

MEMORANDUM DECISION

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IN THE COURT OF APPEALS OF INDIANA

In the Matter of the Civil
Commitment of:

C.C.,
Appellant,

v.

Health and Hospital Corporation
d/b/a Sandra Eskenazi Mental
Health Center,
Appellee.

August 16, 2023

Court of Appeals Case No.
23A-MH-742

Appeal from the Marion County
Superior Court Probate Division

The Honorable David J. Certo,
Judge

Trial Court Cause No.
49D08-2303-MH-8981

Memorandum Decision by Judge Bailey
Judges Tavitas and Kenworthy concur.

Bailey, Judge.

Case Summary

- [1] C.C. appeals an involuntary, temporary commitment order that expired on June 8, 2023, contending that it was not supported by sufficient evidence. Because her appeal is moot and because she does not argue that it falls within an exception to the mootness doctrine, we dismiss the appeal.

Facts and Procedural History

- [2] On March 2, 2023, C.C.'s mother, L.R., filed an application for emergency detention of C.C. In that application, L.R. asserted that C.C. is "extremely paranoid," that she "has weapons," and that she had "threatened" L.R. with the gun. Appellant's App. Vol. 2 at 12. L.R. also stated that C.C. believes several of her family members are "clones or have been harmed by celebrities." *Id.* at 13. In the attached physician's statement, the physician indicated that C.C. "has a mental health condition," that she "has stopped taking medications," and that "she has become delusional and paranoid." *Id.* at 14. The physician also stated that C.C. "somehow got access to a gun" and that she "has a delusion that her mother is not her mother, and she wants to hurt whoever is harming her mother." *Id.* C.C. was admitted to the Health and Hospital Corporation d/b/a Sandra Eskenazi Mental Health Center ("Eskenazi") on March 3.

[3] On March 6, Dr. Nazli Tunali examined C.C. Following her examination of C.C., Dr. Tunali determined that C.C. was suffering from a “psychotic disorder” and that she was “dangerous” and “gravely disabled.” *Id.* at 18. Specifically, Dr. Tunali noted that C.C. thinks her family was “killed and replaced by clones,” that she acts “bizarrely,” that she has “threatened her mother,” and that she “carries a knife with her.” *Id.* at 21. Dr. Tunali further noted that C.C. is “quite delusional and acts accord[ing] to those delusions” and that she “has poor judgment and insight, and impaired reasoning.” *Id.* at 22.

[4] The court held a hearing on the application for emergency detention on March 10. At the hearing, L.R. testified that, in the year leading up to her filing the motion for emergency detention, C.C. had been “very paranoid” and “delusional.” *Tr.* at 6. L.R. further testified that C.C. “thinks people are following her and chasing her around,” and that she “was living on the streets” because she thinks her family members were not really her family. *Id.* L.R. also testified that, on one occasion, C.C. had entered L.R.’s house to take a shower and “got ahold of” L.R.’s gun but refused to return it and instead “threaten[ed]” L.R. with it. *Id.* at 6-7. L.R. also testified that C.C. says “[d]aily” that she believes family members are “clones” of themselves and that she believes she is “being stalked by celebrity rappers and musicians” such as Drake, Nikki Minaj, and Beyonce who are members of the Illuminati and who are “after her because she’s virginal.” *Id.* at 7-8.

- [5] Additionally, L.R. testified that C.C. does not have a job but relies on L.R. for money and that she “doesn’t eat” unless the food is “packaged.” *Id.* at 10. Specifically, she testified that, during a prior hospitalization, the hospital had referred to C.C. as “walking death” because she was not eating. *Id.* And L.R. testified that C.C. had been prescribed medications but that she is not “consistent with it.” *Id.* at 11.
- [6] Dr. Tunali also testified at the hearing. Dr. Tunali testified that, following C.C.’s admission on March 3, she had seen C.C. “daily.” *Id.* at 15. Dr. Tunali testified that C.C. believes that her family members were killed and replaced by “clones” and that C.C. had weapons because she did not feel “safe” at home. *Id.* at 17-18. Dr. Tunali further testified that C.C. thought the only way she could be sure whether her mother was actually her mother was “to take the chip from the woman’s abdomen.” *Id.* at 19. Dr. Tunali testified that she had diagnosed C.C. with schizophrenia because C.C. was “delusional” and exhibits “other paranoidias as well.” *Id.*
- [7] Dr. Tunali further testified that C.C. refused to let hospital staff take her vitals or draw her blood because she was “paranoid” that the hospital staff were “cloning her.” *Id.* at 20. Dr. Tunali also noted that C.C. thought she was “being poisoned” by food at home and that she is “adamantly refusing any medication” because she “does not believe in the diagnosis.” *Id.* Accordingly, Dr. Tunali testified that C.C. was “really disabled” as a result of her mental illness; that she has a “substantial impairment to her judgment, reasoning, and behavior”; and that her mental illness “impair[ed] her ability to function

independently.” *Id.* at 24. Specifically, Dr. Tunali testified that C.C. had not shown “any improvement at all” since she was admitted and that C.C. was unlikely to take her medication “[w]ithout a commitment.” *Id.*

[8] Finally, C.C. testified that she did not want to take medication for her “false diagnosis” because medications are not “tolerable” for her body. *Id.* at 33-34. She further testified that she does not feel safe at her mother’s house because she does not “think that’s [her] mom” but “think[s] she’s a clone in a human sleeve.” *Id.* at 38. And she testified that she believes her mother is “probably deceased” and that she is “concerned” that her little sister has become a “clone” as well. She further testified that there is a “group of people” who have threatened her and her family and that the staff at Eskenazi are “conspiring with” that group to “turn [her] into a clone.” *Id.* at 39.

[9] Following the hearing, the court issued its order of temporary commitment in which it found that C.C. is “suffering from Schizophrenia” and that she is “gravely disabled.” Appellant’s App. Vol. 2 at 10. Accordingly, the court ordered that C.C. be committed to Eskenazi until June 8, 2023. This appeal ensued.

Discussion and Decision

[10] C.C. appeals the temporary commitment that expired on June 8, 2023, and asserts that it was not supported by sufficient evidence. Eskenazi responds and asserts that her appeal should be dismissed as moot. “A case is moot when the

controversy at issue has been ended, settled, or otherwise disposed of so that the court can give the parties no effective relief.” *E.F. v. St. Vincent Hosp. and Health Care Ctr., Inc.*, 188 N.E.3d 464, 466 (Ind. 2022). However, under Indiana common law, the appellate courts have discretion to decide moot cases that present issues of great public importance that are likely to recur. *Id.*

[11] In the context of temporary mental health commitments, this Court “routinely consider[s] the merits” of moot cases where the appeal addresses a novel issue, presents a “close case,” or presents an opportunity to develop case law on a complicated topic. *Id.* at 467. We do so because a “[c]ivil commitment for any purpose has a very significant impact on the individual and constitutes a significant deprivation of liberty that requires due process protection.” *Id.* (quotations and citation omitted). However, “because one of the hallmarks of a moot case is the court’s inability to provide effective relief, appellate courts are not required to issue an opinion in every moot case.” *Id.* (citations omitted). Rather, we apply the mootness exception “on a case-by-case basis.” *Id.* at 465. A party appealing a moot case bears the burden of proving that the public-interest exception applies. *See Bookwalter v. Ind. Election Comm’n*, 209 N.E.3d 438, 443-44 (Ind. Ct. App. 2023), *trans. pending*.

[12] Here, C.C. has not met her burden on appeal to demonstrate that the public-interest exception applies. The only reference C.C. makes to the public-interest exception is in a footnote in which she acknowledges that there is an exception to the mootness doctrine:

C.C. acknowledges that her temporary commitment expires on June 8, 2023, the day this brief is being filed. App. 9-10. However, “Indiana recognizes a public interest exception to the mootness doctrine, which may be invoked when the issue involves a question of great public importance which is likely to recur.” *E.F. v. St. Vincent Hosp. & Health Care Ctr., Inc.*, 188 N.E.3d 464, 466 (Ind. 2022) (quotation omitted). The Indiana Supreme Court has noted that because of “the fundamental interests at stake” in civil commitment cases, “review of the issues presented is important, including the nuances of the sufficiency of the evidence to support a commitment.” *Id.* at 467.

Appellant’s Br. at 9 n.1

[13] As Eskenazi points out, other than that generalized footnote, C.C. does not make any argument that her appeal involves an issue of great public importance. Indeed, she does not claim that her appeal presents a novel issue, a close case, or an opportunity to develop case law on a complicated topic. *Cf., e.g., T.W. v. St. Vincent Hosp. and Health Care Ctr., Inc.*, 121 N.E.3d 1039, 1042 (Ind. 2019) (choosing to address a moot temporary commitment because the appeal involved the important public question of the probate commissioner’s authority to enter civil commitment orders).

[14] Further, C.C. has failed to establish that the exception applies for a second reason. C.C. frames the issue on appeal as whether “there was insufficient evidence to meet the clear and convincing standard of proof for grave disability required for involuntary commitment under Indiana law.” Appellant’s Br. at 16. But C.C.’s stated issue is simply a framing of the issue using the relevant standard of review. *See Civ. Commitment of T.K. v. Dep’t of Veterans Affairs*, 27

N.E.3d 271, 273 (Ind. 2015) (“[A]n appellate court will affirm if, considering only the probative evidence and the reasonable inferences supporting it, without weighing evidence or assessing witness credibility, a reasonable trier of fact could find [the necessary elements] proven by clear and convincing evidence.” (quotation omitted)). As Eskenazi argues, “[t]o accept CC’s argument would allow the public-interest exception to swallow the mootness doctrine in nearly every appeal of an expired temporary commitment order, as sufficiency of the evidence is the most frequent argument raised in commitment cases.” Appellee’s Br. at 10. And we agree with Eskenazi that this “was not the intention behind” *E.F. Id.* at 11. Because C.C. has failed to satisfy her burden to show that the public-interest exception to the mootness doctrine applies,¹ we dismiss the appeal.

[15] Dismissed.

Tavitas, J., and Kenworthy, J., concur.

¹ In any event, we hold that this case does not present a novel issue, a close call, or a complicated topic.