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FOR CONSIDERATION By the Committee on Children, Families, and Elder Affairs

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A bill to be entitled

An act relating to mental health and substance abuse treatment; amending s. 916.106, F.S.; redefining the term "court" for purposes of the Forensic Client Services Act to include county courts; amending s. 916.13, F.S.; requiring the Department of Children and Family Services to provide a discharged defendant with a 7-day supply of psychotropic medication when he or she is returning to jail from a state treatment facility; requiring the department to prescribe a specified formulary when filling prescriptions for psychotropic medications; creating s. 916.185, F.S.; creating the Forensic Hospital Diversion Pilot Program; providing legislative intent; providing definitions; requiring the department to implement a Forensic Hospital Diversion Pilot Program in two specified judicial circuits; providing the scope of eligibility for the pilot program; providing legislative intent concerning training; authorizing the department to adopt rules; directing the Office of Program Policy Analysis and Government Accountability to submit a report to the Governor and Legislature; amending s. 951.23, F.S.; defining the term "facility" for purposes of the administration of county and municipal detention facilities to include detention facilities and residential probation centers; requiring county and municipal detention facilities to use a formulary approved by the Department of Children and Family Services when prescribing psychotropic

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medications for defendants discharged from state treatment facilities; providing an effective date.

Be It Enacted by the Legislature of the State of Florida:

Section 1. Subsection (5) of section 916.106, Florida Statutes, is amended to read:

916.106 Definitions.—For the purposes of this chapter, the term:

- (5) "Court" means the circuit or county court.
- Section 2. Subsection (2) of section 916.13, Florida Statutes, is amended to read:
- 916.13 Involuntary commitment of defendant adjudicated incompetent.—
- (2) A defendant who has been charged with a felony and who has been adjudicated incompetent to proceed due to mental illness, and who meets the criteria for involuntary commitment to the department under the provisions of this chapter, may be committed to the department, and the department shall retain and treat the defendant.
- (a) No later than 6 months after the date of admission and at the end of any period of extended commitment, or at any time the administrator or designee shall have determined that the defendant has regained competency to proceed or no longer meets the criteria for continued commitment, the administrator or designee shall file a report with the court pursuant to the applicable Florida Rules of Criminal Procedure.
- (b) Pursuant to the court order finding a defendant competent to proceed, a defendant who is being discharged from a

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state treatment facility under this section shall be provided a 7-day supply of the psychotropic medications he or she is receiving at the time of discharge, which medications shall be transported with the defendant and provided to jail personnel. The defendant shall be maintained on such medications to accommodate continuity of care and to ensure the ongoing level of treatment that successfully assisted the defendant in attaining competence to proceed or caused the defendant to no longer meet the requirement for continued commitment. The most recent Florida State Hospital formulary approved by the department shall be used when filling prescriptions for psychotropic medications prescribed to defendants being discharged from state treatment facilities under this section.

Section 3. Section 916.185, Florida Statutes, is created to read:

916.185 Forensic Hospital Diversion Pilot Program.-

(1) LEGISLATIVE FINDINGS AND INTENT.—The Legislature finds that many jail inmates who have serious mental illnesses and who are committed to state forensic mental health treatment facilities for restoration of competency to proceed could be served more effectively and at less cost in community-based alternative programs. The Legislature further finds that many people who have serious mental illnesses and who have been discharged from state forensic mental health treatment facilities could avoid recidivism to the criminal justice and forensic mental health systems if they received specialized treatment in the community. Therefore, it is the intent of the Legislature to create the Forensic Hospital Diversion Pilot Program to serve individuals who have mental illnesses or co-

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occurring mental illnesses and substance use disorders and who are involved in or at risk of entering state forensic mental health treatment facilities, prisons, jails, or state civil mental health treatment facilities.

- (2) DEFINITIONS.—As used in this section, the term:
- (a) "Best practices" means treatment services that incorporate the most effective and acceptable interventions available in the care and treatment of individuals who are diagnosed as having mental illnesses or co-occurring mental illnesses and substance use disorders.
- (b) "Community forensic system" means the community mental health and substance use forensic treatment system, including the comprehensive set of services and supports provided to individuals involved in or at risk of becoming involved in the criminal justice system.
- (c) "Evidence-based practices" means interventions and strategies that, based on the best available empirical research, demonstrate effective and efficient outcomes in the care and treatment of individuals who are diagnosed as having mental illnesses or co-occurring mental illnesses and substance use disorders.
- (3) CREATION.—There is created a Forensic Hospital
 Diversion Pilot Program that will provide competency-restoration
 and community-reintegration services in locked residential
 treatment facilities when appropriate, based on considerations
 of public safety, the needs of the individual, and available
 resources.
- (a) The department shall implement a Forensic Hospital Diversion Pilot Program in Escambia County, in conjunction with

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the First Judicial Circuit in Escambia County, and in

- Hillsborough County, in conjunction with the Thirteenth Judicial
- 119 Circuit in Hillsborough County, modeled after the Miami-Dade
- 120 Forensic Alternative Center, taking into account local needs and
- resources.

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- (b) In creating and implementing the program, the department shall include a comprehensive continuum of care and services that use evidence-based practices and best practices to treat people who have mental health and co-occurring substance use disorders.
- (c) The department and the corresponding judicial circuits shall implement this section within available resources. The department may reallocate resources from forensic mental health programs or other adult mental health programs serving individuals involved in the criminal justice system.
- (4) ELIGIBILITY.—Participation in the Forensic Hospital Diversion Pilot Program is limited to persons who:
 - (a) Are 18 years of age or older;
- (b) Are charged with a nonviolent felony of the second degree or a nonviolent felony of the third degree;
- (c) Are adjudicated incompetent to proceed to trial or not guilty by reason of insanity pursuant to this chapter;
- (d) Meet public safety and treatment criteria established by the department for placement in a community setting; and
- (e) Otherwise would be admitted to a state mental health treatment facility.
- (5) TRAINING.—The Legislature encourages the Florida

 Supreme Court, in consultation and cooperation with the Supreme

 Court Mental Health and Substance Abuse Committee, to develop

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educational training for judges in the pilot program areas which focuses on the community forensic system.

- (6) RULEMAKING.—The department may adopt rules under ss. 120.536(1) and 120.54 to administer this section.
- Government Accountability shall review and evaluate the Forensic Hospital Diversion Pilot Program and submit a report to the Governor, the President of the Senate, and the Speaker of the House of Representatives by December 31, 2012. The report shall examine the efficiency and cost-effectiveness of providing forensic services in secure, outpatient, community-based settings. In addition, the report shall examine the impact of the Forensic Hospital Diversion Pilot Program on public health and safety.

Section 4. Subsections (1) and (4) of section 951.23, Florida Statutes, are amended to read:

951.23 County and municipal detention facilities; definitions; administration; standards and requirements.—

- (1) DEFINITIONS.—As used in this section, the term:
- (a) "County detention facility" means a county jail, a county stockade, a county work camp, a county residential probation center, and any other place except a municipal detention facility used by a county or county officer for the detention of persons charged with or convicted of either felony or misdemeanor.
- (b) "County residential probation center" means a countyoperated facility housing offenders serving misdemeanor sentences or first-time felony sentences. Such facilities shall provide or contract for the provision of the programs

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established under s. 951.231.

- (c) "County prisoner" means a person who is detained in a county detention facility by reason of being charged with or convicted of either felony or misdemeanor.
- (d) "Facility" means a county detention facility, county residential probation center, or municipal detention facility.
- (e) (d) "Municipal detention facility" means a city jail, a city stockade, a city prison camp, and any other place except a county detention facility used by a municipality or municipal officer for the detention of persons charged with or convicted of violation of municipal laws or ordinances.
- $\underline{\text{(f)}}$ "Municipal prisoner" means a person who is detained in a municipal detention facility by reason of being charged with or convicted of violation of municipal law or ordinance.
- (g) (f) "Reduced custody housing area" means that area of a county detention facility or municipal detention facility which is designed to hold a large number of prisoners in a dormitory or barracks-type setting. The area may or may not have a security exterior, limited access, or exterior walls constructed of canvas, cloth, or any material similarly flexible or woven, which is flame resistant and is supported by a structural frame of metal or similar durable material.
- (4) STANDARDS FOR SHERIFFS AND CHIEF CORRECTIONAL OFFICERS.—
- (a) There shall be established a five-member working group consisting of three persons appointed by the Florida Sheriffs Association and two persons appointed by the Florida Association of Counties to develop model standards for county and municipal detention facilities. By October 1, 1996, each sheriff and chief

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correctional officer shall adopt, at a minimum, the model standards with reference to:

- 1.a. The construction, equipping, maintenance, and operation of county and municipal detention facilities.
- b. The cleanliness and sanitation of county and municipal detention facilities; the number of county and municipal prisoners who may be housed therein per specified unit of floor space; the quality, quantity, and supply of bedding furnished to such prisoners; the quality, quantity, and diversity of food served to them and the manner in which it is served; the furnishing to them of medical attention and health and comfort items; and the disciplinary treatment which may be meted out to them.

Notwithstanding the provisions of the otherwise applicable building code, a reduced custody housing area may be occupied by inmates or may be used for sleeping purposes as allowed in subsection (7). The sheriff or chief correctional officer shall provide that a reduced custody housing area shall be governed by fire and life safety standards which do not interfere with the normal use of the facility and which affect a reasonable degree of compliance with rules of the State Fire Marshal for correctional facilities.

2. The confinement of prisoners by classification and providing, whenever possible, for classifications which separate males from females, juveniles from adults, felons from misdemeanants, and those awaiting trial from those convicted and, in addition, providing for the separation of special risk prisoners, such as the mentally ill, alcohol or narcotic

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addicts, sex deviates, suicide risks, and any other classification which the local unit may deem necessary for the safety of the prisoners and the operation of the facility pursuant to degree of risk and danger criteria. Nondangerous felons may be housed with misdemeanants.

(b) A county or municipal detention facility which stocks medicinal drugs in quantities other than individual prescriptions must obtain the services of a consultant pharmacist or dispensing physician and comply with the licensing requirements of chapter 465. A facility which has a valid license pursuant to chapter 465 shall have that part of its medical services relating to procedures for the safe handling and storage of medicinal drugs exempt from the inspection requirements of this section. A facility which maintains only individual prescriptions dispensed by a licensed pharmacist is not required to be licensed under chapter 465. All facilities filling prescriptions for psychotropic medications prescribed to defendants discharged from state treatment facilities under s. 916.13 shall follow the most recent Florida State Hospital formulary approved by the Department of Children and Family Services.

Section 5. This act shall take effect July 1, 2011.