

STATE OF NORTH CAROLINA

File No.

In The General Court Of Justice
Superior Court Division
Before The Clerk

County

IN THE MATTER OF

ORDER ON MOTION FOR
MULTIDISCIPLINARY EVALUATION
IN INCOMPETENCY OR RESTORATION TO
COMPETENCY PROCEEDING

G.S. 35A-1111(a), (b); 35A-1130(c)

Full Name And Address Of Respondent/Ward

Date Of Birth

Telephone No. Of Respondent/Ward

Name And Address Of Petitioner In Incompetency Or Restoration Proceeding

Name And Address Of Counsel Or GAL For Respondent/Ward

Telephone No. Of Petitioner In Incompetency Or Restoration Proceeding

Telephone No. Of Counsel Or GAL For Respondent/Ward

Incompetency/Restoration Hearing Date

FINDINGS

- 1. The Court finds that a multidisciplinary evaluation (MDE) should be performed on the respondent/ward based on:
- The motion from (name of party requesting evaluation) for an MDE.
- The Court's own motion.
a. An MDE is needed to assist the Court.
b. An MDE is needed for the purpose of evaluating the suitability of (name individual) as guardian for the respondent/ward.
c. Other:
2. The Court finds that a multidisciplinary evaluation should not be performed on the respondent/ward.

ORDER

Based on these findings, it is ORDERED that

- the motion for multidisciplinary evaluation is denied.
the designated agency listed below shall prepare and provide a current multidisciplinary evaluation of the respondent/ward and the respondent/ward is ordered to attend the multidisciplinary evaluation that is to be performed.

TO THE DESIGNATED AGENCY LISTED BELOW:

The MDE that you are ordered to perform shall include the following evaluations:
Medical Psychological Social Work
Other: (specify)

NOTE: The MDE may include other evaluations as directed by the clerk, including education, vocational rehabilitation, occupational therapy, vocational therapy, psychiatry, speech-and-hearing, and communications disorder evaluations. G.S. 35A-1101(14).

The MDE shall evaluate the suitability of the following person as the guardian for the respondent/ward: (insert name, address, and phone number of potential guardian)

The MDE shall also include the following information:

- 1. The nature and extent of the respondent/ward's disability.
2. The assets, liabilities, and needs of the respondent/ward.
3. The nature and extent of the needed guardianship (if any is needed), including whether guardianship of the person, guardianship of the estate, or general guardianship is appropriate. The evaluation shall include consideration of whether a limited guardianship is appropriate, detailing the areas in which the respondent/ward has capacity (e.g., language and communication, nutrition, personal hygiene).
4. A recommended guardianship plan and program (if guardianship is needed).

Other specific issues to be addressed by the evaluators in the MDE:

Original - File Certified Copy - Agency (Over)

NOTE TO DESIGNATED AGENCY ORDERED TO PREPARE THE MDE (if applicable):

For purposes of guardianship in NC, the following definitions apply:

"Incompetent adult" means an adult or emancipated minor who lacks sufficient capacity to manage the adult's own affairs or to make or communicate important decisions concerning the adult's person, family, or property, whether the lack of capacity is due to mental illness, intellectual disability, epilepsy, cerebral palsy, autism, inebriety, senility, disease, injury, or similar cause or condition.

"Guardian of the estate" means a guardian appointed solely for the purpose of managing the property, estate, and business affairs of a ward.

"Guardian of the person" means a guardian appointed solely for the purpose of performing duties relating to the care, custody, and control of a ward.

"General guardian" means a guardian of both the estate and the person.

"Multidisciplinary evaluation" means an evaluation that contains current medical, psychological, and social work evaluations as directed by the clerk and that may include current evaluations by professionals in other disciplines, including without limitation: education, vocational rehabilitation, occupational therapy, vocational therapy, psychiatry, speech-and-hearing, and communications disorders. The evaluation is current if made not more than one year from the date on which it is presented to or considered by the court. The evaluation shall set forth the nature and extent of the disability and recommend a guardianship plan and program.

"Inebriety" means the habitual use of alcohol or drugs rendering a person incompetent to transact ordinary business concerning the person's estate, dangerous to person or property, cruel and intolerable to family, or unable to provide for family.

"Epilepsy" means a group of neurological conditions characterized by abnormal electrical-chemical discharge in the brain. This discharge is manifested in various forms of physical activity called seizures, which range from momentary lapses of consciousness to convulsive movements.

"Autism" means a physical disorder of the brain which causes disturbances in the developmental rate of physical, social, and language skills; abnormal responses to sensations; absence of or delay in speech or language; or abnormal ways of relating to people, objects, and events. Autism occurs sometimes by itself and sometimes in conjunction with other brain-functioning disorders.

"Cerebral palsy" means a muscle dysfunction, characterized by impairment of movement, often combined with speech impairment, and caused by abnormality of or damage to the brain.

"Intellectual disability" means significantly subaverage general intellectual functioning existing concurrently with deficits in adaptive behavior and manifested before age 22.

"Mental illness" means an illness that so lessens the capacity of a person to use self-control, judgment, and discretion in the conduct of the person's affairs and social relations as to make it necessary or advisable for the person to be under treatment, care, supervision, guidance, or control. The term "mental illness" encompasses "mental disease", "mental disorder", "unsoundness of mind", and "insanity".

Name And Address Of Designated Agency	Date	Name (type or print)
	Signature	
(if MDE ordered) Date Order Mailed To Designated Agency	<input type="checkbox"/> Assistant CSC <input type="checkbox"/> Clerk Of Superior Court	
	NOTE TO CLERK: Send a copy of this order and the underlying motion for MDE to the designated agency ordered to complete the MDE along with (i) the petition for adjudication of incompetence and appointment of a guardian or the motion for restoration to competency, (ii) the notice of hearing, and (iii) any order appointing an interim guardian.	

CERTIFICATION

I certify that this Order For Multidisciplinary Evaluation In Incompetency Or Restoration To Competency Proceeding is a true and complete copy of the original on file in this case.

Date	Name Of Clerk (type or print)	Signature	<input type="checkbox"/> Deputy CSC	<input type="checkbox"/> Assistant CSC
			<input type="checkbox"/> Clerk Of Superior Court	