



## In the Matter of: Lorenzo Richardson

722 S.E.2d 797 (2012) | Cited 0 times | Court of Appeals of North Carolina | March 20, 2012

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Appeal by respondent from involuntary commitment order entered 24 March 2011 by Judge Daniel F. Finch in Granville County District Court. Heard in the Court of Appeals 7 February 2012.

Lorenzo Richardson ("respondent") appeals from an Involuntary Commitment Order entered 24 March 2011. The Order committed respondent to 30 days of inpatient treatment and 60 days of outpatient treatment. Respondent argues that the district court failed to record sufficient findings of fact to show that he was dangerous to himself or others. Respondent further argues that the district court erred by committing respondent based on contradictory conclusions of law. After careful review, we affirm.

### Background

On 18 March 2011, respondent's mother, Deborah Richardson, filed an Affidavit and Petition for Involuntary Commitment, stating that respondent was "mentally ill and dangerous to self or others or mentally ill and in need of treatment in order to prevent further disability or deterioration that would predictably result in dangerousness." Respondent's mother wrote that her opinion was based upon the following facts:

Lorenzo says -- Helicopters are following him, Neighbors stalking. Neighbors working for the police, Neighbors spying on him. Threatening to get back at the neighbors, flashing headlights at neighbors when they pass. He said he was more dangerous than we think. It bothers him to just see the neighbors passing by. He needs help! He hearing voices, talking to himself, he was committed in October 2010. He suppose [sic] to be on medication. The neighbors called the police on him 3-17-11. He refuses to take medication. He is a danger to himself and others.

On 18 March 2011, respondent was transported to Wake Mental Health where he was examined by Dr. Alexia Maneschi. Dr. Maneschi stated that respondent did not think there was anything wrong with him. He also stated that respondent was "paranoid, delusional, and agitated." Dr. Maneschi recommended inpatient commitment.

On 22 March 2011, respondent was transported to Central Regional Hospital. On 23 March 2011,



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respondent was examined by Dr. Gordon Lavin, a staff psychiatrist, who diagnosed respondent with "Delusional Disorder, Paranoid Type" and "Personality Disorder." Dr. Lavin recommended that respondent receive inpatient commitment for 30 days and outpatient care for 60 days.

On 24 March 2011, respondent appeared before Judge Finch for his initial commitment hearing. At the hearing, Dr. Lavin testified that he had diagnosed respondent with delusional disorder, paranoid type, and personality disorder. This diagnosis was based on respondent's "pattern of delusional beliefs" that the government and other groups were monitoring and trying to discredit him. Dr. Lavin also testified that respondent's prior treatment records indicated that he had previously threatened to kill people based on the belief that they were trying to harm him.

According to Dr. Lavin, respondent did not feel that he needed treatment and wanted to be discharged. Likewise, Dr. Lavin stated that respondent said he had not and would not comply with treatment while in outpatient care. Dr. Lavin testified that he requested 30 days of inpatient treatment and 60 days of outpatient treatment for respondent so he could use the 30 days to get respondent started on the medication he needed.

Ms. Richardson also testified at the initial commitment hearing. Ms. Richardson reiterated her statements from the petition regarding respondent's beliefs that he was being followed by helicopters and stalked by the neighbors. She went on to say that respondent was "definitely a danger" and that he said he would hurt somebody. Ms. Richardson testified about respondent's behavior towards the neighbors, which included aggressively approaching them and saying "I'll get you" as well as standing in the yard and yelling at them. She stated that one neighbor in particular had to get a restraining order against respondent because he was bothering the neighbors.

Respondent also testified on his own behalf at the commitment hearing. He stated that he would not approach the neighbors unless they provoked him first and that the majority of the neighbors were against him. When asked whether he would assault someone who did not touch him first, respondent said "[n]o" because his "self-defense is proportional[.]" Respondent also made repeated references to the government trying to discredit him. When asked if he was dangerous to himself or others, respondent stated that he did not believe so. During cross-examination, respondent said that he felt the neighbors were "indirectly" and "subliminally" stalking and harassing him. Finally, respondent indicated that he did not take drugs or medicine, including medicine which was given to him after being previously hospitalized.

In the Involuntary Commitment Order, Judge Finch found that:

1. In the recent past, respondent has been aggressive to others he thought provoked him.
2. He feels his conduct is being monitored by other parties.



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3. He ceased taking medication following his October 2010 hospitalization.
4. Respondent feels the government is a threat to him.
5. His neighbors are "indirectly" stalking him.
6. Respondent believes his neighbors [sic] conduct provokes him.
7. He lacks insight into his mental illness. He suffers from a delusional disorder, paranoid type.

Judge Finch also marked boxes on the form which indicated that the district court concluded that respondent was "mentally ill" and dangerous "to self" and "others." The district court further concluded that respondent is capable of surviving safely in the community with available supervision from family, friends or others; and based on respondent's psychiatric history, the respondent is in need of treatment in order to prevent further disability and deterioration which would predictably result in dangerousness to self or others. And, that the respondent's inability to make an informed decision to voluntarily seek and comply with recommended treatment is caused by the respondent's current mental status.

The Involuntary Commitment Order required respondent to undergo treatment at an inpatient facility for 30 days and an outpatient facility for 60 days. Respondent gave timely notice of appeal to this Court on 5 April 2011.

### Discussion

#### I.

Respondent first argues that the district court's recorded findings of fact are not sufficient to show that respondent was a danger to himself or others.

On appeal of a commitment order our function is to determine whether there was any competent evidence to support the facts recorded in the commitment order and whether the trial court's ultimate findings of mental illness and dangerous[ness] to self or others were supported by the facts recorded in the order.

In re Booker, 193 N.C. App. 433, 436, 667 S.E.2d 302, 304 (2008) (citation and quotation marks omitted).

In order to support an inpatient commitment order, a district court "shall find by clear, cogent, and convincing evidence that the respondent is mentally ill and dangerous to self . . . or dangerous to others. . . . The court shall record the facts that support its findings." N.C. Gen. Stat. § 122C-268(j) (2009). "The direction to the court to record the facts which support its findings is mandatory." In re



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Koyi, 34 N.C. App. 320, 321, 238 S.E.2d 153, 154 (1977).

In his brief, respondent intermingles arguments concerning whether the recorded findings of fact are sufficient and whether the evidence itself was sufficient to find that respondent was a danger to himself or others. Respondent suggests that the findings of fact are not sufficient to "conclude" that respondent was dangerous to himself or others. As N.C. Gen. Stat. § 122C-268(j) indicates, it is the evidence that must be sufficient for the district court to find that an individual is mentally ill and a danger to himself or others. The recorded findings of fact need only include "facts upon which [the district court's] ultimate findings are based," *In re Collins*, 49 N.C. App. 243, 246, 271 S.E.2d 72, 74 (1980), and not every piece of evidence which led to the finding of mental illness or danger to self or others.

Here, the findings of fact recorded by the district court are sufficient to satisfy N.C. Gen. Stat. § 122C-268(j). The district court concluded that respondent was mentally ill and a danger to himself or others based on the findings of fact set out in the Involuntary Commitment Order. Likewise, there was competent evidence to support these recorded findings, including the Affidavit and Petition for Involuntary Commitment, the reports and recommendations of Dr. Maneschi and Dr. Lavin, and the testimonies of Dr. Lavin, respondent's mother, and respondent. As such, we find respondent's argument on this issue to be without merit.

## II.

Respondent also argues that the district court made contradictory conclusions of law in the Involuntary Commitment Order. According to respondent, by checking boxes indicating that respondent was dangerous to himself, dangerous to others, and capable of surviving safely in the community with supervision, the district court reached contradictory conclusions of law and should be reversed.

As there are no involuntary commitment cases on point, respondent relies on two workers' compensation cases. In *Neal v. Leslie Fay, Inc.*, 78 N.C. App. 117, 120, 336 S.E.2d 628, 630 (1985), the plaintiff filed a workers' compensation claim based on a lung disease allegedly caused by his exposure to cotton dust. The Industrial Commission denied the plaintiff's claim, finding that although the plaintiff's chronic bronchitis was due in part to his exposure to cotton dust, this exposure "did not augment his lung disease process to any degree." This Court remanded, holding that the Industrial Commission made contradictory findings of law regarding the plaintiff's occupational disease. *Id.* at 120-22, 336 S.E.2d at 630-32.

A similar issue was decided in *Winders v. Edgecombe Cty. Home Health Care*, 187 N.C. App. 668, 675-76, 653 S.E.2d 575, 580 (2007), where this Court held that the Industrial Commission reached contradictory conclusions of law when it found that the plaintiff failed to prove that she should receive compensation for the maintenance of a personal pool for therapy, but also found that the



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plaintiff was entitled to be reimbursed by defendants for the cost of maintaining the personal pool.

The case at hand is distinguishable because an involuntary commitment presents a unique situation. Here, the district court ordered a split commitment, requiring respondent to receive both inpatient and outpatient care. As such, concluding that respondent is dangerous to himself and dangerous to others, as well as capable of surviving safely in the community with available supervision is appropriate.

N.C. Gen. Stat. § 122C-271(b) (2009) sets out the requirements for committing an individual to inpatient or outpatient care. N.C. Gen. Stat. § 122C-271(b)(2) states that inpatient commitment may be ordered if a court finds by clear, cogent, and convincing evidence that the respondent is mentally ill and a danger to himself or others. As such, the district court's conclusions that respondent is mentally ill, dangerous to himself, and dangerous to others support the inpatient portion of the split commitment.

Meanwhile, N.C. Gen. Stat. § 122C-271(b)(1) states that outpatient commitment may be ordered if a court finds by clear, cogent, and convincing evidence that a respondent is capable of surviving safely in the community with available supervision. In fact, nearly all of the language used in this portion of the statute regarding outpatient commitment is also used in the portion of the Involuntary Commitment Order which the district court checked in this case. It is clear that the district court's conclusion that respondent is capable of surviving safely in the community with available supervision applies to the outpatient treatment portion of the split commitment.

Based on the above, the district court's conclusions are not contradictory; rather, each applies to a separate portion of the split commitment. Respondent was a danger to himself or others, which was why he needed inpatient treatment, but he could be capable of surviving safely in the community with available supervision once inpatient treatment ended and outpatient treatment began. We find respondent's argument on this issue to be without merit.

Based on the foregoing, we hold that the district court recorded sufficient findings of fact to commit respondent to inpatient treatment. Additionally, we hold that the district court did not reach contradictory conclusions of law in the Involuntary Commitment Order because of the split commitment in this case. Consequently, we affirm the district court's order.

Affirmed.

Judges THIGPEN and McCULLOUGH concur.

Report per Rule 30(e).

