

1 A bill to be entitled
2 An act relating to behavioral health care services;
3 amending s. 394.453, F.S.; revising legislative intent
4 and providing legislative findings for the Florida
5 Mental Health Act; amending ss. 394.66 and 397.305,
6 F.S.; revising legislative intent with respect to
7 mental health and substance abuse treatment services;
8 amending s. 394.9082, F.S.; requiring behavioral
9 health managing entities to coordinate service
10 delivery plans with their respective counties or
11 circuits; providing responsibilities of county
12 governments for designation of receiving facilities
13 for the examination and assessment of persons with
14 mental health or substance use disorders; authorizing
15 the Department of Children and Families to monitor and
16 enforce compliance with chapter 394, F.S., relating to
17 mental health; requiring managing entities to provide
18 certain technical assistance; requiring managing
19 entities to develop and implement transportation
20 plans; requiring local law enforcement agencies, local
21 governments, and certain providers to review and
22 approve transportation plans; providing departmental
23 authority for final approval of such plans; amending
24 s. 397.675, F.S.; revising criteria for involuntary
25 admission for assessment, stabilization, and treatment
26 of persons with substance use or mental health

27 disorders; amending s. 397.6793, F.S.; specifying
28 professionals authorized to execute a certificate for
29 emergency admission; providing criteria for emergency
30 admission; amending s. 397.681, F.S.; prohibiting a
31 court from charging a fee for the filing of a petition
32 for involuntary assessment and stabilization; amending
33 s. 397.6811, F.S.; revising who may file a petition
34 for involuntary assessment and stabilization; amending
35 s. 397.6818, F.S.; providing a time limitation on a
36 court order authorizing involuntary assessment and
37 stabilization; amending ss. 397.697, 397.6971 and
38 397.6977, F.S.; revising the maximum duration of
39 court-ordered involuntary treatment and conforming
40 provisions; amending s. 397.6955, F.S.; revising
41 requirements for scheduling a hearing on a petition
42 for involuntary treatment; requiring the Louis de la
43 Parte Florida Mental Health Institute within the
44 University of South Florida to provide certain
45 information to the department on a monthly basis;
46 providing an effective date.

47
48 Be It Enacted by the Legislature of the State of Florida:

49
50 Section 1. Section 394.453, Florida Statutes, is amended
51 to read:

52 394.453 Legislative findings and intent.—

53 (1) The Legislature finds that mental health and substance
54 use disorders are diseases of the brain; are complex medical
55 conditions that encompass biological, genetic, psychological,
56 cultural, and social factors; and are subspecialties within the
57 field of medical practice. The Legislature recognizes that
58 behavioral health disorders may temporarily or permanently
59 affect a person's ability to reason, exercise good judgment,
60 recognize the need for services, or sufficiently provide self-
61 care; thus responsibility for such a person's care must be
62 delegated to a third party and may be vested in an authorized,
63 licensed, qualified health professional who can provide
64 behavioral health services.

65 (2) It is the intent of the Legislature:

66 (a) To authorize licensed, qualified health professionals
67 to exercise the full authority of their respective scopes of
68 practice in the performance of professional functions necessary
69 to carry out the intent of this part.

70 (b) To ensure that local systems of acute care services
71 use a common protocol and apply consistent practice standards
72 that provide for nondiscriminatory and equitable access to the
73 level and duration of care based on the specific needs and
74 preferences of the persons served.

75 (c) That services provided to persons in this state use
76 the coordination-of-care principles characteristic of recovery-
77 oriented services and include social support services, such as
78 housing support, life skills and vocational training, and

79 employment assistance, necessary for persons with mental health
 80 and substance use disorders to live successfully in their
 81 communities.

82 (d) To authorize and direct the Department of Children and
 83 Families to evaluate, research, plan, and recommend to the
 84 Governor and the Legislature programs designed to reduce the
 85 occurrence, severity, duration, and disabling aspects of mental,
 86 emotional, and behavioral disorders.

87 (e) That state policy and funding decisions be driven by
 88 data that is representative of the populations served and the
 89 effectiveness of services provided.

90 (f) ~~It is the intent of the Legislature~~ That treatment
 91 programs for such disorders shall include, but not be limited
 92 to, comprehensive health, social, educational, and
 93 rehabilitative services to persons requiring intensive short-
 94 term and continued treatment in order to encourage them to
 95 assume responsibility for their treatment and recovery. It is
 96 intended that:

97 1. Such persons be provided with emergency service and
 98 temporary detention for evaluation when required;

99 2. Such persons ~~that they~~ be admitted to treatment
 100 facilities on a voluntary basis when extended or continuing care
 101 is needed and unavailable in the community;

102 3. ~~that~~ Involuntary placement be provided only when expert
 103 evaluation determines that it is necessary;

104 4. ~~that~~ Any involuntary treatment or examination be

105 accomplished in a setting that ~~which~~ is clinically appropriate
 106 and most likely to facilitate the person's return to the
 107 community as soon as possible; and

108 5. ~~that~~ Individual dignity and human rights be guaranteed
 109 to all persons who are admitted to mental health facilities or
 110 who are being held under s. 394.463. ~~It is the further intent of~~
 111 ~~the Legislature that the least restrictive means of intervention~~
 112 ~~be employed based on the individual needs of each person, within~~
 113 ~~the scope of available services.~~

114 (3) It is the policy of this state that the use of
 115 restraint and seclusion on clients is justified only as an
 116 emergency safety measure to be used in response to imminent
 117 danger to the client or others. It is, therefore, the intent of
 118 the Legislature to achieve an ongoing reduction in the use of
 119 restraint and seclusion in programs and facilities serving
 120 persons with mental illness.

121 Section 2. Subsection (2) of section 394.66, Florida
 122 Statutes, is amended to read:

123 394.66 Legislative intent with respect to substance abuse
 124 and mental health services.—It is the intent of the Legislature
 125 to:

126 (2) Recognize that mental health and substance use
 127 disorders are diseases of the brain; are complex medical
 128 conditions that encompass biological, genetic, psychological,
 129 cultural, and social factors; and are subspecialties within the
 130 field of medical practice. The Legislature recognizes that

131 behavioral health disorders may temporarily or permanently
132 affect a person's ability to reason, exercise good judgment,
133 recognize the need for services, or sufficiently provide self-
134 care, thus responsibility for such a person's care must be
135 delegated to a third party and may be vested in an authorized,
136 licensed, qualified health professional who can provide
137 behavioral health services ~~mental illness and substance abuse~~
138 ~~impairment are diseases that are responsive to medical and~~
139 ~~psychological interventions and management that integrate~~
140 ~~treatment, rehabilitative, and support services to achieve~~
141 ~~recovery.~~

142 Section 3. Subsections (4) through (12) of section
143 394.9082, Florida Statutes, are renumbered as subsections (6)
144 though (14), respectively, and new subsections (4) and (5) are
145 added to that section to read:

146 394.9082 Behavioral health managing entities.—

147 (4) COMMUNITY PLANNING.—Each managing entity shall develop
148 a plan with each county or circuit in its geographic area to
149 establish and maintain a behavioral health service system that
150 has sufficient capacity to ensure that all persons with mental
151 health or substance use disorders who are subject to involuntary
152 admission under this chapter receive prompt assessment of the
153 need for evaluation and treatment. At a minimum, the plan must
154 include the following components:

155 (a) Each county shall work with managing entities, the
156 department, community-based treatment providers, private

157 providers, local hospitals and health departments, law
158 enforcement agencies, the courts, and other local government
159 agencies to designate a receiving facility that shall be used by
160 law enforcement officers, but may be used by other authorized
161 persons, for voluntary and involuntary assessments or
162 examinations.

163 1. A county may have more than one facility or may use or
164 share the resources of adjacent counties.

165 2. The department shall suspend or withdraw such
166 designation for failure to comply with this chapter and rules
167 adopted under this chapter. Unless designated by the department,
168 a facility may not hold or treat involuntary patients under this
169 chapter.

170 (b) A managing entity shall coordinate the development of
171 a local plan that:

172 1. Includes the county or circuit.

173 2. Establishes the specifications and minimum standards
174 for access to care available in each community and specifies the
175 roles, processes, and responsibilities of community intervention
176 programs for the diversion of persons from acute care
177 placements.

178 3. Specifies the method by which local hospitals,
179 ambulatory centers, designated receiving facilities, and acute
180 care inpatient and detoxification providers will coordinate
181 activities to assess, examine, triage, intake, and process
182 persons presented on an involuntary basis.

183 4. Includes a local transportation plan as provided in s.
 184 394.462.

185 5. Provides an option to procure nonmedical transportation
 186 contracts for the transportation of patients between facilities.

187 (c) A managing entity shall provide technical assistance
 188 to counties or circuits for the development, receipt, and
 189 approval of such plans and incorporate the community resources
 190 designated in such plans when conducting the needs assessment
 191 and coordinating the resources within its assigned region.

192 (5) TRANSPORTATION PLANS.-

193 (a) Each managing entity shall develop, in consultation
 194 with local law enforcement agencies, county officials, and local
 195 acute care providers, a transportation plan for each county or
 196 circuit within its assigned region. At a minimum, the plan must
 197 address the following:

198 1. The designated public or private substance abuse
 199 receiving facility or residential detoxification facility to be
 200 used by local law enforcement agencies as their primary
 201 receiving facility.

202 2. The method of transporting a person after a law
 203 enforcement officer has relinquished physical custody of the
 204 person at a designated public or private substance abuse
 205 receiving facility or residential detoxification facility.

206 3. Provide for consumer choice with respect to a receiving
 207 facility or other designated facility, or other acute care
 208 service provider capable of meeting the person's needs, within

209 reasonable parameters of funding, geography, and safety.

210 4. Specify responsibility for and the means by which
211 transportation to and between facilities of persons in need of
212 behavioral health services will be implemented to support
213 involuntary assessments or examinations, provision of emergency
214 services, acute care placements, and attendance at involuntary
215 court proceedings and resulting commitments.

216 (b) The transportation plan shall be initiated by the
217 local managing entity and must be reviewed and approved by local
218 law enforcement agencies, county commissioners, and designated
219 acute care providers in the county or circuit before submission
220 to the managing entity. The department has final review and
221 approval authority for the transportation plan.

222 Section 4. Section 397.305, Florida Statutes, is amended
223 to read:

224 397.305 Legislative findings, intent, and purpose.—

225 (1) The Legislature finds that mental health and substance
226 use disorders are diseases of the brain; are complex medical
227 conditions that encompass biological, genetic, psychological,
228 cultural, and social factors; and are subspecialties within the
229 field of medical practice. The Legislature recognizes that
230 behavioral health disorders may temporarily or permanently
231 affect a person's ability to reason, exercise good judgment,
232 recognize the need for services, or sufficiently provide self-
233 care, thus responsibility for such a person's care must be
234 delegated to a third party and may be vested in an authorized,

235 licensed, qualified health professional who can provide
 236 behavioral health services.

237 (2)~~(1)~~ Substance abuse is a major health problem that
 238 affects multiple service systems and leads to such profoundly
 239 disturbing consequences as serious impairment, chronic
 240 addiction, criminal behavior, vehicular casualties, spiraling
 241 health care costs, AIDS, and business losses, and significantly
 242 affects the culture, socialization, and learning ability of
 243 children within our schools and educational systems. Substance
 244 abuse impairment is a disease which affects the whole family and
 245 the whole society and requires a system of care that includes
 246 prevention, intervention, clinical treatment, and recovery
 247 support services that support and strengthen the family unit.
 248 ~~Further, it is the intent of the Legislature to require the~~
 249 ~~collaboration of state agencies, service systems, and program~~
 250 ~~offices to achieve the goals of this chapter and address the~~
 251 ~~needs of the public; to establish a comprehensive system of care~~
 252 ~~for substance abuse; and to reduce duplicative requirements~~
 253 ~~across state agencies.~~ This chapter is designed to provide for
 254 substance abuse services.

255 (3)~~(2)~~ It is the goal of the Legislature to discourage
 256 substance abuse by promoting healthy lifestyles; healthy
 257 families; and drug-free schools, workplaces, and communities.

258 (4)~~(3)~~ It is the purpose of this chapter to provide for a
 259 comprehensive continuum of accessible and quality substance
 260 abuse prevention, intervention, clinical treatment, and recovery

261 support services in the least restrictive environment which
262 promotes long-term recovery while protecting and respecting the
263 rights of individuals, primarily through community-based private
264 not-for-profit providers working with local governmental
265 programs involving a wide range of agencies from both the public
266 and private sectors.

267 (5) It is the intent of the Legislature to authorize
268 licensed, qualified health professionals to exercise the full
269 authority of their respective scopes of practice in the
270 performance of professional functions necessary to carry out the
271 intent of this chapter.

272 (6) It is the intent of the Legislature that state policy
273 and funding decisions be driven by data that is representative
274 of the populations served and the effectiveness of services
275 provided.

276 (7) It is the intent of the Legislature to establish
277 expectations that services provided to persons in this state use
278 the coordination-of-care principles characteristic of recovery-
279 oriented services and include social support services, such as
280 housing support, life skills and vocational training, and
281 employment assistance, necessary for persons with mental health
282 and substance use disorders to live successfully in their
283 communities.

284 (8)-(4) It is the intent of the Legislature to ensure
285 within available resources a full system of care for substance
286 abuse services based on identified needs, delivered without

287 discrimination and with adequate provision for specialized
288 needs.

289 (9)~~(5)~~ It is the intent of the Legislature to establish
290 services for individuals with co-occurring substance abuse and
291 mental disorders.

292 (10)~~(6)~~ It is the intent of the Legislature to provide an
293 alternative to criminal imprisonment for substance abuse
294 impaired adults and juvenile offenders by encouraging the
295 referral of such offenders to service providers not generally
296 available within the juvenile justice and correctional systems,
297 instead of or in addition to criminal penalties.

298 (11)~~(7)~~ It is the intent of the Legislature to provide,
299 within the limits of appropriations and safe management of the
300 juvenile justice and correctional systems, substance abuse
301 services to substance abuse impaired offenders who are placed by
302 the Department of Juvenile Justice or who are incarcerated
303 within the Department of Corrections, in order to better enable
304 these offenders or inmates to adjust to the conditions of
305 society presented to them when their terms of placement or
306 incarceration end.

307 (12)~~(8)~~ It is the intent of the Legislature to provide for
308 assisting substance abuse impaired persons primarily through
309 health and other rehabilitative services in order to relieve the
310 police, courts, correctional institutions, and other criminal
311 justice agencies of a burden that interferes with their ability
312 to protect people, apprehend offenders, and maintain safe and

313 orderly communities.

314 (13)~~(9)~~ It is the intent of the Legislature that the
 315 freedom of religion of all citizens ~~shall~~ be inviolate. ~~Nothing~~
 316 ~~in~~ This act does not ~~shall~~ give any governmental entity
 317 jurisdiction to regulate religious, spiritual, or ecclesiastical
 318 services.

319 Section 5. Section 397.675, Florida Statutes, is amended
 320 to read:

321 397.675 Criteria for involuntary admissions, including
 322 protective custody, emergency admission, and other involuntary
 323 assessment, involuntary treatment, and alternative involuntary
 324 assessment for minors, for purposes of assessment and
 325 stabilization, and for involuntary treatment.—A person meets the
 326 criteria for involuntary admission if there is good faith reason
 327 to believe the person has a substance use or co-occurring mental
 328 health disorder and, because of this condition, has refused or
 329 is unable to determine whether examination is necessary. The
 330 refusal of services is insufficient evidence of an inability to
 331 determine whether an examination is necessary unless, without
 332 care or treatment is substance abuse impaired and, because of
 333 such impairment:

334 (1) The person is likely to neglect or refuse care for
 335 himself or herself to the extent that the neglect or refusal
 336 poses a real and present threat of substantial harm to his or
 337 her well-being;

338 (2) The person is at risk of the deterioration of his or

339 her physical or mental health and this condition may not be
340 avoided despite assistance from willing family members, friends,
341 or other services; or

342 (3) There is a substantial likelihood that the person will
343 cause serious bodily harm to himself or herself or others, as
344 shown by the person's recent behavior. ~~Has lost the power of~~
345 ~~self-control with respect to substance use; and either~~

346 ~~(2) (a) Has inflicted, or threatened or attempted to~~
347 ~~inflict, or unless admitted is likely to inflict, physical harm~~
348 ~~on himself or herself or another; or~~

349 ~~(b) Is in need of substance abuse services and, by reason~~
350 ~~of substance abuse impairment, his or her judgment has been so~~
351 ~~impaired that the person is incapable of appreciating his or her~~
352 ~~need for such services and of making a rational decision in~~
353 ~~regard thereto; however, mere refusal to receive such services~~
354 ~~does not constitute evidence of lack of judgment with respect to~~
355 ~~his or her need for such services.~~

356 Section 6. Section 397.6793, Florida Statutes, is amended
357 to read:

358 397.6793 Professional Physician's certificate for
359 emergency admission.—

360 (1) A physician, clinical psychologist, physician's
361 assistant working under the scope of practice of the supervising
362 physician, psychiatric nurse, advanced registered nurse
363 practitioner, licensed mental health counselor, licensed
364 marriage and family therapist, master's level certified

365 addiction professional for substance abuse services, or licensed
366 clinical social worker may execute a certificate stating that he
367 or she has examined a person within the preceding 5 days and
368 finds that the person appears to meet the criteria for emergency
369 admission and stating the observations upon which that
370 conclusion is based. The professional ~~physician's~~ certificate
371 must include the name of the person to be admitted, the
372 relationship between the person and the professional executing
373 the certificate ~~physician~~, the relationship between the
374 applicant and the professional executing the certificate
375 ~~physician~~, and any relationship between the professional
376 executing the certificate ~~physician~~ and the licensed service
377 provider, ~~and a statement that the person has been examined and~~
378 ~~assessed within 5 days of the application date,~~ and must include
379 factual allegations with respect to the need for emergency
380 admission, including:

381 (a) The reason for the ~~physician's~~ belief that the person
382 is substance abuse impaired; and

383 (b) The reason for the ~~physician's~~ belief that because of
384 such impairment the person has lost the power of self-control
385 with respect to substance abuse; and either

386 (c) ~~1.~~ The reason for the belief that, without care or
387 treatment:

388 1. The person is likely to neglect or refuse to care for
389 himself or herself to the extent that the neglect or refusal
390 poses a real and present threat of substantial harm to his or

391 her well-being;

392 2. The person is at risk of the deterioration of his or
393 her physical or mental health and that this condition may not be
394 avoided despite assistance from willing family members, friends,
395 or other services; or

396 3. There is a substantial likelihood that the person will
397 cause serious bodily harm to himself or herself or others, as
398 shown by the person's recent behavior. ~~the physician believes~~
399 ~~that the person has inflicted or is likely to inflict physical~~
400 ~~harm on himself or herself or others unless admitted; or~~

401 ~~2. The reason the physician believes that the person's~~
402 ~~refusal to voluntarily receive care is based on judgment so~~
403 ~~impaired by reason of substance abuse that the person is~~
404 ~~incapable of appreciating his or her need for care and of making~~
405 ~~a rational decision regarding his or her need for care.~~

406 (2) The professional ~~physician's~~ certificate must
407 recommend the least restrictive type of service that is
408 appropriate for the person. The certificate must be signed by
409 the professional ~~physician~~. If other less restrictive means are
410 not available, such as voluntary appearance for outpatient
411 evaluation, a law enforcement officer shall take the person
412 named in the certificate into custody and deliver him or her to
413 the nearest facility selected by the county for emergency
414 admission.

415 (3) A signed copy of the professional ~~physician's~~
416 certificate shall accompany the person, and shall be made a part

417 of the person's clinical record, together with a signed copy of
418 the application. The application and professional ~~physician's~~
419 certificate authorize the involuntary admission of the person
420 pursuant to, and subject to the provisions of, ss. 397.679-
421 397.6797.

422 (4) The professional ~~physician's~~ certificate must indicate
423 whether the person requires transportation assistance for
424 delivery for emergency admission and specify, pursuant to s.
425 397.6795, the type of transportation assistance necessary.

426 Section 7. Subsection (1) of section 397.681, Florida
427 Statutes, is amended to read:

428 397.681 Involuntary petitions; general provisions; court
429 jurisdiction and right to counsel.—

430 (1) JURISDICTION.—The courts have jurisdiction of
431 involuntary assessment and stabilization petitions and
432 involuntary treatment petitions for substance abuse impaired
433 persons, and such petitions must be filed with the clerk of the
434 court in the county where the person is located. The court may
435 not charge a fee for the filing of a petition under this
436 section. The chief judge may appoint a general or special
437 magistrate to preside over all or part of the proceedings. The
438 alleged impaired person is named as the respondent.

439 Section 8. Subsection (1) of section 397.6811, Florida
440 Statutes, is amended to read:

441 397.6811 Involuntary assessment and stabilization.—A
442 person determined by the court to appear to meet the criteria

443 for involuntary admission under s. 397.675 may be admitted for a
 444 period of 5 days to a hospital or to a licensed detoxification
 445 facility or addictions receiving facility, for involuntary
 446 assessment and stabilization or to a less restrictive component
 447 of a licensed service provider for assessment only upon entry of
 448 a court order or upon receipt by the licensed service provider
 449 of a petition. Involuntary assessment and stabilization may be
 450 initiated by the submission of a petition to the court.

451 (1) If the person upon whose behalf the petition is being
 452 filed is an adult, a petition for involuntary assessment and
 453 stabilization may be filed by the respondent's spouse or
 454 guardian, any relative, a private practitioner, the director of
 455 a licensed service provider or the director's designee, or any
 456 adult willing to provide testimony that he or she has personally
 457 observed the actions of that person and believes that person to
 458 be a threat to himself or herself or others ~~three adults who~~
 459 ~~have personal knowledge of the respondent's substance abuse~~
 460 ~~impairment.~~

461 Section 9. Subsection (4) is added to section 397.6818,
 462 Florida Statutes, to read:

463 397.6818 Court determination.—At the hearing initiated in
 464 accordance with s. 397.6811(1), the court shall hear all
 465 relevant testimony. The respondent must be present unless the
 466 court has reason to believe that his or her presence is likely
 467 to be injurious to him or her, in which event the court shall
 468 appoint a guardian advocate to represent the respondent. The

469 respondent has the right to examination by a court-appointed
470 qualified professional. After hearing all the evidence, the
471 court shall determine whether there is a reasonable basis to
472 believe the respondent meets the involuntary admission criteria
473 of s. 397.675.

474 (4) The order is valid only until executed or, if not
475 executed, for the period specified in the order. If no time
476 limit is specified in the order, the order is valid for 7 days
477 after the date the order is signed.

478 Section 10. Subsection (1) of section 397.697, Florida
479 Statutes, is amended to read:

480 397.697 Court determination; effect of court order for
481 involuntary substance abuse treatment.—

482 (1) When the court finds that the conditions for
483 involuntary substance abuse treatment have been proved by clear
484 and convincing evidence, it may order the respondent to undergo
485 involuntary treatment by a licensed service provider for a
486 period not to exceed 90 ~~60~~ days. If the court finds it
487 necessary, it may direct the sheriff to take the respondent into
488 custody and deliver him or her to the licensed service provider
489 specified in the court order, or to the nearest appropriate
490 licensed service provider, for involuntary treatment. When the
491 conditions justifying involuntary treatment no longer exist, the
492 individual must be released as provided in s. 397.6971. When the
493 conditions justifying involuntary treatment are expected to
494 exist after 90 ~~60~~ days of treatment, a renewal of the

495 involuntary treatment order may be requested pursuant to s.
 496 397.6975 before ~~prior to~~ the end of the 90-day ~~60-day~~ period.

497 Section 11. Section 397.6971, Florida Statutes, is amended
 498 to read:

499 397.6971 Early release from involuntary substance abuse
 500 treatment.—

501 (1) At any time before ~~prior to~~ the end of the 90-day ~~60-~~
 502 ~~day~~ involuntary treatment period, or before ~~prior to~~ the end of
 503 any extension granted pursuant to s. 397.6975, an individual
 504 admitted for involuntary treatment may be determined eligible
 505 for discharge to the most appropriate referral or disposition
 506 for the individual when:

507 (a) The individual no longer meets the criteria specified
 508 in s. 397.675 for involuntary admission and has given his or her
 509 informed consent to be transferred to voluntary treatment
 510 status;

511 (b) If the individual was admitted on the grounds of
 512 likelihood of infliction of physical harm upon himself or
 513 herself or others, such likelihood no longer exists; ~~or~~

514 (c) If the individual was admitted on the grounds of need
 515 for assessment and stabilization or treatment, accompanied by
 516 inability to make a determination respecting such need, either:

- 517 1. Such inability no longer exists; or
- 518 2. It is evident that further treatment will not bring
 519 about further significant improvements in the individual's
 520 condition;

521 (d) The individual is no longer in need of services; or
 522 (e) The director of the service provider determines that
 523 the individual is beyond the safe management capabilities of the
 524 provider.

525 (2) Whenever a qualified professional determines that an
 526 individual admitted for involuntary treatment is ready for early
 527 release for any of the reasons listed in subsection (1), the
 528 service provider shall immediately discharge the individual, and
 529 must notify all persons specified by the court in the original
 530 treatment order.

531 Section 12. Section 397.6977, Florida Statutes, is amended
 532 to read:

533 397.6977 Disposition of individual upon completion of
 534 involuntary substance abuse treatment.—At the conclusion of the
 535 90-day ~~60-day~~ period of court-ordered involuntary treatment, the
 536 individual is automatically discharged unless a motion for
 537 renewal of the involuntary treatment order has been filed with
 538 the court pursuant to s. 397.6975.

539 Section 13. Section 397.6955, Florida Statutes, is amended
 540 to read:

541 397.6955 Duties of court upon filing of petition for
 542 involuntary treatment.—Upon the filing of a petition for the
 543 involuntary treatment of a substance abuse impaired person with
 544 the clerk of the court, the court shall immediately determine
 545 whether the respondent is represented by an attorney or whether
 546 the appointment of counsel for the respondent is appropriate.

547 The court shall schedule a hearing to be held on the petition
548 within 5 ~~10~~ days, unless a continuance is granted. A copy of the
549 petition and notice of the hearing must be provided to the
550 respondent; the respondent's parent, guardian, or legal
551 custodian, in the case of a minor; the respondent's attorney, if
552 known; the petitioner; the respondent's spouse or guardian, if
553 applicable; and such other persons as the court may direct, and
554 have such petition and order personally delivered to the
555 respondent if he or she is a minor. The court shall also issue a
556 summons to the person whose admission is sought.

557 Section 14. In order to maximize efficiency, avoid
558 duplication, and provide cost savings, the Louis de la Parte
559 Florida Mental Health Institute within the University of South
560 Florida shall provide monthly to the Department of Children and
561 Families copies of each of the following:

- 562 (1) Ex parte orders for involuntary examination.
563 (2) Professional certificates for initiating involuntary
564 examination.
565 (3) Law enforcement reports on involuntary examination.
566 (4) Involuntary outpatient placement orders.
567 (5) Involuntary inpatient placement orders.

568 Section 15. This act shall take effect July 1, 2016.