McCormick testified respondent was incapable of caring for herself and had lost 10 pounds in approximately three months, weight she could ill-afford to lose. Respondent's brothers testified (1) respondent's teeth had rotted and decayed to a point where extraction was required, (2) the food in respondent's apartment was spoiled or molded, and (3) they believed she was unable to care for herself. Brian testified

