1	A bill to be entitled
2	An act relating to mental illness; providing a short
3	title; amending s. 394.455, F.S.; defining the term
4	"electronic means"; amending s. 394.462, F.S.;
5	requiring a law enforcement agency that transports
6	persons to a receiving facility to have a memorandum
7	of understanding with the facility; requiring that
8	custody of a person who is transported to a receiving
9	or treatment facility be relinquished to a responsible
10	person at the facility; amending ss. 394.4655 and
11	394.467, F.S.; specifying that a psychiatric
12	examination by certain personnel be conducted face-to-
13	face, in person or by electronic means; providing an
14	effective date.
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16	Be It Enacted by the Legislature of the State of Florida:
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18	Section 1. This act may be cited as the "Deputy Anthony
19	Forgione Act."
20	Section 2. Subsection (38) is added to section 394.455,
21	Florida Statutes, to read:
22	394.455 Definitions.—As used in this part, unless the
23	context clearly requires otherwise, the term:
24	(38) "Electronic means" means a form of telecommunication
25	that requires all parties to maintain visual as well as audio
26	communication.
27	Section 3. Present paragraphs (k) and (l) of subsection (1)
28	of section 394.462, Florida Statutes, are redesignated as
29	paragraphs (l) and (m), respectively, a new paragraph (k) is

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30	added to that subsection, present subsection (3) of that section
31	is renumbered as subsection (4), and a new subsection (3) is
32	added to that section, to read:
33	394.462 Transportation
34	(1) TRANSPORTATION TO A RECEIVING FACILITY
35	(k) Each law enforcement agency shall develop a memorandum
36	of understanding with each receiving facility within the law
37	enforcement agency's jurisdiction which reflects a single set of
38	protocols for the safe and secure transportation of the person
39	and transfer of custody of the person. These protocols must also
40	address crisis-intervention measures.
41	(3) TRANSFER OF CUSTODYCustody of a person who is
42	transported pursuant to this part, along with related
43	documentation, shall be relinquished to a responsible individual
44	at the appropriate receiving or treatment facility.
45	Section 4. Paragraphs (a) and (b) of subsection (2) of
46	section 394.4655, Florida Statutes, are amended to read:
47	394.4655 Involuntary outpatient placement
48	(2) INVOLUNTARY OUTPATIENT PLACEMENT
49	(a)1. A patient who is being recommended for involuntary
50	outpatient placement by may be retained by a receiving facility
51	upon the recommendation of the administrator of <u>the</u> a receiving
52	facility where the patient has been examined may be retained by
53	the facility and after adherence to the notice of hearing
54	procedures provided in s. 394.4599. The recommendation must be
55	supported by the opinion of a psychiatrist and the second
56	opinion of a clinical psychologist or another psychiatrist, both
57	of whom have personally examined the patient within the
58	preceding 72 hours, that the criteria for involuntary outpatient

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59 placement are met. However, in a county having a population of 60 fewer than 50,000, if the administrator certifies that a no 61 psychiatrist or clinical psychologist is not available to 62 provide the second opinion, the second opinion may be provided 63 by a licensed physician who has postgraduate training and experience in diagnosis and treatment of mental and nervous 64 65 disorders or by a psychiatric nurse as defined in this chapter. 66 Any second opinion authorized in this subparagraph may be 67 conducted through a face-to-face examination, in person or by 68 electronic means. Such a recommendation must be entered on an 69 involuntary outpatient placement certificate that authorizes -70 which certificate must authorize the receiving facility to 71 retain the patient pending completion of a hearing. The 72 certificate shall be made a part of the patient's clinical 73 record.

74 2. If the patient has been stabilized and no longer meets 75 the criteria for involuntary examination pursuant to s. 76 394.463(1), the patient must be released from the receiving 77 facility while awaiting the hearing for involuntary outpatient 78 placement. Before Prior to filing a petition for involuntary 79 outpatient treatment, the administrator of a receiving facility 80 or a designated department representative must shall identify 81 the service provider that will have primary responsibility for 82 service provision under an order for involuntary outpatient placement, unless the person is otherwise participating in 83 outpatient psychiatric treatment and is not in need of public 84 85 financing for that treatment, in which case the individual, if 86 eligible, may be ordered to involuntary treatment pursuant to 87 the existing psychiatric treatment relationship.

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88 3. The service provider shall prepare a written proposed 89 treatment plan in consultation with the patient or the patient's guardian advocate, if appointed, for the court's consideration 90 91 for inclusion in the involuntary outpatient placement order. The 92 service provider shall also provide a copy of the proposed treatment plan to the patient and the administrator of the 93 94 receiving facility. The treatment plan must specify the nature 95 and extent of the patient's mental illness, . The treatment plan 96 must address the reduction of symptoms that necessitate 97 involuntary outpatient placement, and include measurable goals and objectives for the services and treatment that are provided 98 99 to treat the person's mental illness and to assist the person in 100 living and functioning in the community or to attempt to prevent a relapse or deterioration. Service providers may select and 101 102 supervise provide supervision to other individuals to implement 103 specific aspects of the treatment plan. The services in the 104 treatment plan must be deemed to be clinically appropriate by a 105 physician, clinical psychologist, psychiatric nurse, mental 106 health counselor, marriage and family therapist, or clinical 107 social worker, as defined in this chapter, who consults with, or 108 is employed or contracted by, the service provider. The service 109 provider must certify to the court in the proposed treatment plan whether sufficient services for improvement and 110 111 stabilization are currently available and whether the service provider agrees to provide those services. If the service 112 113 provider certifies that the services in the proposed treatment 114 plan are not available, the petitioner may not file the 115 petition.

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(b) If a patient in involuntary inpatient placement meets

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117 the criteria for involuntary outpatient placement, the 118 administrator of the treatment facility may, before the 119 expiration of the period during which the treatment facility is 120 authorized to retain the patient, recommend involuntary 121 outpatient placement. The recommendation must be supported by the opinion of a psychiatrist and the second opinion of a 122 123 clinical psychologist or another psychiatrist, both of whom have 124 personally examined the patient within the preceding 72 hours, 125 that the criteria for involuntary outpatient placement are met. However, in a county having a population of fewer than 50,000, 126 127 if the administrator certifies that a no psychiatrist or 128 clinical psychologist is not available to provide the second 129 opinion, the second opinion may be provided by a licensed 130 physician who has postgraduate training and experience in diagnosis and treatment of mental and nervous disorders or by a 131 132 psychiatric nurse as defined in s. 394.455(23). Any second 133 opinion authorized in this subparagraph may be conducted through 134 a face-to-face examination, in person or by electronic means. 135 Such a recommendation must be entered on an involuntary 136 outpatient placement certificate, and the certificate must shall 137 be made a part of the patient's clinical record. 138 Section 5. Subsection (2) of section 394.467, Florida Statutes, is amended to read: 139

140

394.467 Involuntary inpatient placement.-

(2) ADMISSION TO A TREATMENT FACILITY.—A patient may be
retained by a receiving facility or involuntarily placed in a
treatment facility upon the recommendation of the administrator
of <u>the</u> a receiving facility where the patient has been examined
and after adherence to the notice and hearing procedures

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146 provided in s. 394.4599. The recommendation must be supported by 147 the opinion of a psychiatrist and the second opinion of a 148 clinical psychologist or another psychiatrist, both of whom have 149 personally examined the patient within the preceding 72 hours, 150 that the criteria for involuntary inpatient placement are met. 151 However, in a county that has a population of fewer counties of 152 less than 50,000 population, if the administrator certifies that a no psychiatrist or clinical psychologist is not available to 153 154 provide the second opinion, the such second opinion may be provided by a licensed physician who has with postgraduate 155 156 training and experience in diagnosis and treatment of mental and 157 nervous disorders or by a psychiatric nurse as defined in s. 158 394.455(23). Any second opinion authorized in this subsection 159 may be conducted through a face-to-face examination, in person or by electronic means. Such recommendation shall be entered on 160 161 an involuntary inpatient placement certificate that authorizes τ 162 which certificate shall authorize the receiving facility to 163 retain the patient pending transfer to a treatment facility or 164 completion of a hearing.

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Section 6. This act shall take effect July 1, 2009.

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