1 A bill to be entitled 2 An act relating to mental health treatment; amending 3 s. 916.107, F.S.; authorizing forensic and civil facilities to order the continuation of 4 5 psychotherapeutics for individuals receiving such 6 medications in the jail before admission; amending s. 7 916.13, F.S.; providing timeframes within which 8 competency hearings must be held; amending s. 916.145, 9 F.S.; revising the time for dismissal of certain 10 charges for defendants that remain incompetent to 11 proceed to trial; providing exceptions; amending s. 12 916.15, F.S.; providing a timeframe within which commitment hearings must be held; amending s. 985.19, 13 F.S.; standardizing the protocols, procedures, 14 15 diagnostic criteria, and information and findings that 16 must be included in an expert's competency evaluation 17 report; providing an effective date. 18 19 Be It Enacted by the Legislature of the State of Florida: 20 21 Section 1. Paragraph (a) of subsection (3) of section 22 916.107, Florida Statutes, is amended to read: 23 916.107 Rights of forensic clients.-24 (3) RIGHT TO EXPRESS AND INFORMED CONSENT.-25 A forensic client shall be asked to give express and (a) 26 informed written consent for treatment. If a client refuses such Page 1 of 12

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27 treatment as is deemed necessary and essential by the client's 28 multidisciplinary treatment team for the appropriate care of the 29 client, such treatment may be provided under the following 30 circumstances:

In an emergency situation in which there is immediate 31 1. 32 danger to the safety of the client or others, such treatment may 33 be provided upon the written order of a physician for a period 34 not to exceed 48 hours, excluding weekends and legal holidays. 35 If, after the 48-hour period, the client has not given express 36 and informed consent to the treatment initially refused, the administrator or designee of the civil or forensic facility 37 shall, within 48 hours, excluding weekends and legal holidays, 38 petition the committing court or the circuit court serving the 39 county in which the facility is located, at the option of the 40 41 facility administrator or designee, for an order authorizing the continued treatment of the client. In the interim, the need for 42 43 treatment shall be reviewed every 48 hours and may be continued without the consent of the client upon the continued written 44 45 order of a physician who has determined that the emergency situation continues to present a danger to the safety of the 46 client or others. 47

48 2. In a situation other than an emergency situation, the 49 administrator or designee of the facility shall petition the 50 court for an order authorizing necessary and essential treatment 51 for the client.

52

a. If the client has been receiving psychotherapeutic Page 2 of 12

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53 medications at the jail at the time of transfer to the forensic 54 or civil facility and lacks the capacity to make an informed 55 decision regarding mental health treatment at the time of 56 admission, the admitting physician may order continued 57 administration of psychotherapeutic medications if, in the 58 clinical judgment of the physician, abrupt cessation of 59 psychotherapeutic medications could pose a risk to the health or 60 safety of the client during the time a court order to medicate 61 is pursued. The administrator or designee of the civil or forensic facility shall, within 5 days after admission, 62 63 excluding weekends and legal holidays, petition the committing 64 court or the circuit court serving the county in which the facility is located, at the option of the facility administrator 65 66 or designee, for an order authorizing the continued treatment of 67 a client. The jail physician shall provide a current psychotherapeutic medication order at the time of transfer to 68 69 the forensic or civil facility or upon request of the admitting 70 physician after the client is evaluated. 71 b. The court order shall allow such treatment for up to a

72 period not to exceed 90 days <u>after</u> following the date of the 73 entry of the order. Unless the court is notified in writing that 74 the client has provided express and informed consent in writing 75 or that the client has been discharged by the committing court, 76 the administrator or designee shall, before the expiration of 77 the initial 90-day order, petition the court for an order 78 authorizing the continuation of treatment for another <u>90 days</u> 79 Der 2 ef 40

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79 90-day period. This procedure shall be repeated until the client 80 provides consent or is discharged by the committing court. 3. At the hearing on the issue of whether the court should 81 82 enter an order authorizing treatment for which a client was 83 unable to or refused to give express and informed consent, the 84 court shall determine by clear and convincing evidence that the 85 client has mental illness, intellectual disability, or autism, 86 that the treatment not consented to is essential to the care of 87 the client, and that the treatment not consented to is not 88 experimental and does not present an unreasonable risk of serious, hazardous, or irreversible side effects. In arriving at 89 90 the substitute judgment decision, the court must consider at least the following factors: 91 The client's expressed preference regarding treatment; 92 a. 93 The probability of adverse side effects; b. 94 The prognosis without treatment; and с. 95 d. The prognosis with treatment. 96 97 The hearing shall be as convenient to the client as may be consistent with orderly procedure and shall be conducted in 98 99 physical settings not likely to be injurious to the client's 100 condition. The court may appoint a general or special magistrate to preside at the hearing. The client or the client's guardian, 101 102 and the representative, shall be provided with a copy of the 103 petition and the date, time, and location of the hearing. The 104 client has the right to have an attorney represent him or her at Page 4 of 12

105 the hearing, and, if the client is indigent, the court shall 106 appoint the office of the public defender to represent the 107 client at the hearing. The client may testify or not, as he or 108 she chooses, and has the right to cross-examine witnesses and 109 may present his or her own witnesses.

Section 2. Subsection (2) of section 916.13, Florida
Statutes, is amended to read:

112 916.13 Involuntary commitment of defendant adjudicated 113 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.

120 <u>(a) Within No later than 6 months after the date of</u> 121 admission and at the end of any period of extended commitment, 122 or at any time the administrator or designee <u>has shall have</u> 123 determined that the defendant has regained competency to proceed 124 or no longer meets the criteria for continued commitment, the 125 administrator or designee shall file a report with the court 126 pursuant to the applicable Florida Rules of Criminal Procedure.

127 (b) A competency hearing must be held within 30 days after 128 the court receives notification that the defendant is competent 129 to proceed or no longer meets the criteria for continued 130 commitment.

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131	Section 3. Section 916.145, Florida Statutes, is amended		
132	to read:		
133	(Substantial rewording of section. See		
134	<u>s. 916.145, F.S., for present text.)</u>		
135	916.145 Dismissal of charges.—		
136	(1) The charges against a defendant adjudicated		
137	incompetent to proceed due to mental illness shall be dismissed		
138	without prejudice to the state if the defendant remains		
139	incompetent to proceed:		
140	(a) Three years after such determination; or		
141	(b) Five years after such determination if the charge		
142	related to commitment is:		
143	1. Arson;		
144	2. Sexual battery;		
145	3. Robbery;		
146	4. Kidnapping;		
147	5. Aggravated child abuse;		
148	6. Aggravated abuse of an elderly person or disabled		
149	adult;		
150	7. Aggravated assault with a deadly weapon;		
151	8. Murder;		
152	9. Manslaughter;		
153	10. Aggravated manslaughter of an elderly person or		
154	disabled adult;		
155	11. Aggravated manslaughter of a child;		
156	12. Unlawful throwing, projecting, placing, or discharging		
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157 of a destructive device or bomb; 158 13. Armed burglary; 159 14. Aggravated battery; or 160 15. Aggravated stalking, 161 162 unless the court, in an order, specifies reasons for believing 163 that the defendant will become competent to proceed, and 164 specifies a reasonable time within which the defendant is 165 expected to become competent. 166 This section does not prohibit the state from refiling (2) 167 dismissed charges if the defendant is declared to be competent 168 to proceed in the future. 169 Section 4. Subsection (5) is added to section 916.15, 170 Florida Statutes, to read: 171 916.15 Involuntary commitment of defendant adjudicated not 172 guilty by reason of insanity.-173 The commitment hearing must be held within 30 days (5) 174 after the court receives notification that the defendant no 175 longer meets the criteria for continued commitment. 176 Section 5. Subsection (1) of section 985.19, Florida 177 Statutes, is amended to read: 985.19 Incompetency in juvenile delinquency cases.-178 179 If, at any time prior to or during a delinguency case, (1)180 the court has reason to believe that the child named in the 181 petition may be incompetent to proceed with the hearing, the 182 court on its own motion may, or on the motion of the child's Page 7 of 12

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183 attorney or state attorney must, stay all proceedings and order 184 an evaluation of the child's mental condition.

185 Any motion questioning the child's competency to (a) 186 proceed must be served upon the child's attorney, the state 187 attorney, the attorneys representing the Department of Juvenile 188 Justice, and the attorneys representing the Department of 189 Children and Families Family Services. Thereafter, any motion, 190 notice of hearing, order, or other legal pleading relating to 191 the child's competency to proceed with the hearing must be served upon the child's attorney, the state attorney, the 192 193 attorneys representing the Department of Juvenile Justice, and the attorneys representing the Department of Children and 194 195 Families Family Services.

196 (b) All determinations of competency must shall be made at 197 a hearing, with findings of fact based on an evaluation of the 198 child's mental condition made by at least not less than two but 199 not nor more than three experts appointed by the court. The 200 basis for the determination of incompetency must be specifically 201 stated in the evaluation. In addition, a recommendation as to 202 whether residential or nonresidential treatment or training is 203 required must be included in the evaluation. Experts appointed 204 by the court to determine the mental condition of a child shall 205 be allowed reasonable fees for services rendered. State 206 employees may be paid expenses pursuant to s. 112.061. The fees 207 shall be taxed as costs in the case.

208

(c) A child is competent to proceed if the child has

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209	sufficient present ability to consult with counsel with a
210	reasonable degree of rational understanding and the child has a
211	rational and factual understanding of the present proceedings.
212	The expert's competency evaluation report must specifically
213	state the basis for the determination of the child's mental
214	condition and must include written findings that:
215	1. Identify the specific matters referred for evaluation.
216	2. Identify the sources of information used by the expert.
217	3. Describe the procedures, techniques, and diagnostic
218	tests used in the examination to determine the basis of the
219	child's mental condition.
220	4. Address the child's capacity to:
221	a. Appreciate the charges or allegations against the
222	child.
223	b. Appreciate the range and nature of possible penalties
224	that may be imposed in the proceedings against the child, if
225	applicable.
226	c. Understand the adversarial nature of the legal process.
227	d. Disclose to counsel facts pertinent to the proceedings
228	at issue.
229	e. Display appropriate courtroom behavior.
230	f. Testify relevantly.
231	5. Present the factual basis for the expert's clinical
232	findings and opinions of the child's mental condition. The
233	expert's factual basis of his or her clinical findings and
234	opinions must be supported by the diagnostic criteria found in
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235	the most recent edition of the Diagnostic and Statistical Manual
236	of Mental Disorders (DSM) published by the American Psychiatric
237	Association and must be presented in a separate section of the
238	report entitled "summary of findings." This section must
239	include:
240	a. The day, month, year, and length of time of the face-
241	to-face diagnostic clinical interview to determine the child's
242	mental condition.
243	b. A statement that identifies the DSM clinical name and
244	associated diagnostic code for the specific mental disorder that
245	forms the basis of the child's incompetency.
246	c. A statement of how the child would benefit from
247	competency restoration services in the community or in a secure
248	residential treatment facility.
249	d. An assessment of the probable duration of the treatment
250	to restore competence and the probability that the child will
251	attain competence to proceed in the foreseeable future.
252	e. A description of recommended treatment or education
253	appropriate for the mental disorder.
254	6. If the evaluator determines the child to be incompetent
255	to proceed to trial, the evaluator must report on the mental
256	disorder that forms the basis of the incompetency.
257	<u>(d)</u> All court orders determining incompetency must
258	include specific written findings by the court as to the nature
259	of the incompetency and whether the child requires secure or
260	nonsecure treatment or training <u>environment</u> environments.
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261 (e) (d) For competency incompetency evaluations related to 262 mental illness, the Department of Children and Families Family 263 Services shall maintain and annually provide the courts with a 264 list of available mental health professionals who have completed 265 a training program approved by the Department of Children and 266 Families Family Services to perform the evaluations.

267 <u>(f)(e)</u> For <u>competency</u> incompetency evaluations related to 268 intellectual disability or autism, the court shall order the 269 Agency for Persons with Disabilities to examine the child to 270 determine if the child meets the definition of "intellectual 271 disability" or "autism" in s. 393.063 and, <u>provide a clinical</u> 272 <u>opinion as to if so</u>, whether the child is competent to proceed 273 with delinquency proceedings.

274 (f) A child is competent to proceed if the child has 275 sufficient present ability to consult with counsel with a 276 reasonable degree of rational understanding and the child has a 277 rational and factual understanding of the present proceedings. 278 The report must address the child's capacity to:

279 1. Appreciate the charges or allegations against the
280 child.

281 2. Appreciate the range and nature of possible penalties 282 that may be imposed in the proceedings against the child, if 283 applicable.

284 3. Understand the adversarial nature of the legal process.
285 4. Disclose to counsel facts pertinent to the proceedings
286 at issue.

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287	5. Display appropriate courtroom behavior.
288	6. Testify relevantly.
289	(g) Immediately upon the filing of the court order finding
290	a child incompetent to proceed, the clerk of the court shall
291	notify the Department of Children and <u>Families</u> Family Services
292	and the Agency for Persons with Disabilities and fax or hand
293	deliver to the department and to the agency a referral packet
294	that includes, at a minimum, the court order, the charging
295	documents, the petition, and the court-appointed evaluator's
296	reports.
297	(h) After placement of the child in the appropriate
298	setting, the Department of Children and <u>Families</u> Family Services
299	in consultation with the Agency for Persons with Disabilities,
300	as appropriate, must, within 30 days after placement of the
301	child, prepare and submit to the court a treatment or training
302	plan for the child's restoration of competency. A copy of the
303	plan must be served upon the child's attorney, the state
304	attorney, and the attorneys representing the Department of
305	Juvenile Justice.
306	Section 6. This act shall take effect July 1, 2014.

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