

Amendment No.

CHAMBER ACTION

Senate

House

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1 Representative McBurney offered the following:

2  
3 **Amendment to Amendment (397419) (with title amendment)**

4 Remove lines 3009-4247 and insert:

5 Section 78. Subsection (6) of section 39.001, Florida  
6 Statutes, is amended to read:

7 39.001 Purposes and intent; personnel standards and  
8 screening.—

9 (6) MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES.—

10 (a) The Legislature recognizes that early referral and  
11 comprehensive treatment can help combat mental illnesses and  
12 substance abuse disorders in families and that treatment is  
13 cost-effective.

14 (b) The Legislature establishes the following goals for

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15 the state related to mental illness and substance abuse  
16 treatment services in the dependency process:

17 1. To ensure the safety of children.

18 2. To prevent and remediate the consequences of mental  
19 illnesses and substance abuse disorders on families involved in  
20 protective supervision or foster care and reduce the occurrences  
21 of mental illnesses and substance abuse disorders, including  
22 alcohol abuse or related disorders, for families who are at risk  
23 of being involved in protective supervision or foster care.

24 3. To expedite permanency for children and reunify  
25 healthy, intact families, when appropriate.

26 4. To support families in recovery.

27 (c) The Legislature finds that children in the care of the  
28 state's dependency system need appropriate health care services,  
29 that the impact of mental illnesses and substance abuse  
30 disorders on health indicates the need for health care services  
31 to include treatment for mental health and substance abuse  
32 disorders for ~~services to~~ children and parents, where  
33 appropriate, and that it is in the state's best interest that  
34 such children be provided the services they need to enable them  
35 to become and remain independent of state care. In order to  
36 provide these services, the state's dependency system must have  
37 the ability to identify and provide appropriate intervention and  
38 treatment for children with personal or family-related mental  
39 illness and substance abuse problems.

40 (d) It is the intent of the Legislature to encourage the

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41 use of the mental health court program model established under  
42 s. 394.47892 and the drug court program model established under  
43 ~~by~~ s. 397.334 and authorize courts to assess children and  
44 persons who have custody or are requesting custody of children  
45 where good cause is shown to identify and address mental  
46 illnesses and substance abuse disorders ~~problems~~ as the court  
47 deems appropriate at every stage of the dependency process.  
48 Participation in treatment, including a mental health court  
49 program or a treatment-based drug court program, may be required  
50 by the court following adjudication. Participation in assessment  
51 and treatment before ~~prior to~~ adjudication is ~~shall be~~  
52 voluntary, except as provided in s. 39.407(16).

53 (e) It is therefore the purpose of the Legislature to  
54 provide authority for the state to contract with mental health  
55 service providers and community substance abuse treatment  
56 providers for the development and operation of specialized  
57 support and overlay services for the dependency system, which  
58 will be fully implemented and used as resources permit.

59 (f) Participation in a mental health court program or a  
60 ~~the~~ treatment-based drug court program does not divest any  
61 public or private agency of its responsibility for a child or  
62 adult, but is intended to enable these agencies to better meet  
63 their needs through shared responsibility and resources.

64 Section 79. Subsection (10) of section 39.507, Florida  
65 Statutes, is amended to read:

66 39.507 Adjudicatory hearings; orders of adjudication.—

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67 (10) After an adjudication of dependency, or a finding of  
68 dependency in which ~~where~~ adjudication is withheld, the court  
69 may order a person who has custody or is requesting custody of  
70 the child to submit to a mental health or substance abuse  
71 disorder assessment or evaluation. The order may be made only  
72 upon good cause shown and pursuant to notice and procedural  
73 requirements provided under the Florida Rules of Juvenile  
74 Procedure. The assessment or evaluation must be administered by  
75 an appropriate a qualified professional, as defined in s. 39.01  
76 or s. 397.311. The court may also require such person to  
77 participate in and comply with treatment and services identified  
78 as necessary, including, when appropriate and available,  
79 participation in and compliance with a mental health court  
80 program established under s. 394.47892 or a treatment-based drug  
81 court program established under s. 397.334. In addition to  
82 supervision by the department, the court, including the mental  
83 health court program or treatment-based drug court program, may  
84 oversee the progress and compliance with treatment by a person  
85 who has custody or is requesting custody of the child. The court  
86 may impose appropriate available sanctions for noncompliance  
87 upon a person who has custody or is requesting custody of the  
88 child or make a finding of noncompliance for consideration in  
89 determining whether an alternative placement of the child is in  
90 the child's best interests. Any order entered under this  
91 subsection may be made only upon good cause shown. This  
92 subsection does not authorize placement of a child with a person

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93 seeking custody, other than the parent or legal custodian, who  
94 requires mental health or substance abuse disorder treatment.

95 Section 80. Paragraph (b) of subsection (1) of section  
96 39.521, Florida Statutes, is amended to read:

97 39.521 Disposition hearings; powers of disposition.—

98 (1) A disposition hearing shall be conducted by the court,  
99 if the court finds that the facts alleged in the petition for  
100 dependency were proven in the adjudicatory hearing, or if the  
101 parents or legal custodians have consented to the finding of  
102 dependency or admitted the allegations in the petition, have  
103 failed to appear for the arraignment hearing after proper  
104 notice, or have not been located despite a diligent search  
105 having been conducted.

106 (b) When any child is adjudicated by a court to be  
107 dependent, the court having jurisdiction of the child has the  
108 power by order to:

109 1. Require the parent and, when appropriate, the legal  
110 custodian and the child to participate in treatment and services  
111 identified as necessary. The court may require the person who  
112 has custody or who is requesting custody of the child to submit  
113 to a mental health or substance abuse disorder assessment or  
114 evaluation. The order may be made only upon good cause shown and  
115 pursuant to notice and procedural requirements provided under  
116 the Florida Rules of Juvenile Procedure. The mental health  
117 assessment or evaluation must be administered by a qualified  
118 professional, as defined in s. 39.01, and the substance abuse

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119 assessment or evaluation must be administered by a qualified  
120 professional as defined in s. 397.311. The court may also  
121 require such person to participate in and comply with treatment  
122 and services identified as necessary, including, when  
123 appropriate and available, participation in and compliance with  
124 a mental health court program established under s. 394.47892 or  
125 a treatment-based drug court program established under s.  
126 397.334. In addition to supervision by the department, the  
127 court, including the mental health court program or the  
128 treatment-based drug court program, may oversee the progress and  
129 compliance with treatment by a person who has custody or is  
130 requesting custody of the child. The court may impose  
131 appropriate available sanctions for noncompliance upon a person  
132 who has custody or is requesting custody of the child or make a  
133 finding of noncompliance for consideration in determining  
134 whether an alternative placement of the child is in the child's  
135 best interests. Any order entered under this subparagraph may be  
136 made only upon good cause shown. This subparagraph does not  
137 authorize placement of a child with a person seeking custody of  
138 the child, other than the child's parent or legal custodian, who  
139 requires mental health or substance abuse disorder treatment.

140 2. Require, if the court deems necessary, the parties to  
141 participate in dependency mediation.

142 3. Require placement of the child either under the  
143 protective supervision of an authorized agent of the department  
144 in the home of one or both of the child's parents or in the home

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145 of a relative of the child or another adult approved by the  
146 court, or in the custody of the department. Protective  
147 supervision continues until the court terminates it or until the  
148 child reaches the age of 18, whichever date is first. Protective  
149 supervision shall be terminated by the court whenever the court  
150 determines that permanency has been achieved for the child,  
151 whether with a parent, another relative, or a legal custodian,  
152 and that protective supervision is no longer needed. The  
153 termination of supervision may be with or without retaining  
154 jurisdiction, at the court's discretion, and shall in either  
155 case be considered a permanency option for the child. The order  
156 terminating supervision by the department must ~~shall~~ set forth  
157 the powers of the custodian of the child and ~~shall~~ include the  
158 powers ordinarily granted to a guardian of the person of a minor  
159 unless otherwise specified. Upon the court's termination of  
160 supervision by the department, ~~no~~ further judicial reviews are  
161 not required if, so long as permanency has been established for  
162 the child.

163 Section 81. Section 394.4655, Florida Statutes, is amended  
164 to read:

165 394.4655 Involuntary outpatient services placement.—

166 (1) DEFINITIONS.—As used in this section, the term:

167 (a) "Court" means a circuit court or a criminal county  
168 court.

169 (b) "Criminal county court" means a county court  
170 exercising its original jurisdiction in a misdemeanor case under

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171 s. 34.01.

172 (2)-(1) CRITERIA FOR INVOLUNTARY OUTPATIENT SERVICES  
173 PLACEMENT.—A person may be ordered to involuntary outpatient  
174 services placement upon a finding of the court, by clear and  
175 convincing evidence, that the person meets all of the following  
176 criteria by clear and convincing evidence:

177 (a) The person is 18 years of age or older.†178 (b) The person has a mental illness.†179 (c) The person is unlikely to survive safely in the  
180 community without supervision, based on a clinical  
181 determination.†182 (d) The person has a history of lack of compliance with  
183 treatment for mental illness.†

184 (e) The person has:

185 1. At least twice within the immediately preceding 36  
186 months been involuntarily admitted to a receiving or treatment  
187 facility as defined in s. 394.455, or has received mental health  
188 services in a forensic or correctional facility. The 36-month  
189 period does not include any period during which the person was  
190 admitted or incarcerated; or191 2. Engaged in one or more acts of serious violent behavior  
192 toward self or others, or attempts at serious bodily harm to  
193 himself or herself or others, within the preceding 36 months.†194 (f) The person is, as a result of his or her mental  
195 illness, unlikely to voluntarily participate in the recommended  
196 treatment plan and ~~either he or she~~ has refused voluntary

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197 services placement for treatment after sufficient and  
198 conscientious explanation and disclosure of why the services are  
199 necessary purpose of placement for treatment or he or she is  
200 unable to determine for himself or herself whether services are  
201 placement is necessary.†

202 (g) In view of the person's treatment history and current  
203 behavior, the person is in need of involuntary outpatient  
204 services placement in order to prevent a relapse or  
205 deterioration that would be likely to result in serious bodily  
206 harm to himself or herself or others, or a substantial harm to  
207 his or her well-being as set forth in s. 394.463(1).†

208 (h) It is likely that the person will benefit from  
209 involuntary outpatient services. ~~placement; and~~

210 (i) All available, less restrictive alternatives that  
211 would offer an opportunity for improvement of his or her  
212 condition have been judged to be inappropriate or unavailable.

213 ~~(3)(2)~~ INVOLUNTARY OUTPATIENT SERVICES PLACEMENT.—

214 (a)1. A patient who is being recommended for involuntary  
215 outpatient services placement by the administrator of the  
216 ~~receiving~~ facility where the patient has been examined may be  
217 retained by the facility after adherence to the notice  
218 procedures provided in s. 394.4599. The recommendation must be  
219 supported by the opinion of a psychiatrist and the second  
220 opinion of a clinical psychologist or another psychiatrist, both  
221 of whom have personally examined the patient within the  
222 preceding 72 hours, that the criteria for involuntary outpatient

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223 services placement are met. However, ~~in a county having a~~  
224 ~~population of fewer than 50,000,~~ if the administrator certifies  
225 that a psychiatrist or clinical psychologist is not available to  
226 provide the second opinion, the second opinion may be provided  
227 by a licensed physician who has postgraduate training and  
228 experience in diagnosis and treatment of mental illness ~~and~~  
229 ~~nervous disorders~~ or by a psychiatric nurse. Any second opinion  
230 authorized in this subparagraph may be conducted through a face-  
231 to-face examination, in person or by electronic means. Such  
232 recommendation must be entered on an involuntary outpatient  
233 services placement certificate that authorizes the ~~receiving~~  
234 facility to retain the patient pending completion of a hearing.  
235 The certificate must ~~shall~~ be made a part of the patient's  
236 clinical record.

237 2. If the patient has been stabilized and no longer meets  
238 the criteria for involuntary examination pursuant to s.  
239 394.463(1), the patient must be released from the ~~receiving~~  
240 facility while awaiting the hearing for involuntary outpatient  
241 services placement. Before filing a petition for involuntary  
242 outpatient services treatment, the administrator of the a  
243 ~~receiving~~ facility or a designated department representative  
244 must identify the service provider that will have primary  
245 responsibility for service provision under an order for  
246 involuntary outpatient services placement, unless the person is  
247 otherwise participating in outpatient psychiatric treatment and  
248 is not in need of public financing for that treatment, in which

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249 case the individual, if eligible, may be ordered to involuntary  
250 treatment pursuant to the existing psychiatric treatment  
251 relationship.

252 3. The service provider shall prepare a written proposed  
253 treatment plan in consultation with the patient or the patient's  
254 guardian advocate, if appointed, for the court's consideration  
255 for inclusion in the involuntary outpatient services placement  
256 order that addresses the nature and extent of the mental illness  
257 and any co-occurring substance use disorder that necessitate  
258 involuntary outpatient services. The treatment plan must specify  
259 the likely level of care, including the use of medication, and  
260 anticipated discharge criteria for terminating involuntary  
261 outpatient services. The service provider shall also provide a  
262 copy of the proposed treatment plan to the patient and the  
263 administrator of the receiving facility. The treatment plan must  
264 specify the nature and extent of the patient's mental illness,  
265 address the reduction of symptoms that necessitate involuntary  
266 outpatient placement, and include measurable goals and  
267 objectives for the services and treatment that are provided to  
268 treat the person's mental illness and assist the person in  
269 living and functioning in the community or to prevent a relapse  
270 or deterioration. Service providers may select and supervise  
271 other individuals to implement specific aspects of the treatment  
272 plan. The services in the treatment plan must be deemed  
273 clinically appropriate by a physician, clinical psychologist,  
274 psychiatric nurse, mental health counselor, marriage and family

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275 therapist, or clinical social worker who consults with, or is  
276 employed or contracted by, the service provider. The service  
277 provider must certify to the court in the proposed ~~treatment~~  
278 plan whether sufficient services for improvement and  
279 stabilization are currently available and whether the service  
280 provider agrees to provide those services. If the service  
281 provider certifies that the services in the proposed treatment  
282 plan are not available, the petitioner may not file the  
283 petition. The service provider must notify the managing entity  
284 if the requested services are not available. The managing entity  
285 must document such efforts to obtain the requested services.

286 (b) If a patient in involuntary inpatient placement meets  
287 the criteria for involuntary outpatient services placement, the  
288 administrator of the ~~treatment~~ facility may, before the  
289 expiration of the period during which the ~~treatment~~ facility is  
290 authorized to retain the patient, recommend involuntary  
291 outpatient services placement. The recommendation must be  
292 supported by the opinion of a psychiatrist and the second  
293 opinion of a clinical psychologist or another psychiatrist, both  
294 of whom have personally examined the patient within the  
295 preceding 72 hours, that the criteria for involuntary outpatient  
296 services placement are met. However, ~~in a county having a~~  
297 ~~population of fewer than 50,000,~~ if the administrator certifies  
298 that a psychiatrist or clinical psychologist is not available to  
299 provide the second opinion, the second opinion may be provided  
300 by a licensed physician who has postgraduate training and

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301 experience in diagnosis and treatment of mental illness ~~and~~  
302 ~~nervous disorders~~ or by a psychiatric nurse. Any second opinion  
303 authorized in this subparagraph may be conducted through a face-  
304 to-face examination, in person or by electronic means. Such  
305 recommendation must be entered on an involuntary outpatient  
306 services placement certificate, and the certificate must be made  
307 a part of the patient's clinical record.

308 (c)1. The administrator of the treatment facility shall  
309 provide a copy of the involuntary outpatient services placement  
310 certificate and a copy of the state mental health discharge form  
311 to the managing entity ~~a department representative~~ in the county  
312 where the patient will be residing. For persons who are leaving  
313 a state mental health treatment facility, the petition for  
314 involuntary outpatient services placement must be filed in the  
315 county where the patient will be residing.

316 2. The service provider that will have primary  
317 responsibility for service provision shall be identified by the  
318 designated department representative before ~~prior to~~ the order  
319 for involuntary outpatient services placement and must, before  
320 ~~prior to~~ filing a petition for involuntary outpatient services  
321 placement, certify to the court whether the services recommended  
322 in the patient's discharge plan are available ~~in the local~~  
323 ~~community~~ and whether the service provider agrees to provide  
324 those services. The service provider must develop with the  
325 patient, or the patient's guardian advocate, if appointed, a  
326 treatment or service plan that addresses the needs identified in

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327 the discharge plan. The plan must be deemed to be clinically  
328 appropriate by a physician, clinical psychologist, psychiatric  
329 nurse, mental health counselor, marriage and family therapist,  
330 or clinical social worker, as defined in this chapter, who  
331 consults with, or is employed or contracted by, the service  
332 provider.

333 3. If the service provider certifies that the services in  
334 the proposed treatment or service plan are not available, the  
335 petitioner may not file the petition. The service provider must  
336 notify the managing entity if the requested services are not  
337 available. The managing entity must document such efforts to  
338 obtain the requested services.

339 ~~(4)~~~~(3)~~ PETITION FOR INVOLUNTARY OUTPATIENT SERVICES  
340 PLACEMENT.—

341 (a) A petition for involuntary outpatient services  
342 ~~placement~~ may be filed by:

- 343 1. The administrator of a receiving facility; or  
344 2. The administrator of a treatment facility.

345 (b) Each required criterion for involuntary outpatient  
346 services placement must be alleged and substantiated in the  
347 petition for involuntary outpatient services placement. A copy  
348 of the certificate recommending involuntary outpatient services  
349 ~~placement~~ completed by a qualified professional specified in  
350 subsection (3) ~~(2)~~ must be attached to the petition. A copy of  
351 the proposed treatment plan must be attached to the petition.  
352 Before the petition is filed, the service provider shall certify

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353 that the services in the proposed ~~treatment~~ plan are available.  
354 If the necessary services are not available ~~in the patient's~~  
355 ~~local community to respond to the person's individual needs, the~~  
356 ~~petition may not be filed. The service provider must notify the~~  
357 ~~managing entity if the requested services are not available. The~~  
358 ~~managing entity must document such efforts to obtain the~~  
359 ~~requested services.~~

360 (c) The petition for involuntary outpatient services  
361 ~~placement~~ must be filed in the county where the patient is  
362 located, unless the patient is being placed from a state  
363 treatment facility, in which case the petition must be filed in  
364 the county where the patient will reside. When the petition has  
365 been filed, the clerk of the court shall provide copies of the  
366 petition and the proposed treatment plan to the department, the  
367 managing entity, the patient, the patient's guardian or  
368 representative, the state attorney, and the public defender or  
369 the patient's private counsel. A fee may not be charged for  
370 filing a petition under this subsection.

371 (5)~~(4)~~ APPOINTMENT OF COUNSEL.—Within 1 court working day  
372 after the filing of a petition for involuntary outpatient  
373 services ~~placement~~, the court shall appoint the public defender  
374 to represent the person who is the subject of the petition,  
375 unless the person is otherwise represented by counsel. The clerk  
376 of the court shall immediately notify the public defender of the  
377 appointment. The public defender shall represent the person  
378 until the petition is dismissed, the court order expires, or the

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379 patient is discharged from involuntary outpatient services  
380 ~~placement~~. An attorney who represents the patient must be  
381 provided ~~shall have~~ access to the patient, witnesses, and  
382 records relevant to the presentation of the patient's case and  
383 shall represent the interests of the patient, regardless of the  
384 source of payment to the attorney.

385 (6)~~(5)~~ CONTINUANCE OF HEARING.—The patient is entitled,  
386 with the concurrence of the patient's counsel, to at least one  
387 continuance of the hearing. The continuance shall be for a  
388 period of up to 4 weeks.

389 (7)~~(6)~~ HEARING ON INVOLUNTARY OUTPATIENT SERVICES  
390 ~~PLACEMENT~~.—

391 (a)1. The court shall hold the hearing on involuntary  
392 outpatient services ~~placement~~ within 5 working days after the  
393 filing of the petition, unless a continuance is granted. The  
394 hearing must ~~shall~~ be held in the county where the petition is  
395 filed, must ~~shall~~ be as convenient to the patient as is  
396 consistent with orderly procedure, and must ~~shall~~ be conducted  
397 in physical settings not likely to be injurious to the patient's  
398 condition. If the court finds that the patient's attendance at  
399 the hearing is not consistent with the best interests of the  
400 patient and if the patient's counsel does not object, the court  
401 may waive the presence of the patient from all or any portion of  
402 the hearing. The state attorney for the circuit in which the  
403 patient is located shall represent the state, rather than the  
404 petitioner, as the real party in interest in the proceeding.

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405           2. The court may appoint a magistrate ~~master~~ to preside at  
406 the hearing. One of the professionals who executed the  
407 involuntary outpatient services ~~placement~~ certificate shall be a  
408 witness. The patient and the patient's guardian or  
409 representative shall be informed by the court of the right to an  
410 independent expert examination. If the patient cannot afford  
411 such an examination, the court shall ensure that one is  
412 provided, as otherwise provided by law ~~provide for one~~. The  
413 independent expert's report is ~~shall be~~ confidential and not  
414 discoverable, unless the expert is to be called as a witness for  
415 the patient at the hearing. The court shall allow testimony from  
416 individuals, including family members, deemed by the court to be  
417 relevant under state law, regarding the person's prior history  
418 and how that prior history relates to the person's current  
419 condition. The testimony in the hearing must be given under  
420 oath, and the proceedings must be recorded. The patient may  
421 refuse to testify at the hearing.

422           (b)1. If the court concludes that the patient meets the  
423 criteria for involuntary outpatient services ~~placement~~ pursuant  
424 to subsection (2) ~~(1)~~, the court shall issue an order for  
425 involuntary outpatient services ~~placement~~. The court order shall  
426 be for a period of up to 90 days ~~6 months~~. The order must  
427 specify the nature and extent of the patient's mental illness.  
428 The order of the court and the treatment plan must ~~shall~~ be made  
429 part of the patient's clinical record. The service provider  
430 shall discharge a patient from involuntary outpatient services

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431 ~~placement~~ when the order expires or any time the patient no  
432 longer meets the criteria for involuntary placement. Upon  
433 discharge, the service provider shall send a certificate of  
434 discharge to the court.

435 2. The court may not order the department or the service  
436 provider to provide services if the program or service is not  
437 available in the patient's local community, if there is no space  
438 available in the program or service for the patient, or if  
439 funding is not available for the program or service. The service  
440 provider must notify the managing entity if the requested  
441 services are not available. The managing entity must document  
442 such efforts to obtain the requested services. A copy of the  
443 order must be sent to the managing entity ~~Agency for Health Care~~  
444 ~~Administration~~ by the service provider within 1 working day  
445 after it is received from the court. The order may be submitted  
446 electronically through existing data systems. After the  
447 ~~placement~~ order for involuntary services is issued, the service  
448 provider and the patient may modify ~~provisions of~~ the treatment  
449 plan. For any material modification of the treatment plan to  
450 which the patient or, if one is appointed, the patient's  
451 guardian advocate agrees, ~~if appointed, does agree,~~ the service  
452 provider shall send notice of the modification to the court. Any  
453 material modifications of the treatment plan which are contested  
454 by the patient or the patient's guardian advocate, if applicable  
455 ~~appointed,~~ must be approved or disapproved by the court  
456 consistent with subsection (3) ~~(2)~~.

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457           3. If, in the clinical judgment of a physician, the  
458 patient has failed or has refused to comply with the treatment  
459 ordered by the court, and, in the clinical judgment of the  
460 physician, efforts were made to solicit compliance and the  
461 patient may meet the criteria for involuntary examination, a  
462 person may be brought to a receiving facility pursuant to s.  
463 394.463. If, after examination, the patient does not meet the  
464 criteria for involuntary inpatient placement pursuant to s.  
465 394.467, the patient must be discharged from the ~~receiving~~  
466 facility. The involuntary outpatient services placement order  
467 shall remain in effect unless the service provider determines  
468 that the patient no longer meets the criteria for involuntary  
469 outpatient services placement or until the order expires. The  
470 service provider must determine whether modifications should be  
471 made to the existing treatment plan and must attempt to continue  
472 to engage the patient in treatment. For any material  
473 modification of the treatment plan to which the patient or the  
474 patient's guardian advocate, if applicable appointed, agrees  
475 ~~does agree~~, the service provider shall send notice of the  
476 modification to the court. Any material modifications of the  
477 treatment plan which are contested by the patient or the  
478 patient's guardian advocate, if applicable appointed, must be  
479 approved or disapproved by the court consistent with subsection  
480 (3) ~~(2)~~.

481           (c) If, at any time before the conclusion of the initial  
482 hearing on involuntary outpatient services placement, it appears

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483 to the court that the person does not meet the criteria for  
484 involuntary outpatient services ~~placement~~ under this section  
485 but, instead, meets the criteria for involuntary inpatient  
486 placement, the court may order the person admitted for  
487 involuntary inpatient examination under s. 394.463. If the  
488 person instead meets the criteria for involuntary assessment,  
489 protective custody, or involuntary admission pursuant to s.  
490 397.675, the court may order the person to be admitted for  
491 involuntary assessment for a period of 5 days pursuant to s.  
492 397.6811. Thereafter, all proceedings are ~~shall be~~ governed by  
493 chapter 397.

494 (d) At the hearing on involuntary outpatient services  
495 ~~placement~~, the court shall consider testimony and evidence  
496 regarding the patient's competence to consent to services  
497 ~~treatment~~. If the court finds that the patient is incompetent to  
498 consent to treatment, it shall appoint a guardian advocate as  
499 provided in s. 394.4598. The guardian advocate shall be  
500 appointed or discharged in accordance with s. 394.4598.

501 (e) The administrator of the receiving facility or the  
502 designated department representative shall provide a copy of the  
503 court order and adequate documentation of a patient's mental  
504 illness to the service provider for involuntary outpatient  
505 services ~~placement~~. Such documentation must include any advance  
506 directives made by the patient, a psychiatric evaluation of the  
507 patient, and any evaluations of the patient performed by a  
508 ~~elinical~~ psychologist or a clinical social worker.

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509        (8)~~(7)~~ PROCEDURE FOR CONTINUED INVOLUNTARY OUTPATIENT  
510 SERVICES PLACEMENT.—

511            (a)1. If the person continues to meet the criteria for  
512 involuntary outpatient services placement, the service provider  
513 shall, at least 10 days before the expiration of the period  
514 during which the treatment is ordered for the person, file in  
515 the ~~circuit~~ court that issued the order for involuntary  
516 outpatient services a petition for continued involuntary  
517 outpatient services placement. The court shall immediately  
518 schedule a hearing on the petition to be held within 15 days  
519 after the petition is filed.

520            2. The existing involuntary outpatient services placement  
521 order remains in effect until disposition on the petition for  
522 continued involuntary outpatient services placement.

523            3. A certificate shall be attached to the petition which  
524 includes a statement from the person's physician or clinical  
525 psychologist justifying the request, a brief description of the  
526 patient's treatment during the time he or she was receiving  
527 involuntary services involuntarily placed, and an individualized  
528 plan of continued treatment.

529            4. The service provider shall develop the individualized  
530 plan of continued treatment in consultation with the patient or  
531 the patient's guardian advocate, if applicable appointed. When  
532 the petition has been filed, the clerk of the court shall  
533 provide copies of the certificate and the individualized plan of  
534 continued services treatment to the department, the patient, the

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535 patient's guardian advocate, the state attorney, and the  
536 patient's private counsel or the public defender.

537 (b) Within 1 court working day after the filing of a  
538 petition for continued involuntary outpatient services  
539 ~~placement~~, the court shall appoint the public defender to  
540 represent the person who is the subject of the petition, unless  
541 the person is otherwise represented by counsel. The clerk of the  
542 court shall immediately notify the public defender of such  
543 appointment. The public defender shall represent the person  
544 until the petition is dismissed or the court order expires or  
545 the patient is discharged from involuntary outpatient services  
546 ~~placement~~. Any attorney representing the patient shall have  
547 access to the patient, witnesses, and records relevant to the  
548 presentation of the patient's case and shall represent the  
549 interests of the patient, regardless of the source of payment to  
550 the attorney.

551 (c) Hearings on petitions for continued involuntary  
552 outpatient services must ~~placement shall~~ be before the ~~circuit~~  
553 court that issued the order for involuntary outpatient services.  
554 The court may appoint a magistrate ~~master~~ to preside at the  
555 hearing. The procedures for obtaining an order pursuant to this  
556 paragraph must meet the requirements of ~~shall be in accordance~~  
557 ~~with~~ subsection (7) ~~(6)~~, except that the time period included in  
558 paragraph (2)(e) ~~(1)(e)~~ is not applicable in determining the  
559 appropriateness of additional periods of involuntary outpatient  
560 placement.

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561 (d) Notice of the hearing must ~~shall~~ be provided as set  
562 forth in s. 394.4599. The patient and the patient's attorney may  
563 agree to a period of continued outpatient services ~~placement~~  
564 without a court hearing.

565 (e) The same procedure must ~~shall~~ be repeated before the  
566 expiration of each additional period the patient is placed in  
567 treatment.

568 (f) If the patient has previously been found incompetent  
569 to consent to treatment, the court shall consider testimony and  
570 evidence regarding the patient's competence. Section 394.4598  
571 governs the discharge of the guardian advocate if the patient's  
572 competency to consent to treatment has been restored.

573 Section 82. Paragraphs (c) and (d) of subsection (2) of  
574 section 394.4599, Florida Statutes, are amended to read:

575 394.4599 Notice.—

576 (2) INVOLUNTARY ADMISSION.—

577 (c)1. A receiving facility shall give notice of the  
578 whereabouts of a minor who is being involuntarily held for  
579 examination pursuant to s. 394.463 to the minor's parent,  
580 guardian, caregiver, or guardian advocate, in person or by  
581 telephone or other form of electronic communication, immediately  
582 after the minor's arrival at the facility. The facility may  
583 delay notification for no more than 24 hours after the minor's  
584 arrival if the facility has submitted a report to the central  
585 abuse hotline, pursuant to s. 39.201, based upon knowledge or  
586 suspicion of abuse, abandonment, or neglect and if the facility

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587 | deems a delay in notification to be in the minor's best  
588 | interest.

589 |         2. The receiving facility shall attempt to notify the  
590 | minor's parent, guardian, caregiver, or guardian advocate until  
591 | the receiving facility receives confirmation from the parent,  
592 | guardian, caregiver, or guardian advocate, verbally, by  
593 | telephone or other form of electronic communication, or by  
594 | recorded message, that notification has been received. Attempts  
595 | to notify the parent, guardian, caregiver, or guardian advocate  
596 | must be repeated at least once every hour during the first 12  
597 | hours after the minor's arrival and once every 24 hours  
598 | thereafter and must continue until such confirmation is  
599 | received, unless the minor is released at the end of the 72-hour  
600 | examination period, or until a petition for involuntary services  
601 | ~~placement~~ is filed with the court pursuant to s. 394.463(2)(g)  
602 | ~~s. 394.463(2)(i)~~. The receiving facility may seek assistance  
603 | from a law enforcement agency to notify the minor's parent,  
604 | guardian, caregiver, or guardian advocate if the facility has  
605 | not received within the first 24 hours after the minor's arrival  
606 | a confirmation by the parent, guardian, caregiver, or guardian  
607 | advocate that notification has been received. The receiving  
608 | facility must document notification attempts in the minor's  
609 | clinical record.

610 |         (d) The written notice of the filing of the petition for  
611 | involuntary services for ~~placement of~~ an individual being held  
612 | must contain the following:

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- 613 1. Notice that the petition for:  
614 a. Involuntary inpatient treatment pursuant to s. 394.467  
615 has been filed with the circuit court in the county in which the  
616 individual is hospitalized and the address of such court; or  
617 b. Involuntary outpatient services pursuant to s. 394.4655  
618 has been filed with the criminal county court, as defined in s.  
619 394.4655(1), or the circuit court, as applicable, in the county  
620 in which the individual is hospitalized and the address of such  
621 court.
- 622 2. Notice that the office of the public defender has been  
623 appointed to represent the individual in the proceeding, if the  
624 individual is not otherwise represented by counsel.
- 625 3. The date, time, and place of the hearing and the name  
626 of each examining expert and every other person expected to  
627 testify in support of continued detention.
- 628 4. Notice that the individual, the individual's guardian,  
629 guardian advocate, health care surrogate or proxy, or  
630 representative, or the administrator may apply for a change of  
631 venue for the convenience of the parties or witnesses or because  
632 of the condition of the individual.
- 633 5. Notice that the individual is entitled to an  
634 independent expert examination and, if the individual cannot  
635 afford such an examination, that the court will provide for one.
- 636 Section 83. Section 394.455, Florida Statutes, is amended  
637 to read:  
638 394.455 Definitions.—As used in this part, ~~unless the~~

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639 ~~context clearly requires otherwise,~~ the term:

640 (1) "Access center" means a facility that has medical,  
641 mental health, and substance abuse professionals to provide  
642 emergency screening and evaluation for mental health or  
643 substance abuse disorders and may provide transportation to an  
644 appropriate facility if an individual is in need of more  
645 intensive services.

646 (2) "Addictions receiving facility" is a secure, acute  
647 care facility that, at a minimum, provides emergency screening,  
648 evaluation, detoxification, and stabilization services; is  
649 operated 24 hours per day, 7 days per week; and is designated by  
650 the department to serve individuals found to have substance  
651 abuse impairment who qualify for services under this part.

652 (3)-(1) "Administrator" means the chief administrative  
653 officer of a receiving or treatment facility or his or her  
654 designee.

655 (4) "Adult" means an individual who is 18 years of age or  
656 older or who has had the disability of nonage removed under  
657 chapter 743.

658 (5)-(2) "Clinical psychologist" means a psychologist as  
659 defined in s. 490.003(7) with 3 years of postdoctoral experience  
660 in the practice of clinical psychology, inclusive of the  
661 experience required for licensure, or a psychologist employed by  
662 a facility operated by the United States Department of Veterans  
663 Affairs that qualifies as a receiving or treatment facility  
664 under this part.

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665        ~~(6)(3)~~ "Clinical record" means all parts of the record  
666 required to be maintained and includes all medical records,  
667 progress notes, charts, and admission and discharge data, and  
668 all other information recorded by a facility staff which  
669 pertains to the patient's hospitalization or treatment.

670        ~~(7)(4)~~ "Clinical social worker" means a person licensed as  
671 a clinical social worker under s. 491.005 or s. 491.006 ~~chapter~~  
672 ~~491~~.

673        ~~(8)(5)~~ "Community facility" means a ~~any~~ community service  
674 provider that contracts ~~contracting~~ with the department to  
675 furnish substance abuse or mental health services under part IV  
676 of this chapter.

677        ~~(9)(6)~~ "Community mental health center or clinic" means a  
678 publicly funded, not-for-profit center that ~~which~~ contracts with  
679 the department for the provision of inpatient, outpatient, day  
680 treatment, or emergency services.

681        ~~(10)(7)~~ "Court," unless otherwise specified, means the  
682 circuit court.

683        ~~(11)(8)~~ "Department" means the Department of Children and  
684 Families.

685        ~~(12)~~ "Designated receiving facility" means a facility  
686 approved by the department which may be a public or private  
687 hospital, crisis stabilization unit, or addictions receiving  
688 facility; which provides, at a minimum, emergency screening,  
689 evaluation, and short-term stabilization for mental health or  
690 substance abuse disorders; and which may have an agreement with

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691 a corresponding facility for transportation and services.

692 (13) "Detoxification facility" means a facility licensed  
693 to provide detoxification services under chapter 397.

694 (14) "Electronic means" means a form of telecommunication  
695 which requires all parties to maintain visual as well as audio  
696 communication when being used to conduct an examination by a  
697 qualified professional.

698 (15)-(9) "Express and informed consent" means consent  
699 voluntarily given in writing, by a competent person, after  
700 sufficient explanation and disclosure of the subject matter  
701 involved to enable the person to make a knowing and willful  
702 decision without any element of force, fraud, deceit, duress, or  
703 other form of constraint or coercion.

704 (16)-(10) "Facility" means any hospital, community  
705 facility, public or private facility, or receiving or treatment  
706 facility providing for the evaluation, diagnosis, care,  
707 treatment, training, or hospitalization of persons who appear to  
708 have a mental illness or who have been diagnosed as having a  
709 mental illness or substance abuse impairment. The term  
710 "Facility" does not include a any program or an entity licensed  
711 under pursuant to chapter 400 or chapter 429.

712 (17)-(11) "Guardian" means the natural guardian of a minor,  
713 or a person appointed by a court to act on behalf of a ward's  
714 person if the ward is a minor or has been adjudicated  
715 incapacitated.

716 (18)-(12) "Guardian advocate" means a person appointed by a

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717 court to make decisions regarding mental health treatment on  
718 behalf of a patient who has been found incompetent to consent to  
719 treatment pursuant to this part. ~~The guardian advocate may be~~  
720 ~~granted specific additional powers by written order of the~~  
721 ~~court, as provided in this part.~~

722 (19) ~~(13)~~ "Hospital" means a hospital facility as defined  
723 ~~in s. 395.002 and~~ licensed under chapter 395 and part II of  
724 chapter 408.

725 (20) ~~(14)~~ "Incapacitated" means that a person has been  
726 adjudicated incapacitated pursuant to part V of chapter 744 and  
727 a guardian of the person has been appointed.

728 (21) ~~(15)~~ "Incompetent to consent to treatment" means a  
729 state in which ~~that~~ a person's judgment is so affected by a his  
730 ~~or her~~ mental illness or a substance abuse impairment that he or  
731 she ~~the person~~ lacks the capacity to make a well-reasoned,  
732 willful, and knowing decision concerning his or her medical, ~~or~~  
733 mental health, or substance abuse treatment.

734 (22) "Involuntary examination" means an examination  
735 performed under s. 394.463, s. 397.6772, s. 397.679, s.  
736 397.6798, or s. 397.6811 to determine whether a person qualifies  
737 for involuntary services.

738 (23) "Involuntary services" means court-ordered outpatient  
739 services or inpatient placement for mental health treatment  
740 pursuant to s. 394.4655 or s. 394.467.

741 (24) ~~(16)~~ "Law enforcement officer" has the same meaning as  
742 provided ~~means a law enforcement officer as defined in s.~~

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743 943.10.

744 (25) "Marriage and family therapist" means a person  
745 licensed to practice marriage and family therapy under s.  
746 491.005 or s. 491.006.

747 (26) "Mental health counselor" means a person licensed to  
748 practice mental health counseling under s. 491.005 or s.  
749 491.006.

750 (27)~~(17)~~ "Mental health overlay program" means a mobile  
751 service that ~~which~~ provides an independent examination for  
752 voluntary admission ~~admissions~~ and a range of supplemental  
753 onsite services to persons with a mental illness in a  
754 residential setting such as a nursing home, an assisted living  
755 facility, or an adult family-care home, ~~or a~~ nonresidential  
756 setting such as an adult day care center. Independent  
757 examinations provided ~~pursuant to this part~~ through a mental  
758 health overlay program must only be provided under contract with  
759 the department ~~for this service~~ or be attached to a public  
760 receiving facility that is also a community mental health  
761 center.

762 (28)~~(18)~~ "Mental illness" means an impairment of the  
763 mental or emotional processes that exercise conscious control of  
764 one's actions or of the ability to perceive or understand  
765 reality, which impairment substantially interferes with the  
766 person's ability to meet the ordinary demands of living. For the  
767 purposes of this part, the term does not include a developmental  
768 disability as defined in chapter 393, intoxication, or

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769 conditions manifested only by antisocial behavior or substance  
770 abuse ~~impairment~~.

771 (29) "Minor" means an individual who is 17 years of age or  
772 younger and who has not had the disability of nonage removed  
773 pursuant to s. 743.01 or s. 743.015.

774 (30)-(19) "Mobile crisis response service" means a  
775 nonresidential crisis service attached to a public receiving  
776 facility and available 24 hours per a day, 7 days per a week,  
777 through which provides immediate intensive assessments and  
778 interventions, including screening for admission into a mental  
779 health receiving facility, an addictions receiving facility, or  
780 a detoxification facility, take place for the purpose of  
781 identifying appropriate treatment services.

782 (31)-(20) "Patient" means any person, with or without a co-  
783 occurring substance abuse disorder, who is held or accepted for  
784 mental health treatment.

785 (32)-(21) "Physician" means a medical practitioner licensed  
786 under chapter 458 or chapter 459 who has experience in the  
787 diagnosis and treatment of mental illness and nervous disorders  
788 or a physician employed by a facility operated by the United  
789 States Department of Veterans Affairs or the United States  
790 Department of Defense which qualifies as a receiving or  
791 treatment facility under this part.

792 (33) "Physician assistant" means a person licensed under  
793 chapter 458 or chapter 459 who has experience in the diagnosis  
794 and treatment of mental disorders.

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795        ~~(34)(22)~~ "Private facility" means a ~~any~~ hospital or  
796 facility operated by a for-profit or not-for-profit corporation  
797 or association which ~~that~~ provides mental health or substance  
798 abuse services and is not a public facility.

799        ~~(35)(23)~~ "Psychiatric nurse" means an advanced registered  
800 nurse practitioner certified under s. 464.012 who has a master's  
801 or doctoral degree in psychiatric nursing, holds a national  
802 advanced practice certification as a psychiatric mental health  
803 advanced practice nurse, and has 2 years of post-master's  
804 clinical experience under the supervision of a physician.

805        ~~(36)(24)~~ "Psychiatrist" means a medical practitioner  
806 licensed under chapter 458 or chapter 459 ~~who has primarily~~  
807 ~~diagnosed and treated mental and nervous disorders for~~ at least  
808 ~~a period of not less than~~ 3 years, inclusive of psychiatric  
809 residency.

810        ~~(37)(25)~~ "Public facility" means a ~~any~~ facility that has  
811 contracted with the department to provide mental health services  
812 to all persons, regardless of ~~their~~ ability to pay, and is  
813 receiving state funds for such purpose.

814        ~~(38)(26)~~ "Receiving facility" means a ~~any~~ public or  
815 private facility or hospital designated by the department to  
816 receive and hold or refer, as appropriate, involuntary patients  
817 under emergency conditions ~~or~~ for mental health or substance  
818 abuse ~~psychiatric~~ evaluation and to provide ~~short-term~~ treatment  
819 or transportation to the appropriate service provider. The term  
820 does not include a county jail.

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821 ~~(39)-(27)~~ "Representative" means a person selected to  
822 receive notice of proceedings during the time a patient is held  
823 in or admitted to a receiving or treatment facility.

824 ~~(40)-(28)(a)~~ "Restraint" means: ~~a physical device, method,~~  
825 ~~or drug used to control behavior.~~

826 (a) A physical restraint, including is any manual method  
827 or physical or mechanical device, material, or equipment  
828 attached or adjacent to an the individual's body so that he or  
829 she cannot easily remove the restraint and which restricts  
830 freedom of movement or normal access to one's body. "Physical  
831 restraint" includes the physical holding of a person during a  
832 procedure to forcibly administer psychotropic medication.  
833 "Physical restraint" does not include physical devices such as  
834 orthopedically prescribed appliances, surgical dressings and  
835 bandages, supportive body bands, or other physical holding when  
836 necessary for routine physical examinations and tests or for  
837 purposes of orthopedic, surgical, or other similar medical  
838 treatment when used to provide support for the achievement of  
839 functional body position or proper balance or when used to  
840 protect a person from falling out of bed.

841 ~~(b) A drug or used as a restraint is a medication used to~~  
842 ~~control a the person's behavior or to restrict his or her~~  
843 ~~freedom of movement which and is not part of the standard~~  
844 ~~treatment regimen of a person with a diagnosed mental illness~~  
845 ~~who is a client of the department. Physically holding a person~~  
846 ~~during a procedure to forcibly administer psychotropic~~

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847 ~~medication is a physical restraint.~~

848 ~~(c) Restraint does not include physical devices, such as~~  
849 ~~orthopedically prescribed appliances, surgical dressings and~~  
850 ~~bandages, supportive body bands, or other physical holding when~~  
851 ~~necessary for routine physical examinations and tests; or for~~  
852 ~~purposes of orthopedic, surgical, or other similar medical~~  
853 ~~treatment; when used to provide support for the achievement of~~  
854 ~~functional body position or proper balance; or when used to~~  
855 ~~protect a person from falling out of bed.~~

856 ~~(41)-(29)~~ "Seclusion" means the physical segregation ~~of a~~  
857 ~~person in any fashion~~ or involuntary isolation of a person in a  
858 room or area from which the person is prevented from leaving.  
859 The prevention may be by physical barrier or by a staff member  
860 who is acting in a manner, or who is physically situated, so as  
861 to prevent the person from leaving the room or area. For  
862 purposes of this part ~~chapter~~, the term does not mean isolation  
863 due to a person's medical condition or symptoms.

864 ~~(42)-(30)~~ "Secretary" means the Secretary of Children and  
865 Families.

866 (43) "Service provider" means a receiving facility, a  
867 facility licensed under chapter 397, a treatment facility, an  
868 entity under contract with the department to provide mental  
869 health or substance abuse services, a community mental health  
870 center or clinic, a psychologist, a clinical social worker, a  
871 marriage and family therapist, a mental health counselor, a  
872 physician, a psychiatrist, an advanced registered nurse

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873 practitioner, a psychiatric nurse, or a qualified professional  
874 as defined in s. 39.01.

875 (44) "Substance abuse impairment" means a condition  
876 involving the use of alcoholic beverages or any psychoactive or  
877 mood-altering substance in such a manner that a person has lost  
878 the power of self-control and has inflicted or is likely to  
879 inflict physical harm on himself, herself, or another.

880 (45) ~~(31)~~ "Transfer evaluation" means the process by which,  
881 as approved by the appropriate district office of the  
882 department, whereby a person who is being considered for  
883 placement in a state treatment facility is ~~first~~ evaluated for  
884 appropriateness of admission to such the facility ~~by a~~  
885 community-based public receiving facility or by a community  
886 mental health center or clinic if the public receiving facility  
887 is not a community mental health center or clinic.

888 (46) ~~(32)~~ "Treatment facility" means a any state-owned,  
889 state-operated, or state-supported hospital, center, or clinic  
890 designated by the department for extended treatment and  
891 hospitalization, beyond that provided for by a receiving  
892 facility, of persons who have a mental illness, including  
893 facilities of the United States Government, and any private  
894 facility designated by the department when rendering such  
895 services to a person pursuant to the provisions of this part.  
896 Patients treated in facilities of the United States Government  
897 shall be solely those whose care is the responsibility of the  
898 United States Department of Veterans Affairs.

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899        (47) "Triage center" means a facility that has medical,  
900 mental health, and substance abuse professionals present or on  
901 call to provide emergency screening and evaluation for mental  
902 health or substance abuse disorders for individuals transported  
903 to the center by a law enforcement officer.

904        ~~(33) "Service provider" means any public or private~~  
905 ~~receiving facility, an entity under contract with the Department~~  
906 ~~of Children and Families to provide mental health services, a~~  
907 ~~clinical psychologist, a clinical social worker, a marriage and~~  
908 ~~family therapist, a mental health counselor, a physician, a~~  
909 ~~psychiatric nurse as defined in subsection (23), or a community~~  
910 ~~mental health center or clinic as defined in this part.~~

911        ~~(34) "Involuntary examination" means an examination~~  
912 ~~performed under s. 394.463 to determine if an individual~~  
913 ~~qualifies for involuntary inpatient treatment under s.~~  
914 ~~394.467(1) or involuntary outpatient treatment under s.~~  
915 ~~394.4655(1).~~

916        ~~(35) "Involuntary placement" means either involuntary~~  
917 ~~outpatient treatment pursuant to s. 394.4655 or involuntary~~  
918 ~~inpatient treatment pursuant to s. 394.467.~~

919        ~~(36) "Marriage and family therapist" means a person~~  
920 ~~licensed as a marriage and family therapist under chapter 491.~~

921        ~~(37) "Mental health counselor" means a person licensed as~~  
922 ~~a mental health counselor under chapter 491.~~

923        ~~(38) "Electronic means" means a form of telecommunication~~  
924 ~~that requires all parties to maintain visual as well as audio~~

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925 ~~communication.~~

926 Section 84. Subsection (2) of section 394.463, Florida  
927 Statutes, is amended to read:

928 394.463 Involuntary examination.—

929 (2) INVOLUNTARY EXAMINATION.—

930 (a) An involuntary examination may be initiated by any one  
931 of the following means:

932 1. A circuit or county court may enter an ex parte order  
933 stating that a person appears to meet the criteria for  
934 involuntary examination and specifying, ~~giving~~ the findings on  
935 which that conclusion is based. The ex parte order for  
936 involuntary examination must be based on written or oral sworn  
937 testimony that includes specific facts that support the  
938 findings, ~~written or oral~~. If other less restrictive means are  
939 not available, such as voluntary appearance for outpatient  
940 evaluation, a law enforcement officer, or other designated agent  
941 of the court, shall take the person into custody and deliver him  
942 or her to an appropriate ~~the nearest receiving~~ facility within  
943 the designated receiving system pursuant to s. 394.462 for  
944 involuntary examination. The order of the court shall be made a  
945 part of the patient's clinical record. A ~~No~~ fee may not ~~shall~~ be  
946 charged for the filing of an order under this subsection. A ~~Any~~  
947 ~~receiving~~ facility accepting the patient based on this order  
948 must send a copy of the order to the department ~~Agency for~~  
949 ~~Health Care Administration~~ on the next working day. The order  
950 may be submitted electronically through existing data systems,

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951 if available. The order shall be valid only until the person is  
952 delivered to the facility or ~~executed or, if not executed,~~ for  
953 the period specified in the order itself, whichever comes first.  
954 If no time limit is specified in the order, the order shall be  
955 valid for 7 days after the date that the order was signed.

956 2. A law enforcement officer shall take a person who  
957 appears to meet the criteria for involuntary examination into  
958 custody and deliver the person or have him or her delivered to  
959 the appropriate nearest receiving facility within the designated  
960 receiving system pursuant to s. 394.462 for examination. The  
961 officer shall execute a written report detailing the  
962 circumstances under which the person was taken into custody,  
963 which must ~~and the report shall~~ be made a part of the patient's  
964 clinical record. Any ~~receiving~~ facility accepting the patient  
965 based on this report must send a copy of the report to the  
966 department ~~Agency for Health Care Administration on~~ the next  
967 working day.

968 3. A physician, clinical psychologist, psychiatric nurse,  
969 mental health counselor, marriage and family therapist, or  
970 clinical social worker may execute a certificate stating that he  
971 or she has examined a person within the preceding 48 hours and  
972 finds that the person appears to meet the criteria for  
973 involuntary examination and stating the observations upon which  
974 that conclusion is based. If other less restrictive means, such  
975 as voluntary appearance for outpatient evaluation, are not  
976 available, ~~such as voluntary appearance for outpatient~~

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977 ~~evaluation,~~ a law enforcement officer shall take into custody  
978 the person named in the certificate ~~into custody~~ and deliver him  
979 or her to the appropriate, or nearest, receiving facility within  
980 the designated receiving system pursuant to s. 394.462 for  
981 involuntary examination. The law enforcement officer shall  
982 execute a written report detailing the circumstances under which  
983 the person was taken into custody. The report and certificate  
984 shall be made a part of the patient's clinical record. Any  
985 ~~receiving~~ facility accepting the patient based on this  
986 certificate must send a copy of the certificate to the  
987 department ~~Agency for Health Care Administration~~ on the next  
988 working day. The document may be submitted electronically  
989 through existing data systems, if applicable.

990 (b) A person may ~~shall~~ not be removed from any program or  
991 residential placement licensed under chapter 400 or chapter 429  
992 and transported to a receiving facility for involuntary  
993 examination unless an ex parte order, a professional  
994 certificate, or a law enforcement officer's report is first  
995 prepared. If the condition of the person is such that  
996 preparation of a law enforcement officer's report is not  
997 practicable before removal, the report shall be completed as  
998 soon as possible after removal, but in any case before the  
999 person is transported to a receiving facility. A ~~receiving~~  
1000 facility admitting a person for involuntary examination who is  
1001 not accompanied by the required ex parte order, professional  
1002 certificate, or law enforcement officer's report shall notify

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1003 the department ~~Agency for Health Care Administration~~ of such  
1004 admission by certified mail or by e-mail, if available, by no  
1005 ~~later than~~ the next working day. The provisions of this  
1006 paragraph do not apply when transportation is provided by the  
1007 patient's family or guardian.

1008 (c) A law enforcement officer acting in accordance with an  
1009 ex parte order issued pursuant to this subsection may serve and  
1010 execute such order on any day of the week, at any time of the  
1011 day or night.

1012 (d) A law enforcement officer acting in accordance with an  
1013 ex parte order issued pursuant to this subsection may use such  
1014 reasonable physical force as is necessary to gain entry to the  
1015 premises, and any dwellings, buildings, or other structures  
1016 located on the premises, and to take custody of the person who  
1017 is the subject of the ex parte order.

1018 (e) The department ~~Agency for Health Care Administration~~  
1019 shall receive and maintain the copies of ex parte orders,  
1020 involuntary outpatient services ~~placement~~ orders issued pursuant  
1021 to s. 394.4655, involuntary inpatient placement orders issued  
1022 pursuant to s. 394.467, professional certificates, and law  
1023 enforcement officers' reports. These documents shall be  
1024 considered part of the clinical record, governed by the  
1025 provisions of s. 394.4615. These documents shall be used to ~~The~~  
1026 ~~agency shall~~ prepare annual reports analyzing the data obtained  
1027 from these documents, without information identifying patients,  
1028 and shall provide copies of reports to the department, the

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1029 President of the Senate, the Speaker of the House of  
1030 Representatives, and the minority leaders of the Senate and the  
1031 House of Representatives.

1032 (f) A patient shall be examined by a physician or, a  
1033 clinical psychologist, or by a psychiatric nurse performing  
1034 within the framework of an established protocol with a  
1035 psychiatrist at a ~~receiving~~ facility without unnecessary delay  
1036 to determine if the criteria for involuntary services are met.  
1037 Emergency treatment may be provided ~~and may~~, upon the order of a  
1038 physician if the physician determines, ~~be given emergency~~  
1039 ~~treatment if it is determined~~ that such treatment is necessary  
1040 for the safety of the patient or others. The patient may not be  
1041 released by the receiving facility or its contractor without the  
1042 documented approval of a psychiatrist or a clinical psychologist  
1043 or, if the receiving facility is owned or operated by a hospital  
1044 or health system, the release may also be approved by a  
1045 psychiatric nurse performing within the framework of an  
1046 established protocol with a psychiatrist, or an attending  
1047 emergency department physician with experience in the diagnosis  
1048 and treatment of mental illness ~~and nervous disorders~~ and after  
1049 completion of an involuntary examination pursuant to this  
1050 subsection. A psychiatric nurse may not approve the release of a  
1051 patient if the involuntary examination was initiated by a  
1052 psychiatrist unless the release is approved by the initiating  
1053 psychiatrist. ~~However, a patient may not be held in a receiving~~  
1054 ~~facility for involuntary examination longer than 72 hours.~~

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1055 (g) Within the 72-hour examination period or, if the 72  
1056 hours ends on a weekend or holiday, no later than the next  
1057 working day thereafter, one of the following actions must be  
1058 taken, based on the individual needs of the patient:

1059 1. The patient shall be released, unless he or she is  
1060 charged with a crime, in which case the patient shall be  
1061 returned to the custody of a law enforcement officer;

1062 2. The patient shall be released, subject to the  
1063 provisions of subparagraph 1., for voluntary outpatient  
1064 treatment;

1065 3. The patient, unless he or she is charged with a crime,  
1066 shall be asked to give express and informed consent to placement  
1067 as a voluntary patient and, if such consent is given, the  
1068 patient shall be admitted as a voluntary patient; or

1069 4. A petition for involuntary placement shall be filed in  
1070 the circuit court if inpatient treatment is deemed necessary or  
1071 with the criminal county court, as defined in s. 394.4655(1), as  
1072 applicable. When inpatient treatment is deemed necessary, the  
1073 least restrictive treatment consistent with the optimum  
1074 improvement of the patient's condition shall be made available.  
1075 When a petition is to be filed for involuntary outpatient  
1076 placement, it shall be filed by one of the petitioners specified  
1077 in s. 394.4655(4) (a). A petition for involuntary inpatient  
1078 placement shall be filed by the facility administrator.

1079 (h) ~~(g)~~ A person for whom an involuntary examination has  
1080 been initiated who is being evaluated or treated at a hospital

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1081 for an emergency medical condition specified in s. 395.002 must  
1082 be examined by a ~~receiving~~ facility within 72 hours. The 72-hour  
1083 period begins when the patient arrives at the hospital and  
1084 ceases when the attending physician documents that the patient  
1085 has an emergency medical condition. If the patient is examined  
1086 at a hospital providing emergency medical services by a  
1087 professional qualified to perform an involuntary examination and  
1088 is found as a result of that examination not to meet the  
1089 criteria for involuntary outpatient services ~~placement~~ pursuant  
1090 to s. 394.4655(2) ~~394.4655(1)~~ or involuntary inpatient placement  
1091 pursuant to s. 394.467(1), the patient may be offered voluntary  
1092 services or placement, if appropriate, or released directly from  
1093 the hospital providing emergency medical services. The finding  
1094 by the professional that the patient has been examined and does  
1095 not meet the criteria for involuntary inpatient services  
1096 ~~placement~~ or involuntary outpatient placement must be entered  
1097 into the patient's clinical record. ~~Nothing in~~ This paragraph is  
1098 not intended to prevent a hospital providing emergency medical  
1099 services from appropriately transferring a patient to another  
1100 hospital before ~~prior to~~ stabilization if, ~~provided~~ the  
1101 requirements of s. 395.1041(3)(c) have been met.

1102 (i) ~~(g)~~ A person for whom an involuntary examination has  
1103 been initiated who is being evaluated or treated at a hospital  
1104 for an emergency medical condition specified in s. 395.002 must  
1105 be examined by a ~~receiving~~ facility within 72 hours. The 72-hour  
1106 period begins when the patient arrives at the hospital and

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1107 ceases when the attending physician documents that the patient  
1108 has an emergency medical condition. If the patient is examined  
1109 at a hospital providing emergency medical services by a  
1110 professional qualified to perform an involuntary examination and  
1111 is found as a result of that examination not to meet the  
1112 criteria for involuntary outpatient services ~~placement~~ pursuant  
1113 to s. 394.4655(2) ~~394.4655(1)~~ or involuntary inpatient placement  
1114 pursuant to s. 394.467(1), the patient may be offered voluntary  
1115 services or placement, if appropriate, or released directly from  
1116 the hospital providing emergency medical services. The finding  
1117 by the professional that the patient has been examined and does  
1118 not meet the criteria for involuntary inpatient placement or  
1119 involuntary outpatient services ~~placement~~ must be entered into  
1120 the patient's clinical record. ~~Nothing in~~ This paragraph is not  
1121 intended to prevent a hospital providing emergency medical  
1122 services from appropriately transferring a patient to another  
1123 hospital before ~~prior to~~ stabilization if, ~~provided~~ the  
1124 requirements of s. 395.1041(3)(c) have been met.

1125 (j) ~~(h)~~ One of the following must occur within 12 hours  
1126 after the patient's attending physician documents that the  
1127 patient's medical condition has stabilized or that an emergency  
1128 medical condition does not exist:

1129 1. The patient must be examined by a ~~designated receiving~~  
1130 facility and released; or

1131 2. The patient must be transferred to a designated  
1132 ~~receiving~~ facility in which appropriate medical treatment is

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1133 available. However, the ~~receiving~~ facility must be notified of  
1134 the transfer within 2 hours after the patient's condition has  
1135 been stabilized or after determination that an emergency medical  
1136 condition does not exist.

1137 ~~(i) Within the 72-hour examination period or, if the 72~~  
1138 ~~hours ends on a weekend or holiday, no later than the next~~  
1139 ~~working day thereafter, one of the following actions must be~~  
1140 ~~taken, based on the individual needs of the patient:~~

1141 ~~1. The patient shall be released, unless he or she is~~  
1142 ~~charged with a crime, in which case the patient shall be~~  
1143 ~~returned to the custody of a law enforcement officer;~~

1144 ~~2. The patient shall be released, subject to the~~  
1145 ~~provisions of subparagraph 1., for voluntary outpatient~~  
1146 ~~treatment;~~

1147 ~~3. The patient, unless he or she is charged with a crime,~~  
1148 ~~shall be asked to give express and informed consent to placement~~  
1149 ~~as a voluntary patient, and, if such consent is given, the~~  
1150 ~~patient shall be admitted as a voluntary patient; or~~

1151 ~~4. A petition for involuntary placement shall be filed in~~  
1152 ~~the circuit court when outpatient or inpatient treatment is~~  
1153 ~~deemed necessary. When inpatient treatment is deemed necessary,~~  
1154 ~~the least restrictive treatment consistent with the optimum~~  
1155 ~~improvement of the patient's condition shall be made available.~~  
1156 ~~When a petition is to be filed for involuntary outpatient~~  
1157 ~~placement, it shall be filed by one of the petitioners specified~~

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1158 ~~in s. 394.4655(3)(a). A petition for involuntary inpatient~~  
1159 ~~placement shall be filed by the facility administrator.~~

1160 Section 85. Subsection (3) of section 394.4615, Florida  
1161 Statutes, is amended to read:

1162 394.4615 Clinical records; confidentiality.—

1163 (3) Information from the clinical record may be released  
1164 in the following circumstances:

1165 (a) When a patient has declared an intention to harm other  
1166 persons. When such declaration has been made, the administrator  
1167 may authorize the release of sufficient information to provide  
1168 adequate warning to the person threatened with harm by the  
1169 patient.

1170 (b) When the administrator of the facility or secretary of  
1171 the department deems release to a qualified researcher as  
1172 defined in administrative rule, an aftercare treatment provider,  
1173 or an employee or agent of the department is necessary for  
1174 treatment of the patient, maintenance of adequate records,  
1175 compilation of treatment data, aftercare planning, or evaluation  
1176 of programs.

1177  
1178 For the purpose of determining whether a person meets the  
1179 criteria for involuntary outpatient placement or for preparing  
1180 the proposed treatment plan pursuant to s. 394.4655, the  
1181 clinical record may be released to the state attorney, the  
1182 public defender or the patient's private legal counsel, the  
1183 court, and to the appropriate mental health professionals,

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1184 including the service provider identified in s. 394.4655(7)(b)2.  
1185 ~~394.4655(6)(b)2.~~, in accordance with state and federal law.

1186 Section 86. Section 394.47891, Florida Statutes, is  
1187 amended to read:

1188 394.47891 Military veterans and servicemembers court  
1189 programs.—The chief judge of each judicial circuit may establish  
1190 a Military Veterans and Servicemembers Court Program under which  
1191 veterans, as defined in s. 1.01, including veterans who were  
1192 discharged or released under a general discharge, and  
1193 servicemembers, as defined in s. 250.01, who are charged or  
1194 convicted of a criminal offense and who suffer from a military-  
1195 related mental illness, traumatic brain injury, substance abuse  
1196 disorder, or psychological problem can be sentenced in  
1197 accordance with chapter 921 in a manner that appropriately  
1198 addresses the severity of the mental illness, traumatic brain  
1199 injury, substance abuse disorder, or psychological problem  
1200 through services tailored to the individual needs of the  
1201 participant. Entry into any Military Veterans and Servicemembers  
1202 Court Program must be based upon the sentencing court's  
1203 assessment of the defendant's criminal history, military  
1204 service, substance abuse treatment needs, mental health  
1205 treatment needs, amenability to the services of the program, the  
1206 recommendation of the state attorney and the victim, if any, and  
1207 the defendant's agreement to enter the program.

1208 Section 87. Section 394.47892, Florida Statutes, is  
1209 created to read:

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1210       394.47892 Mental health court programs.—  
1211       (1) Each county may fund a mental health court program  
1212 under which a defendant in the justice system assessed with a  
1213 mental illness shall be processed in such a manner as to  
1214 appropriately address the severity of the identified mental  
1215 illness through treatment services tailored to the individual  
1216 needs of the participant. The Legislature intends to encourage  
1217 the department, the Department of Corrections, the Department of  
1218 Juvenile Justice, the Department of Health, the Department of  
1219 Law Enforcement, the Department of Education, and other such  
1220 agencies, local governments, law enforcement agencies,  
1221 interested public or private entities, and individuals to  
1222 support the creation and establishment of problem-solving court  
1223 programs. Participation in a mental health court program does  
1224 not relieve a public or private agency of its responsibility for  
1225 a child or an adult, but enables such agency to better meet the  
1226 child's or adult's needs through shared responsibility and  
1227 resources.  
1228       (2) Mental health court programs may include pretrial  
1229 intervention programs as provided in ss. 948.08, 948.16, and  
1230 985.345, postadjudicatory mental health court programs as  
1231 provided in ss. 948.01 and 948.06, and review of the status of  
1232 compliance or noncompliance of sentenced defendants through a  
1233 mental health court program.  
1234       (3) Entry into a pretrial mental health court program is  
1235 voluntary.

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1236 (4) (a) Entry into a postadjudicatory mental health court  
1237 program as a condition of probation or community control  
1238 pursuant to s. 948.01 or s. 948.06 must be based upon the  
1239 sentencing court's assessment of the defendant's criminal  
1240 history, mental health screening outcome, amenability to the  
1241 services of the program, and total sentence points; the  
1242 recommendation of the state attorney and the victim, if any; and  
1243 the defendant's agreement to enter the program.

1244 (b) A defendant who is sentenced to a postadjudicatory  
1245 mental health court program and who, while a mental health court  
1246 program participant, is the subject of a violation of probation  
1247 or community control under s. 948.06 shall have the violation of  
1248 probation or community control heard by the judge presiding over  
1249 the postadjudicatory mental health court program. After a  
1250 hearing on or admission of the violation, the judge shall  
1251 dispose of any such violation as he or she deems appropriate if  
1252 the resulting sentence or conditions are lawful.

1253 (5) (a) Contingent upon an annual appropriation by the  
1254 Legislature, the state courts system shall establish, at a  
1255 minimum, one coordinator position in each mental health court  
1256 program to coordinate the responsibilities of the participating  
1257 agencies and service providers. Each coordinator shall provide  
1258 direct support to the mental health court program by providing  
1259 coordination between the multidisciplinary team and the  
1260 judiciary, providing case management, monitoring compliance of  
1261 the participants in the mental health court program with court

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1262 requirements, and managing the collection of data for program  
1263 evaluation and accountability.

1264 (b) Each mental health court program shall collect  
1265 sufficient client-level data and programmatic information for  
1266 purposes of program evaluation. Client-level data includes  
1267 primary offenses that resulted in the mental health court  
1268 program referral or sentence, treatment compliance, completion  
1269 status and reasons for failure to complete, offenses committed  
1270 during treatment and the sanctions imposed, frequency of court  
1271 appearances, and units of service. Programmatic information  
1272 includes referral and screening procedures, eligibility  
1273 criteria, type and duration of treatment offered, and  
1274 residential treatment resources. The programmatic information  
1275 and aggregate data on the number of mental health court program  
1276 admissions and terminations by type of termination shall be  
1277 reported annually by each mental health court program to the  
1278 Office of the State Courts Administrator.

1279 (6) If a county chooses to fund a mental health court  
1280 program, the county must secure funding from sources other than  
1281 the state for those costs not otherwise assumed by the state  
1282 pursuant to s. 29.004. However, this subsection does not  
1283 preclude counties from using funds for treatment and other  
1284 services provided through state executive branch agencies.  
1285 Counties may provide, by interlocal agreement, for the  
1286 collective funding of these programs.

1287 (7) The chief judge of each judicial circuit may appoint

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1288 an advisory committee for the mental health court program. The  
1289 committee shall be composed of the chief judge, or his or her  
1290 designee, who shall serve as chair; the judge or judges of the  
1291 mental health court program, if not otherwise designated by the  
1292 chief judge as his or her designee; the state attorney, or his  
1293 or her designee; the public defender, or his or her designee;  
1294 the mental health court program coordinator or coordinators;  
1295 community representatives; treatment representatives; and any  
1296 other persons who the chair deems appropriate.

1297 Section 88. Paragraph (a) of subsection (2) of section  
1298 790.065, Florida Statutes, is amended to read:

1299 790.065 Sale and delivery of firearms.—

1300 (2) Upon receipt of a request for a criminal history  
1301 record check, the Department of Law Enforcement shall, during  
1302 the licensee's call or by return call, forthwith:

1303 (a) Review any records available to determine if the  
1304 potential buyer or transferee:

1305 1. Has been convicted of a felony and is prohibited from  
1306 receipt or possession of a firearm pursuant to s. 790.23;

1307 2. Has been convicted of a misdemeanor crime of domestic  
1308 violence, and therefore is prohibited from purchasing a firearm;

1309 3. Has had adjudication of guilt withheld or imposition of  
1310 sentence suspended on any felony or misdemeanor crime of  
1311 domestic violence unless 3 years have elapsed since probation or  
1312 any other conditions set by the court have been fulfilled or  
1313 expunction has occurred; or

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1314 4. Has been adjudicated mentally defective or has been  
1315 committed to a mental institution by a court or as provided in  
1316 sub-sub-subparagraph b.(II), and as a result is prohibited by  
1317 state or federal law from purchasing a firearm.

1318 a. As used in this subparagraph, "adjudicated mentally  
1319 defective" means a determination by a court that a person, as a  
1320 result of marked subnormal intelligence, or mental illness,  
1321 incompetency, condition, or disease, is a danger to himself or  
1322 herself or to others or lacks the mental capacity to contract or  
1323 manage his or her own affairs. The phrase includes a judicial  
1324 finding of incapacity under s. 744.331(6)(a), an acquittal by  
1325 reason of insanity of a person charged with a criminal offense,  
1326 and a judicial finding that a criminal defendant is not  
1327 competent to stand trial.

1328 b. As used in this subparagraph, "committed to a mental  
1329 institution" means:

1330 (I) Involuntary commitment, commitment for mental  
1331 defectiveness or mental illness, and commitment for substance  
1332 abuse. The phrase includes involuntary inpatient placement as  
1333 defined in s. 394.467, involuntary outpatient placement as  
1334 defined in s. 394.4655, involuntary assessment and stabilization  
1335 under s. 397.6818, and involuntary substance abuse treatment  
1336 under s. 397.6957, but does not include a person in a mental  
1337 institution for observation or discharged from a mental  
1338 institution based upon the initial review by the physician or a  
1339 voluntary admission to a mental institution; or

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1340 (II) Notwithstanding sub-sub-subparagraph (I), voluntary  
1341 admission to a mental institution for outpatient or inpatient  
1342 treatment of a person who had an involuntary examination under  
1343 s. 394.463, where each of the following conditions have been  
1344 met:

1345 (A) An examining physician found that the person is an  
1346 imminent danger to himself or herself or others.

1347 (B) The examining physician certified that if the person  
1348 did not agree to voluntary treatment, a petition for involuntary  
1349 outpatient or inpatient services ~~treatment~~ would have been filed  
1350 under s. 394.463(2)(g) ~~s. 394.463(2)(i)4.~~, or the examining  
1351 physician certified that a petition was filed and the person  
1352 subsequently agreed to voluntary treatment before ~~prior to~~ a  
1353 court hearing on the petition.

1354 (C) Before agreeing to voluntary treatment, the person  
1355 received written notice of that finding and certification, and  
1356 written notice that as a result of such finding, he or she may  
1357 be prohibited from purchasing a firearm, and may not be eligible  
1358 to apply for or retain a concealed weapon or firearms license  
1359 under s. 790.06 and the person acknowledged such notice in  
1360 writing, in substantially the following form:

1361 "I understand that the doctor who examined me believes I am a  
1362 danger to myself or to others. I understand that if I do not  
1363 agree to voluntary treatment, a petition will be filed in court  
1364 to require me to receive involuntary treatment. I understand  
1365 that if that petition is filed, I have the right to contest it.

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1366 In the event a petition has been filed, I understand that I can  
1367 subsequently agree to voluntary treatment prior to a court  
1368 hearing. I understand that by agreeing to voluntary treatment in  
1369 either of these situations, I may be prohibited from buying  
1370 firearms and from applying for or retaining a concealed weapons  
1371 or firearms license until I apply for and receive relief from  
1372 that restriction under Florida law."

1373 (D) A judge or a magistrate has, pursuant to sub-sub-  
1374 subparagraph c.(II), reviewed the record of the finding,  
1375 certification, notice, and written acknowledgment classifying  
1376 the person as an imminent danger to himself or herself or  
1377 others, and ordered that such record be submitted to the  
1378 department.

1379 c. In order to check for these conditions, the department  
1380 shall compile and maintain an automated database of persons who  
1381 are prohibited from purchasing a firearm based on court records  
1382 of adjudications of mental defectiveness or commitments to  
1383 mental institutions.

1384 (I) Except as provided in sub-sub-subparagraph (II),  
1385 clerks of court shall submit these records to the department  
1386 within 1 month after the rendition of the adjudication or  
1387 commitment. Reports shall be submitted in an automated format.  
1388 The reports must, at a minimum, include the name, along with any  
1389 known alias or former name, the sex, and the date of birth of  
1390 the subject.

1391 (II) For persons committed to a mental institution

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1392 pursuant to sub-sub-subparagraph b.(II), within 24 hours after  
1393 the person's agreement to voluntary admission, a record of the  
1394 finding, certification, notice, and written acknowledgment must  
1395 be filed by the administrator of the receiving or treatment  
1396 facility, as defined in s. 394.455, with the clerk of the court  
1397 for the county in which the involuntary examination under s.  
1398 394.463 occurred. No fee shall be charged for the filing under  
1399 this sub-sub-subparagraph. The clerk must present the records to  
1400 a judge or magistrate within 24 hours after receipt of the  
1401 records. A judge or magistrate is required and has the lawful  
1402 authority to review the records ex parte and, if the judge or  
1403 magistrate determines that the record supports the classifying  
1404 of the person as an imminent danger to himself or herself or  
1405 others, to order that the record be submitted to the department.  
1406 If a judge or magistrate orders the submittal of the record to  
1407 the department, the record must be submitted to the department  
1408 within 24 hours.

1409 d. A person who has been adjudicated mentally defective or  
1410 committed to a mental institution, as those terms are defined in  
1411 this paragraph, may petition the ~~circuit~~ court that made the  
1412 adjudication or commitment, or the court that ordered that the  
1413 record be submitted to the department pursuant to sub-sub-  
1414 subparagraph c.(II), for relief from the firearm disabilities  
1415 imposed by such adjudication or commitment. A copy of the  
1416 petition shall be served on the state attorney for the county in  
1417 which the person was adjudicated or committed. The state

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1418 attorney may object to and present evidence relevant to the  
1419 relief sought by the petition. The hearing on the petition may  
1420 be open or closed as the petitioner may choose. The petitioner  
1421 may present evidence and subpoena witnesses to appear at the  
1422 hearing on the petition. The petitioner may confront and cross-  
1423 examine witnesses called by the state attorney. A record of the  
1424 hearing shall be made by a certified court reporter or by court-  
1425 approved electronic means. The court shall make written findings  
1426 of fact and conclusions of law on the issues before it and issue  
1427 a final order. The court shall grant the relief requested in the  
1428 petition if the court finds, based on the evidence presented  
1429 with respect to the petitioner's reputation, the petitioner's  
1430 mental health record and, if applicable, criminal history  
1431 record, the circumstances surrounding the firearm disability,  
1432 and any other evidence in the record, that the petitioner will  
1433 not be likely to act in a manner that is dangerous to public  
1434 safety and that granting the relief would not be contrary to the  
1435 public interest. If the final order denies relief, the  
1436 petitioner may not petition again for relief from firearm  
1437 disabilities until 1 year after the date of the final order. The  
1438 petitioner may seek judicial review of a final order denying  
1439 relief in the district court of appeal having jurisdiction over  
1440 the court that issued the order. The review shall be conducted  
1441 de novo. Relief from a firearm disability granted under this  
1442 sub-subparagraph has no effect on the loss of civil rights,  
1443 including firearm rights, for any reason other than the

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1444 particular adjudication of mental defectiveness or commitment to  
1445 a mental institution from which relief is granted.

1446 e. Upon receipt of proper notice of relief from firearm  
1447 disabilities granted under sub-subparagraph d., the department  
1448 shall delete any mental health record of the person granted  
1449 relief from the automated database of persons who are prohibited  
1450 from purchasing a firearm based on court records of  
1451 adjudications of mental defectiveness or commitments to mental  
1452 institutions.

1453 f. The department is authorized to disclose data collected  
1454 pursuant to this subparagraph to agencies of the Federal  
1455 Government and other states for use exclusively in determining  
1456 the lawfulness of a firearm sale or transfer. The department is  
1457 also authorized to disclose this data to the Department of  
1458 Agriculture and Consumer Services for purposes of determining  
1459 eligibility for issuance of a concealed weapons or concealed  
1460 firearms license and for determining whether a basis exists for  
1461 revoking or suspending a previously issued license pursuant to  
1462 s. 790.06(10). When a potential buyer or transferee appeals a  
1463 nonapproval based on these records, the clerks of court and  
1464 mental institutions shall, upon request by the department,  
1465 provide information to help determine whether the potential  
1466 buyer or transferee is the same person as the subject of the  
1467 record. Photographs and any other data that could confirm or  
1468 negate identity must be made available to the department for  
1469 such purposes, notwithstanding any other provision of state law

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1470 to the contrary. Any such information that is made confidential  
1471 or exempt from disclosure by law shall retain such confidential  
1472 or exempt status when transferred to the department.

1473 Section 89. Paragraph (a) of subsection (5) of section  
1474 910.035, Florida Statutes, is amended to read:

1475 910.035 Transfer from county for plea, sentence, or  
1476 participation in a problem-solving court.—

1477 (5) TRANSFER FOR PARTICIPATION IN A PROBLEM-SOLVING  
1478 COURT.—

1479 (a) For purposes of this subsection, the term "problem-  
1480 solving court" means a drug court pursuant to s. 948.01, s.  
1481 948.06, s. 948.08, s. 948.16, or s. 948.20; a military veterans'  
1482 and servicemembers' court pursuant to s. 394.47891, s. 948.08,  
1483 s. 948.16, or s. 948.21; ~~or~~ a mental health court program  
1484 pursuant to s. 394.47892, s. 948.01, s. 948.06, s. 948.08, or s.  
1485 948.16; or a delinquency pretrial intervention court program  
1486 pursuant to s. 985.345.

1487 Section 90. Section 916.185, Florida Statutes, is created  
1488 to read:

1489 916.185 Forensic Hospital Diversion Pilot Program.—

1490 (1) LEGISLATIVE FINDINGS AND INTENT.—The Legislature finds  
1491 that many jail inmates who have serious mental illnesses and who  
1492 are committed to state forensic mental health treatment  
1493 facilities for restoration of competency to proceed could be  
1494 served more effectively and at less cost in community-based  
1495 alternative programs. The Legislature further finds that many

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1496 people who have serious mental illnesses and who have been  
1497 discharged from state forensic mental health treatment  
1498 facilities could avoid returning to the criminal justice and  
1499 forensic mental health systems if they received specialized  
1500 treatment in the community. Therefore, it is the intent of the  
1501 Legislature to create the Forensic Hospital Diversion Pilot  
1502 Program to serve offenders who have mental illnesses or co-  
1503 occurring mental illnesses and substance use disorders and who  
1504 are involved in or at risk of entering state forensic mental  
1505 health treatment facilities, prisons, jails, or state civil  
1506 mental health treatment facilities.

1507 (2) DEFINITIONS.—As used in this section, the term:

1508 (a) "Best practices" means treatment services that  
1509 incorporate the most effective and acceptable interventions  
1510 available in the care and treatment of offenders who are  
1511 diagnosed as having mental illnesses or co-occurring mental  
1512 illnesses and substance use disorders.

1513 (b) "Community forensic system" means the community mental  
1514 health and substance use forensic treatment system, including  
1515 the comprehensive set of services and supports provided to  
1516 offenders involved in or at risk of becoming involved in the  
1517 criminal justice system.

1518 (c) "Evidence-based practices" means interventions and  
1519 strategies that, based on the best available empirical research,  
1520 demonstrate effective and efficient outcomes in the care and  
1521 treatment of offenders who are diagnosed as having mental

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1522 illnesses or co-occurring mental illnesses and substance use  
1523 disorders.

1524 (3) CREATION.—There is authorized a Forensic Hospital  
1525 Diversion Pilot Program to provide competency-restoration and  
1526 community-reintegration services in either a locked residential  
1527 treatment facility when appropriate or a community-based  
1528 facility based on considerations of public safety, the needs of  
1529 the individual, and available resources.

1530 (a) The department may implement a Forensic Hospital  
1531 Diversion Pilot Program modeled after the Miami-Dade Forensic  
1532 Alternative Center, taking into account local needs and  
1533 resources in Duval County, in conjunction with the Fourth  
1534 Judicial Circuit in Duval County; in Broward County, in  
1535 conjunction with the Seventeenth Judicial Circuit in Broward  
1536 County; and in Miami-Dade County, in conjunction with the  
1537 Eleventh Judicial Circuit in Miami-Dade County.

1538 (b) If the department elects to create and implement the  
1539 program, the department shall include a comprehensive continuum  
1540 of care and services that use evidence-based practices and best  
1541 practices to treat offenders who have mental health and co-  
1542 occurring substance use disorders.

1543 (c) The department and the corresponding judicial circuits  
1544 may implement this section if existing resources are available  
1545 to do so on a recurring basis. The department may request budget  
1546 amendments pursuant to chapter 216 to realign funds between  
1547 mental health services and community substance abuse and mental

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1548 health services in order to implement this pilot program.

1549 (4) ELIGIBILITY.—Participation in the Forensic Hospital  
1550 Diversion Pilot Program is limited to offenders who:

1551 (a) Are 18 years of age or older.

1552 (b) Are charged with a felony of the second degree or a  
1553 felony of the third degree.

1554 (c) Do not have a significant history of violent criminal  
1555 offenses.

1556 (d) Are adjudicated incompetent to proceed to trial or not  
1557 guilty by reason of insanity pursuant to this part.

1558 (e) Meet public safety and treatment criteria established  
1559 by the department for placement in a community setting.

1560 (f) Otherwise would be admitted to a state mental health  
1561 treatment facility.

1562 (5) TRAINING.—The Legislature encourages the Florida  
1563 Supreme Court, in consultation and cooperation with the Florida  
1564 Supreme Court Task Force on Substance Abuse and Mental Health  
1565 Issues in the Courts, to develop educational training for judges  
1566 in the pilot program areas which focuses on the community  
1567 forensic system.

1568 (6) RULEMAKING.—The department may adopt rules to  
1569 administer this section.

1570 Section 91. Subsections (6) through (13) of section  
1571 948.001, Florida Statutes, are renumbered as subsections (7)  
1572 through (14), respectively, and a new subsection (6) is added to  
1573 that section to read:

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1574 948.001 Definitions.—As used in this chapter, the term:

1575 (6) "Mental health probation" means a form of specialized  
1576 supervision that emphasizes mental health treatment and working  
1577 with treatment providers to focus on underlying mental health  
1578 disorders and compliance with a prescribed psychotropic  
1579 medication regimen in accordance with individualized treatment  
1580 plans. Mental health probation shall be supervised by officers  
1581 with restricted caseloads who are sensitive to the unique needs  
1582 of individuals with mental health disorders, and who will work  
1583 in tandem with community mental health case managers assigned to  
1584 the defendant. Caseloads of such officers should be restricted  
1585 to a maximum of 50 cases per officer in order to ensure an  
1586 adequate level of staffing and supervision.

1587 Section 92. Subsection (8) is added to section 948.01,  
1588 Florida Statutes, to read:

1589 948.01 When court may place defendant on probation or into  
1590 community control.—

1591 (8) (a) Notwithstanding s. 921.0024 and effective for  
1592 offenses committed on or after July 1, 2016, the sentencing  
1593 court may place the defendant into a postadjudicatory mental  
1594 health court program if the offense is a nonviolent felony, the  
1595 defendant is amenable to mental health treatment, including  
1596 taking prescribed medications, and the defendant is otherwise  
1597 qualified under s. 394.47892(4). The satisfactory completion of  
1598 the program must be a condition of the defendant's probation or  
1599 community control. As used in this subsection, the term

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1600 "nonviolent felony" means a third degree felony violation under  
1601 chapter 810 or any other felony offense that is not a forcible  
1602 felony as defined in s. 776.08. Defendants charged with  
1603 resisting an officer with violence under s. 843.01, battery on a  
1604 law enforcement officer under s. 784.07, or aggravated assault  
1605 may participate in the mental health court program if the court  
1606 so orders after the victim is given his or her right to provide  
1607 testimony or written statement to the court as provided in s.  
1608 921.143.

1609 (b) The defendant must be fully advised of the purpose of  
1610 the mental health court program and the defendant must agree to  
1611 enter the program. The original sentencing court shall  
1612 relinquish jurisdiction of the defendant's case to the  
1613 postadjudicatory mental health court program until the defendant  
1614 is no longer active in the program, the case is returned to the  
1615 sentencing court due to the defendant's termination from the  
1616 program for failure to comply with the terms thereof, or the  
1617 defendant's sentence is completed.

1618 (c) The Department of Corrections may establish designated  
1619 and trained mental health probation officers to support  
1620 individuals under supervision of the mental health court  
1621 program.

1622 Section 93. Paragraph (j) is added to subsection (2) of  
1623 section 948.06, Florida Statutes, to read:

1624 948.06 Violation of probation or community control;  
1625 revocation; modification; continuance; failure to pay

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1626 restitution or cost of supervision.—

1627 (2)

1628 (j)1. Notwithstanding s. 921.0024 and effective for  
1629 offenses committed on or after July 1, 2016, the court may order  
1630 the offender to successfully complete a postadjudicatory mental  
1631 health court program under s. 394.47892 or a military veterans  
1632 and servicemembers court program under s. 394.47891 if:

1633 a. The court finds or the offender admits that the  
1634 offender has violated his or her community control or probation;

1635 b. The underlying offense is a nonviolent felony. As used  
1636 in this subsection, the term "nonviolent felony" means a third  
1637 degree felony violation under chapter 810 or any other felony  
1638 offense that is not a forcible felony as defined in s. 776.08.  
1639 Offenders charged with resisting an officer with violence under  
1640 s. 843.01, battery on a law enforcement officer under s. 784.07,  
1641 or aggravated assault may participate in the mental health court  
1642 program if the court so orders after the victim is given his or  
1643 her right to provide testimony or written statement to the court  
1644 as provided in s. 921.143;

1645 c. The court determines that the offender is amenable to  
1646 the services of a postadjudicatory mental health court program,  
1647 including taking prescribed medications, or a military veterans  
1648 and servicemembers court program;

1649 d. The court explains the purpose of the program to the  
1650 offender and the offender agrees to participate; and

1651 e. The offender is otherwise qualified to participate in a

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1652 postadjudicatory mental health court program under s.  
1653 394.47892(4) or a military veterans and servicemembers court  
1654 program under s. 394.47891.

1655 2. After the court orders the modification of community  
1656 control or probation, the original sentencing court shall  
1657 relinquish jurisdiction of the offender's case to the  
1658 postadjudicatory mental health court program until the offender  
1659 is no longer active in the program, the case is returned to the  
1660 sentencing court due to the offender's termination from the  
1661 program for failure to comply with the terms thereof, or the  
1662 offender's sentence is completed.

1663 Section 94. Subsection (8) of section 948.08, Florida  
1664 Statutes, is renumbered as subsection (9), paragraph (a) of  
1665 subsection (7) is amended, and a new subsection (8) is added to  
1666 that section, to read:

1667 948.08 Pretrial intervention program.—

1668 (7) (a) Notwithstanding any provision of this section, a  
1669 person who is charged with a felony, other than a felony listed  
1670 in s. 948.06(8)(c), and identified as a veteran, as defined in  
1671 s. 1.01, including a veteran who is discharged or released under  
1672 a general discharge, or servicemember, as defined in s. 250.01,  
1673 who suffers from a military service-related mental illness,  
1674 traumatic brain injury, substance abuse disorder, or  
1675 psychological problem, is eligible for voluntary admission into  
1676 a pretrial veterans' treatment intervention program approved by  
1677 the chief judge of the circuit, upon motion of either party or

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1678 the court's own motion, except:

1679 1. If a defendant was previously offered admission to a  
1680 pretrial veterans' treatment intervention program at any time  
1681 before trial and the defendant rejected that offer on the  
1682 record, the court may deny the defendant's admission to such a  
1683 program.

1684 2. If a defendant previously entered a court-ordered  
1685 veterans' treatment program, the court may deny the defendant's  
1686 admission into the pretrial veterans' treatment program.

1687 (8) (a) Notwithstanding any provision of this section, a  
1688 defendant is eligible for voluntary admission into a pretrial  
1689 mental health court program established pursuant to s. 394.47892  
1690 and approved by the chief judge of the circuit for a period to  
1691 be determined by the court, based on the clinical needs of the  
1692 defendant, upon motion of either party or the court's own motion  
1693 if:

1694 1. The defendant is identified as having a mental illness;

1695 2. The defendant has not been convicted of a felony; and

1696 3. The defendant is charged with:

1697 a. A nonviolent felony that includes a third degree felony  
1698 violation of chapter 810 or any other felony offense that is not  
1699 a forcible felony as defined in s. 776.08;

1700 b. Resisting an officer with violence under s. 843.01, if  
1701 the law enforcement officer and state attorney consent to the  
1702 defendant's participation;

1703 c. Battery on a law enforcement officer under s. 784.07,

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1704 if the law enforcement officer and state attorney consent to the  
1705 defendant's participation; or

1706 d. Aggravated assault, if the victim and state attorney  
1707 consent to the defendant's participation.

1708 (b) At the end of the pretrial intervention period, the  
1709 court shall consider the recommendation of the program  
1710 administrator and the recommendation of the state attorney as to  
1711 disposition of the pending charges. The court shall determine,  
1712 by written finding, whether the defendant has successfully  
1713 completed the pretrial intervention program. If the court finds  
1714 that the defendant has not successfully completed the pretrial  
1715 intervention program, the court may order the person to continue  
1716 in education and treatment, which may include a mental health  
1717 program offered by a licensed service provider, as defined in s.  
1718 394.455, or order that the charges revert to normal channels for  
1719 prosecution. The court shall dismiss the charges upon a finding  
1720 that the defendant has successfully completed the pretrial  
1721 intervention program.

1722 Section 95. Subsections (3) and (4) of section 948.16,  
1723 Florida Statutes, are renumbered as subsections (4) and (5),  
1724 respectively, paragraph (a) of subsection (2) and present  
1725 subsection (4) of that section are amended, and a new subsection  
1726 (3) is added to that section, to read:

1727 948.16 Misdemeanor pretrial substance abuse education and  
1728 treatment intervention program; misdemeanor pretrial veterans'  
1729 treatment intervention program; misdemeanor pretrial mental

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1730 health court program.—

1731 (2) (a) A veteran, as defined in s. 1.01, including a  
1732 veteran who is discharged or released under a general discharge,  
1733 or servicemember, as defined in s. 250.01, who suffers from a  
1734 military service-related mental illness, traumatic brain injury,  
1735 substance abuse disorder, or psychological problem, and who is  
1736 charged with a misdemeanor is eligible for voluntary admission  
1737 into a misdemeanor pretrial veterans' treatment intervention  
1738 program approved by the chief judge of the circuit, for a period  
1739 based on the program's requirements and the treatment plan for  
1740 the offender, upon motion of either party or the court's own  
1741 motion. However, the court may deny the defendant admission into  
1742 a misdemeanor pretrial veterans' treatment intervention program  
1743 if the defendant has previously entered a court-ordered  
1744 veterans' treatment program.

1745 (3) A defendant who is charged with a misdemeanor and  
1746 identified as having a mental illness is eligible for voluntary  
1747 admission into a misdemeanor pretrial mental health court  
1748 program established pursuant to s. 394.47892, approved by the  
1749 chief judge of the circuit, for a period to be determined by the  
1750 court, based on the clinical needs of the defendant, upon motion  
1751 of either party or the court's own motion.

1752 ~~(5)~~(4) Any public or private entity providing a pretrial  
1753 substance abuse education and treatment program or mental health  
1754 court program under this section shall contract with the county  
1755 or appropriate governmental entity. The terms of the contract

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1756 shall include, but not be limited to, the requirements  
1757 established for private entities under s. 948.15(3). This  
1758 requirement does not apply to services provided by the  
1759 Department of Veterans' Affairs or the United States Department  
1760 of Veterans Affairs.

1761 Section 96. Section 948.21, Florida Statutes, is amended  
1762 to read:

1763 948.21 Condition of probation or community control;  
1764 military servicemembers and veterans.—

1765 (1) Effective for a probationer or community controllee  
1766 whose crime is ~~was~~ committed on or after July 1, 2012, and who  
1767 is a veteran, as defined in s. 1.01, or servicemember, as  
1768 defined in s. 250.01, who suffers from a military service-  
1769 related mental illness, traumatic brain injury, substance abuse  
1770 disorder, or psychological problem, the court may, in addition  
1771 to any other conditions imposed, impose a condition requiring  
1772 the probationer or community controllee to participate in a  
1773 treatment program capable of treating the probationer's  
1774 ~~probationer~~ or community controllee's mental illness, traumatic  
1775 brain injury, substance abuse disorder, or psychological  
1776 problem.

1777 (2) Effective for a probationer or community controllee  
1778 whose crime is committed on or after July 1, 2016, and who is a  
1779 veteran, as defined in s. 1.01, including a veteran who is  
1780 discharged or released under a general discharge, or  
1781 servicemember, as defined in s. 250.01, who suffers from a

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1782 military service-related mental illness, traumatic brain injury,  
1783 substance abuse disorder, or psychological problem, the court  
1784 may, in addition to any other conditions imposed, impose a  
1785 condition requiring the probationer or community controllee to  
1786 participate in a treatment program capable of treating the  
1787 probationer or community controllee's mental illness, traumatic  
1788 brain injury, substance abuse disorder, or psychological  
1789 problem.

1790 (3) The court shall give preference to treatment programs  
1791 for which the probationer or community controllee is eligible  
1792 through the United States Department of Veterans Affairs or the  
1793 Florida Department of Veterans' Affairs. The Department of  
1794 Corrections is not required to spend state funds to implement  
1795 this section.

1796 Section 97. Section 985.345, Florida Statutes, is amended  
1797 to read:

1798 985.345 Delinquency pretrial intervention programs  
1799 program.—

1800 (1)(a) Notwithstanding any other ~~provision of law to the~~  
1801 ~~contrary~~, a child who is charged with a felony of the second or  
1802 third degree for purchase or possession of a controlled  
1803 substance under chapter 893; tampering with evidence;  
1804 solicitation for purchase of a controlled substance; or  
1805 obtaining a prescription by fraud, and who has not previously  
1806 been adjudicated for a felony, is eligible for voluntary  
1807 admission into a delinquency pretrial substance abuse education

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1808 and treatment intervention program, including a treatment-based  
1809 drug court program established pursuant to s. 397.334, approved  
1810 by the chief judge or alternative sanctions coordinator of the  
1811 circuit to the extent that funded programs are available, for a  
1812 period based on the program requirements and the treatment  
1813 services that are suitable for the offender, upon motion of  
1814 either party or the court's own motion. However, if the state  
1815 attorney believes that the facts and circumstances of the case  
1816 suggest the child's involvement in the dealing and selling of  
1817 controlled substances, the court shall hold a preadmission  
1818 hearing. If the state attorney establishes by a preponderance of  
1819 the evidence at such hearing that the child was involved in the  
1820 dealing and selling of controlled substances, the court shall  
1821 deny the child's admission into a delinquency pretrial  
1822 intervention program.

1823 (b)(2) While enrolled in a delinquency pretrial  
1824 intervention program authorized by this subsection ~~section~~, a  
1825 child is subject to a coordinated strategy developed by a drug  
1826 court team under s. 397.334(4). The coordinated strategy may  
1827 include a protocol of sanctions that may be imposed upon the  
1828 child for noncompliance with program rules. The protocol of  
1829 sanctions may include, but is not limited to, placement in a  
1830 substance abuse treatment program offered by a licensed service  
1831 provider as defined in s. 397.311 or serving a period of secure  
1832 detention under this chapter. The coordinated strategy must be  
1833 provided in writing to the child before the child agrees to

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1834 enter the pretrial treatment-based drug court program or other  
1835 pretrial intervention program. A ~~Any~~ child whose charges are  
1836 dismissed after successful completion of the treatment-based  
1837 drug court program, if otherwise eligible, may have his or her  
1838 arrest record and plea of nolo contendere to the dismissed  
1839 charges expunged under s. 943.0585.

1840 ~~(c)(3)~~ At the end of the delinquency pretrial intervention  
1841 period, the court shall consider the recommendation of the state  
1842 attorney and the program administrator as to disposition of the  
1843 pending charges. The court shall determine, by written finding,  
1844 whether the child has successfully completed the delinquency  
1845 pretrial intervention program. Notwithstanding the coordinated  
1846 strategy developed by a drug court team pursuant to s.  
1847 397.334(4), if the court finds that the child has not  
1848 successfully completed the delinquency pretrial intervention  
1849 program, the court may order the child to continue in an  
1850 education, treatment, or drug testing ~~urine monitoring~~ program  
1851 if resources and funding are available or order that the charges  
1852 revert to normal channels for prosecution. The court may dismiss  
1853 the charges upon a finding that the child has successfully  
1854 completed the delinquency pretrial intervention program.

1855 (2)(a) Notwithstanding any other law, a child who has been  
1856 identified as having a mental illness and who has not been  
1857 previously adjudicated for a felony is eligible for voluntary  
1858 admission into a delinquency pretrial mental health court  
1859 intervention program, established pursuant to s. 394.47892,

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1860 approved by the chief judge of the circuit, for a period to be  
1861 determined by the court, based on the clinical needs of the  
1862 child, upon motion of either party or the court's own motion if  
1863 the child is charged with:

1864 1. A misdemeanor;

1865 2. A nonviolent felony, as defined in s. 948.01(8);

1866 3. Resisting an officer with violence under s. 843.01, if  
1867 the law enforcement officer and state attorney consent to the  
1868 child's participation;

1869 4. Battery on a law enforcement officer under 784.07, if  
1870 the law enforcement officer and state attorney consent to the  
1871 child's participation; or

1872 5. Aggravated assault, if the victim and state attorney  
1873 consent to the child's participation.

1874 (b) At the end of the delinquency pretrial mental health  
1875 court intervention period, the court shall consider the  
1876 recommendation of the state attorney and the program  
1877 administrator as to disposition of the pending charges. The  
1878 court shall determine, by written finding, whether the child has  
1879 successfully completed the program. If the court finds that the  
1880 child has not successfully completed the program, the court may  
1881 order the child to continue in an education, treatment, or  
1882 monitoring program if resources and funding are available or  
1883 order that the charges revert to normal channels for  
1884 prosecution. The court may dismiss the charges upon a finding  
1885 that the child has successfully completed the program.

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1886        (c) A child whose charges are dismissed after successful  
1887 completion of the delinquency pretrial mental health court  
1888 intervention program, if otherwise eligible, may have his or her  
1889 criminal history record for such charges expunged under s.  
1890 943.0585.

1891        (3)(4) Any entity, whether public or private, providing  
1892 pretrial substance abuse education, treatment intervention, drug  
1893 testing, or a mental health court ~~and a urine monitoring~~ program  
1894 under this section must contract with the county or appropriate  
1895 governmental entity, and the terms of the contract must include,  
1896 but need not be limited to, the requirements established for  
1897 private entities under s. 948.15(3). It is the intent of the  
1898 Legislature that public or private entities providing substance  
1899 abuse education and treatment intervention programs involve the  
1900 active participation of parents, schools, churches, businesses,  
1901 law enforcement agencies, and the department or its contract  
1902 providers.

1903        Section 98. For the purpose of incorporating the  
1904 amendments made by this act to sections 948.01 and 948.06,  
1905 Florida Statutes, in references thereto, paragraph (a) of  
1906 subsection (3) and subsection (5) of section 397.334, Florida  
1907 Statutes, are reenacted to read:

1908        397.334 Treatment-based drug court programs.—

1909        (3) (a) Entry into any postadjudicatory treatment-based  
1910 drug court program as a condition of probation or community  
1911 control pursuant to s. 948.01, s. 948.06, or s. 948.20 must be

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1912 based upon the sentencing court's assessment of the defendant's  
1913 criminal history, substance abuse screening outcome, amenability  
1914 to the services of the program, total sentence points, the  
1915 recommendation of the state attorney and the victim, if any, and  
1916 the defendant's agreement to enter the program.

1917 (5) Treatment-based drug court programs may include  
1918 pretrial intervention programs as provided in ss. 948.08,  
1919 948.16, and 985.345, treatment-based drug court programs  
1920 authorized in chapter 39, postadjudicatory programs as provided  
1921 in ss. 948.01, 948.06, and 948.20, and review of the status of  
1922 compliance or noncompliance of sentenced offenders through a  
1923 treatment-based drug court program. While enrolled in a  
1924 treatment-based drug court program, the participant is subject  
1925 to a coordinated strategy developed by a drug court team under  
1926 subsection (4). The coordinated strategy may include a protocol  
1927 of sanctions that may be imposed upon the participant for  
1928 noncompliance with program rules. The protocol of sanctions may  
1929 include, but is not limited to, placement in a substance abuse  
1930 treatment program offered by a licensed service provider as  
1931 defined in s. 397.311 or in a jail-based treatment program or  
1932 serving a period of secure detention under chapter 985 if a  
1933 child or a period of incarceration within the time limits  
1934 established for contempt of court if an adult. The coordinated  
1935 strategy must be provided in writing to the participant before  
1936 the participant agrees to enter into a treatment-based drug  
1937 court program.

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Amendment No.

1938 Section 99. For the purpose of incorporating the amendment  
1939 made by this act to section 948.06, Florida Statutes, in a  
1940 reference thereto, paragraph (b) of subsection (2) of section  
1941 948.012, Florida Statutes, is reenacted to read:

1942 948.012 Split sentence of probation or community control  
1943 and imprisonment.—

1944 (2) The court may also impose a split sentence whereby the  
1945 defendant is sentenced to a term of probation which may be  
1946 followed by a period of incarceration or, with respect to a  
1947 felony, into community control, as follows:

1948 (b) If the offender does not meet the terms and conditions  
1949 of probation or community control, the court may revoke, modify,  
1950 or continue the probation or community control as provided in s.  
1951 948.06. If the probation or community control is revoked, the  
1952 court may impose any sentence that it could have imposed at the  
1953 time the offender was placed on probation or community control.  
1954 The court may not provide credit for time served for any portion  
1955 of a probation or community control term toward a subsequent  
1956 term of probation or community control. However, the court may  
1957 not impose a subsequent term of probation or community control  
1958 which, when combined with any amount of time served on preceding  
1959 terms of probation or community control for offenses pending  
1960 before the court for sentencing, would exceed the maximum  
1961 penalty allowable as provided in s. 775.082. Such term of  
1962 incarceration shall be served under applicable law or county  
1963 ordinance governing service of sentences in state or county

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1964 jurisdiction. This paragraph does not prohibit any other  
 1965 sanction provided by law.

1966 Section 100. The provisions of this act shall supersede  
 1967 and control over any conflicting provisions adopted in House  
 1968 Bill 439 or Senate Bill 604, 2016 Regular Session, to the extent  
 1969 of such conflict, if either bill becomes a law.

1971 -----  
 1972 **T I T L E A M E N D M E N T**

1973 Remove lines 4477-4507 and insert:  
 1974 amending ss. 39.001, 39.507, and 39.521, F.S.;

1975 conforming provisions to changes made by the act;  
 1976 amending s. 394.4655, F.S.; defining the terms "court"  
 1977 and "criminal county court" for purposes of  
 1978 involuntary outpatient placement; conforming  
 1979 provisions to changes made by the act; amending ss.  
 1980 394.4599 and 394.463, F.S.; conforming provisions to  
 1981 changes made by the act; conforming cross-references;  
 1982 amending s. 394.455 and 394.4615, F.S.; conforming  
 1983 cross-references; amending s. 394.47891, F.S.;

1984 expanding eligibility for military veterans and  
 1985 servicemembers court programs; creating s. 394.47892,  
 1986 F.S.; authorizing the creation of treatment-based  
 1987 mental health court programs; providing for  
 1988 eligibility; providing program requirements; providing  
 1989 for an advisory committee; amending s. 790.065, F.S.;

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## Amendment No.

1990 conforming a provision to changes made by the act;  
1991 amending s. 910.035, F.S.; revising the definition of  
1992 the term "problem-solving court"; creating s. 916.185,  
1993 F.S.; creating the Forensic Hospital Diversion Pilot  
1994 Program; providing legislative findings and intent;  
1995 providing definitions; authorizing the Department of  
1996 Children and Families to implement a Forensic Hospital  
1997 Diversion Pilot Program in specified judicial  
1998 circuits; authorizing the department to request  
1999 specified budget amendments; providing for eligibility  
2000 for the program; providing legislative intent  
2001 concerning training; authorizing rulemaking; amending  
2002 s. 948.001, F.S.; defining the term "mental health  
2003 probation"; amending ss. 948.01 and 948.06, F.S.;  
2004 authorizing courts to order certain offenders on  
2005 probation or community control to postadjudicatory  
2006 mental health court programs; amending s. 948.08,  
2007 F.S.; expanding eligibility requirements for certain  
2008 pretrial intervention programs; providing for  
2009 voluntary admission into a pretrial mental health  
2010 court program; amending s. 948.16, F.S.; expanding  
2011 eligibility of veterans for a misdemeanor pretrial  
2012 veterans' treatment intervention program; providing  
2013 eligibility of misdemeanor defendants for a  
2014 misdemeanor pretrial mental health court program;  
2015 amending s. 948.21, F.S.; expanding veterans'

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2016 eligibility for participating in treatment programs  
2017 while on court-ordered probation or community control;  
2018 amending s. 985.345, F.S.; authorizing delinquency  
2019 pretrial mental health court intervention programs for  
2020 certain juvenile offenders; providing for disposition  
2021 of pending charges after completion of the program;  
2022 authorizing expunction of specified criminal history  
2023 records after successful completion of the program;  
2024 reenacting s. 397.334(3)(a) and (5), F.S., relating to  
2025 treatment-based drug court programs, to incorporate  
2026 the amendments made by the act to ss. 948.01 and  
2027 948.06, F.S., in references thereto; reenacting s.  
2028 948.012(2)(b), F.S., relating to split sentence  
2029 probation or community control and imprisonment, to  
2030 incorporate the amendment made by the act to s.  
2031 948.06, F.S., in a reference thereto; providing for  
2032 provisions of the act to supersede and control over  
2033 any conflicting provisions of specified bills;  
2034 providing an

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