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2018 IL App (3d) 170438-U

Order filed August 10, 2018

IN THE
APPELLATE COURT OF ILLINOIS
THIRD DISTRICT

2018

THE PEOPLE OF THE STATE OF ILLINOIS,)	Appeal from the Circuit Court of the 14th Judicial Circuit, Henry County, Illinois,
Plaintiff-Appellee,)	
v.)	Appeal No. 3-17-0438
)	Circuit No. 16-CF-233
WILLIAM J.B. ZIMMERMAN,)	Honorable
Defendant-Appellant.)	Carol M. Pentuic, Judge, Presiding.

JUSTICE HOLDRIDGE delivered the judgment of the court.
Justices McDade and O'Brien concurred in the judgment.

ORDER

¶ 1 *Held:* The circuit court's determination that the defendant was in need of mental health treatment on an inpatient basis is not manifestly erroneous.

¶ 2 The defendant, William J.B. Zimmerman, appeals the circuit court's order committing him to the Department of Health and Human Services (DHS) for inpatient mental health treatment.

¶ 3 **FACTS**

¶ 4 The defendant was charged with two counts of disorderly conduct (720 ILCS 5/26-1(a)(4), (6) (West 2016)). The charges were based on events that occurred when the police were dispatched to the defendant's residence for a welfare check. While the officer was on the scene, the defendant became agitated and accused the officer of being a terrorist. The defendant went back into the home and called 911 to report the officer as a terrorist. The officer asked the defendant to come outside of the home and then placed the defendant under arrest for misusing the 911 emergency phone line and falsely reporting an act of terrorism.

¶ 5 Subsequently, defense counsel filed a motion for a hearing to determine the defendant's fitness to stand trial. At the fitness hearing, Dr. Kirk Witherspoon testified that he believed the defendant suffered from schizophrenia with paranoid delusion, delusions of reference, disorganized thinking and poor reality testing. Dr. Witherspoon recommended that the court find the defendant unfit to stand trial. Following a hearing, the court found the defendant unfit to stand trial with no substantial probability of restoration within one year. The court therefore found the defendant not guilty by reason of insanity. The matter was subsequently continued several times for DHS to evaluate the defendant and determine whether the defendant should be committed on an inpatient or outpatient basis for mental health treatment.

¶ 6 Dr. Thomas T. Lambirth prepared a DHS evaluation, which he submitted to the court. Dr. Lambirth's report indicated that the defendant did not assist his parents with everyday routine tasks such as grocery shopping, food preparation, or house cleaning. The defendant indicated that he had been treated by general practitioners for depression because the defendant claimed to have been previously tortured by Al Qaeda. The defendant explained that Al Qaeda tried to induce him to have heart attacks. The defendant also explained that he had been hospitalized previously due to internal bleeding which he attributed to being attacked by particle ray

weapons. However, the defendant was unable to inform Dr. Lambirth of any further details of his treatment, or if the defendant was taking any medication.

¶ 7 Additionally, Dr. Lambirth diagnosed the defendant with schizophrenia, continuous and severe. Dr. Lambirth stated the defendant also did not respond appropriately to questions. Instead, the defendant appeared preoccupied with the belief that he was being attacked by Al Qaeda terrorists. During the interview, the defendant's story oscillated from being attacked by chemical weapons and being attacked by a particle beam weapon. The defendant did not offer any explanation for the attacks, but he stated that the attacks began when he was a small child. The defendant also blamed Al Qaeda for his inability to obtain a job. The defendant claimed that Al Qaeda coerced him into procuring student loans by the use of chemical and biological weapons. Dr. Lambirth found the defendant's common sense judgment was below average, contact with reality poor, and insight nonexistent.

¶ 8 Further, Dr. Lambirth reported that the defendant denied past or present suicidal ideations. However, the defendant did state, "They sometimes try to get me to do that." Also, the defendant reported that he had lost approximately 50 to 60 pounds within the last two years and his appetite had decreased due to his ongoing depression caused by the torture he consistently experienced by Al Qaeda.

¶ 9 Ultimately, Dr. Lambirth concluded that the defendant was in need of mental health services on an inpatient basis. Dr. Lambirth supported his conclusion with the following findings: (1) the defendant was preoccupied with his delusions which occurred his entire life, (2) the defendant was experiencing auditory and visual hallucinations, (3) the defendant complained of depression, a decreased appetite, and claimed to have lost significant weight over the past two years, (4) the defendant's symptoms and deficits have been present for years, (5) the defendant

lacked any insight into his mental illness and has refused treatment, (6) the defendant's illness was unlikely to improve without treatment, (7) the defendant's behavior was unpredictable as evidenced by his 911 call and delusions that the responding police officer was a terrorist, and (8) the defendant was unable to provide for his own basic needs due to his schizophrenia.

¶ 10 Following a hearing, the court found that the defendant was in need of mental health services on an inpatient basis because the defendant repeatedly indicated that he would not comply with any sort of treatment. In coming to this finding, the court found that inpatient treatment was necessary because the defendant was a danger to himself and others.

¶ 11 ANALYSIS

¶ 12 On appeal, the defendant contends the circuit court erred in finding that he needed mental health services on an inpatient basis. A finding that a defendant needs mental health treatment on an inpatient basis must be established by clear and convincing evidence. 730 ILCS 5/5-2-4(g) (West 2016). The circuit court's determination that inpatient care is needed will be reversed only if it is manifestly erroneous. *People v. Hagar*, 253 Ill. App. 3d 37, 42 (1993).

¶ 13 A defendant is subject to involuntary admission on an inpatient basis if the defendant "has been found not guilty by reason of insanity but who due to mental illness is reasonably expected to inflict serious physical harm upon himself or another and who would benefit from inpatient care or is in need of inpatient care." 730 ILCS 5/5-2-4(a-1)(B) (West 2016). "Even though a finding of dangerousness must be based on a specific medical opinion regarding defendant's possible future conduct, there does not need to be an expectation of immediate danger." *Hager*, 253 Ill. App. 3d at 41. Relevant factors in determining whether a person is reasonably expected to inflict serious harm upon himself or another include "evidence of (1) prior hospitalization with the underlying facts of that hospitalization, and (2) the defendant not

taking his medication in the past and still not perceiving the value of continued medical treatment.” *People v. Robin*, 312 Ill. App. 3d 710, 718 (2000).

¶ 14 Here, although Dr. Lambirth did not explicitly state that the defendant was reasonably expected to inflict serious harm upon himself, the totality of Dr. Lambirth’s report supports such a finding. Dr. Lambirth diagnosed the defendant with schizophrenia and his evaluation establishes that the defendant is clearly suffering from delusions. Specifically, the defendant repeatedly claimed to have been tortured by Al Qaeda with particle ray beams and chemical weapons. The defendant also blamed Al Qaeda for his inability to obtain a job and he claimed that Al Qaeda coerced him into procuring student loans. The defendant even believed that the responding officer was a terrorist. In addition to Dr. Lambirth’s diagnosis of schizophrenia, the defendant complained of depression, a decreased appetite, and claimed to have lost approximately 50 to 60 pounds over the course of two years due to his delusions. Dr. Lambirth’s conclusion that the defendant could not provide for his own basic needs due to schizophrenia is supported by the fact the defendant does not perform routine daily tasks such as grocery shopping and meal preparation. More importantly, the defendant admitted to hearing voices which caused him to have suicidal thoughts. Finally, Dr. Lambirth reported that the defendant had no insight into his mental health, and refused treatment. Consequently, we hold the circuit court’s finding that the defendant was in need of mental health services on an inpatient basis was not manifestly erroneous.

¶ 15 CONCLUSION

¶ 16 The judgment of the circuit court of Henry County is affirmed.

¶ 17 Affirmed.