1	A bill to be entitled
2	An act relating to mental health and substance abuse;
3	amending s. 394.455, F.S.; conforming a cross-
4	reference; amending s. 394.459, F.S.; revising review
5	requirements for specified restrictions relating to a
6	patient's right to communicate or to receive visitors;
7	requiring that a facility provide certain information,
8	in writing, to patients with a serious mental illness,
9	upon discharge from the facility; amending s. 394.461,
10	F.S.; authorizing the state to establish that a
11	transfer evaluation was performed and the evaluation
12	document properly executed by providing the court with
13	a copy of the evaluation before the close of the
14	state's case in chief; prohibiting the court from
15	considering substantive information in the transfer
16	evaluation unless the evaluator or current treating
17	provider testifies at the hearing; requiring a
18	facility to inform the Department of Children and
19	Families regarding certain persons examined or
20	committed at the facility within a specified
21	timeframe; amending s. 394.462, F.S.; conforming
22	cross-references; amending s. 394.4625, F.S.; revising
23	provisions relating to the voluntary admission of
24	minors to a facility for examination and treatment;
25	requiring that a minor's assent to voluntary care be
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26 verified; amending s. 394.463, F.S.; requiring law 27 enforcement officers transporting individuals for 28 involuntary treatment to take certain actions; 29 revising requirements for reports relating to involuntary treatment; revising approval requirements 30 31 for release of a patient by a receiving facility; 32 specifying when the examination period begins for a 33 patient arriving at a receiving facility; amending s. 34 394.467, F.S.; revising requirements for continuances of hearings; revising the conditions under which a 35 36 court may waive the requirement for a patient to be 37 present at an involuntary inpatient placement hearing; 38 authorizing the court to permit all witnesses to 39 attend and testify remotely at the hearing through certain means under certain circumstances; requiring 40 41 facilities to make certain clinical records available 42 to a state attorney and the respondent's attorney 43 within a specified timeframe; specifying that such 44 records remain confidential and may not be used for certain purposes; revising when the court may appoint 45 46 a magistrate; requiring the court to allow certain 47 testimony from certain individuals; revising the 48 amount of time a court may require a patient to 49 receive services; requiring facilities to discharge patients after the patient no longer meets the 50

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51	criteria for involuntary treatment; prohibiting courts
52	from ordering that individuals with developmental
53	disabilities be involuntarily placed in a state
54	treatment facility; making conforming changes;
55	amending ss. 394.495 and 394.496, F.S.; conforming
56	provisions to changes made by the act; amending s.
57	394.499, F.S.; making a technical change; conforming a
58	provision to changes made by the act; amending s.
59	394.9086; revising meeting requirements of the
60	Commission on Mental Health and Substance Abuse;
61	authorizing reimbursement for per diem and travel
62	expenses for commission members; authorizing the
63	commission to access certain records; extending the
64	date by which the commission must submit a certain
65	interim report to the Governor and Legislature;
66	amending s. 397.305, F.S.; revising the purpose of ch.
67	397, F.S.; amending s. 397.311, F.S.; revising
68	definitions; creating s. 397.341, F.S.; requiring law
69	enforcement officers transporting individuals for
70	treatment to take certain actions; amending s.
71	397.501, F.S.; requiring that a facility provide
72	certain information, in writing, to individuals with
73	substance use disorders, upon discharge from the
74	facility; amending s. 397.675, F.S.; including co-
75	occurring substance use disorders as a basis for
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76 applying criteria for involuntary admissions; amending 77 s. 397.6751, F.S.; revising the responsibilities of a 78 service provider; amending s. 397.681, F.S.; revising 79 where involuntary treatment petitions for substance abuse impaired persons may be filed; revising what 80 part of such proceedings a general or special 81 82 magistrate may preside over; conforming provisions to 83 changes made by the act; repealing s. 397.6811, F.S., 84 relating to involuntary assessment and stabilization; repealing s. 397.6814, F.S., relating to petitions for 85 86 involuntary assessment and stabilization; repealing s. 397.6815, F.S., relating to involuntary assessment and 87 88 stabilization procedures; repealing s. 397.6818, F.S., 89 relating to court determinations for petitions for 90 involuntary assessment and stabilization; repealing s. 91 397.6819, F.S., relating to the responsibilities of licensed service providers with regard to involuntary 92 93 assessment and stabilization; repealing s. 397.6821, 94 F.S., relating to extensions of time for completion of 95 involuntary assessment and stabilization; repealing s. 96 397.6822, F.S., relating to the disposition of 97 individuals after involuntary assessment; amending s. 98 397.693, F.S.; revising the circumstances under which 99 a person is eligible for court-ordered involuntary treatment; amending s. 397.695, F.S.; authorizing the 100

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101 court or clerk of the court to waive or prohibit any 102 service of process fees for an indigent petitioner; 103 amending s. 397.6951, F.S.; revising the requirements 104 for the contents of a petition for involuntary 105 treatment services; authorizing a petitioner to 106 include with the petition a certificate or report of a 107 qualified professional; requiring the certificate or 108 report to contain certain information; requiring that 109 certain additional information be included if an emergency exists; amending s. 397.6955, F.S.; revising 110 111 when a hearing must be held on the petition; requiring 112 law enforcement agencies to effect service for initial 113 treatment hearings unless certain requirements are 114 met; providing requirements for when a petitioner 115 asserts that emergency circumstances exist or the 116 court determines that an emergency exists; conforming 117 provisions to changes made by the act; amending s. 118 397.6957, F.S.; expanding the exemption from the 119 requirement that a respondent be present at a hearing 120 on a petition for involuntary treatment services; authorizing the court to order drug tests and permit 121 122 all witnesses to remotely attend and testify at the 123 hearing through certain means; deleting a provision 124 requiring the court to appoint a guardian advocate 125 under certain circumstances; prohibiting a respondent

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126 from being involuntarily ordered into treatment unless 127 certain requirements are met; providing requirements 128 relating to involuntary assessment and stabilization 129 orders; providing requirements relating to involuntary 130 treatment hearings; requiring that the assessment of a 131 respondent occur before a specified time unless 132 certain requirements are met; requiring the service 133 provider to discharge the respondent after a specified 134 time unless certain requirements are met; requiring a 135 qualified professional to provide copies of his or her 136 report to the court and all relevant parties and 137 counsel; providing requirements for the report; 138 authorizing a court to order certain persons to take a 139 respondent into custody and transport him or her to or 140 from certain service providers and the court; 141 authorizing the court to initiate involuntary 142 proceedings under certain circumstances; requiring 143 that, if a treatment order is issued, it must include 144 certain findings; amending s. 397.697, F.S.; requiring 145 that an individual meet certain requirements to 146 qualify for involuntary outpatient treatment; 147 specifying that a service provider's authority is 148 separate and distinct from the court's jurisdiction; 149 requiring the department to receive and maintain copies of certain documents and prepare annual reports 150

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151 obtained from the documents; requiring the department 152 to post copies of the reports on its website beginning 153 on a specified date; amending s. 397.6971, F.S.; 154 revising when an individual receiving involuntary 155 treatment services may be determined eligible for discharge; conforming provisions to changes made by 156 157 the act; amending s. 397.6975, F.S.; authorizing 158 certain entities to file a petition for renewal of 159 involuntary treatment services; revising the timeframe during which the court is required to schedule a 160 161 hearing; conforming provisions to changes made by the act; amending s. 397.6977, F.S.; conforming provisions 162 163 to changes made by the act; repealing s. 397.6978, 164 F.S., relating to the appointment of guardian 165 advocates; amending s. 394.4655, F.S.; conforming a 166 cross-reference; providing an appropriation; providing 167 an effective date. 168 169 Be It Enacted by the Legislature of the State of Florida: 170 171 Section 1. Subsection (23) of section 394.455, Florida 172 Statutes, is amended to read: 173 394.455 Definitions.-As used in this part, the term: 174 "Involuntary examination" means an examination (23)performed under s. 394.463, s. 397.6772, s. 397.679, s. 175

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176 397.6798, or s. 397.6957 <del>s. 397.6811</del> to determine whether a 177 person gualifies for involuntary services. 178 Section 2. Paragraph (c) of subsection (5) and subsection (11) of section 394.459, Florida Statutes, are amended to read: 179 180 394.459 Rights of patients.-COMMUNICATION, ABUSE REPORTING, AND VISITS.-181 (5) 182 (C) Each facility must permit immediate access to any 183 patient, subject to the patient's right to deny or withdraw 184 consent at any time, by the patient's family members, quardian, 185 quardian advocate, representative, Florida statewide or local 186 advocacy council, or attorney, unless such access would be detrimental to the patient. If a patient's right to communicate 187 or to receive visitors is restricted by the facility, written 188 189 notice of such restriction and the reasons for the restriction 190 shall be served on the patient, the patient's attorney, and the 191 patient's quardian, quardian advocate, or representative; and 192 such restriction shall be recorded on the patient's clinical 193 record with the reasons therefor. The restriction of a patient's 194 right to communicate or to receive visitors shall be reviewed at 195 least every 72 hours, or no later than the next working day if such period ends on a weekend or holiday 7 days. The right to 196 197 communicate or receive visitors shall not be restricted as a 198 means of punishment. Nothing in this paragraph shall be 199 construed to limit the provisions of paragraph (d). 200 (11) RIGHT TO PARTICIPATE IN TREATMENT AND DISCHARGE

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201 PLANNING.-

202 (a) The patient shall have the opportunity to participate 203 in treatment and discharge planning and shall be notified in 204 writing of his or her right, upon discharge from the facility, 205 to seek treatment from the professional or agency of the 206 patient's choice.

207 (b) Upon discharge, the facility must provide, in writing, 208 information to a patient with a serious mental illness, at a 209 minimum, regarding services available in the patient's 210 geographic area which would assist in the patient's recovery.

211 Section 3. Paragraphs (c) and (d) of subsection (4) of 212 section 394.461, Florida Statutes, are redesignated as 213 paragraphs (d) and (e), respectively, subsection (2) is amended, 214 and a new paragraph (c) is added to subsection (4) of that 215 section, to read:

216 394.461 Designation of receiving and treatment facilities 217 and receiving systems.-The department is authorized to designate 218 and monitor receiving facilities, treatment facilities, and 219 receiving systems and may suspend or withdraw such designation 220 for failure to comply with this part and rules adopted under 221 this part. Unless designated by the department, facilities are 222 not permitted to hold or treat involuntary patients under this 223 part.

(2) TREATMENT FACILITY.—The department may designate any
 state-owned, state-operated, or state-supported facility as a

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226 state treatment facility. A civil patient may shall not be 227 admitted to a state treatment facility without previously 228 undergoing a transfer evaluation. Before the close of the 229 state's case in chief in a <del>court</del> hearing for involuntary 230 placement in a state treatment facility, the state may establish 231 that the transfer evaluation was performed and the document 232 properly executed by providing the court with a copy of the 233 transfer evaluation. The court may not court shall receive and 234 consider the substantive information documented in the transfer 235 evaluation unless the evaluator or current treating provider 236 testifies at the hearing. Any other facility, including a 237 private facility or a federal facility, may be designated as a 238 treatment facility by the department, provided that such 239 designation is agreed to by the appropriate governing body or 240 authority of the facility.

241

(4) REPORTING REQUIREMENTS.-

(c) The facility must inform the department of any person
 who has been examined or committed three or more times at the
 facility pursuant to this chapter within a 12-month period.

245 Section 4. Section 394.462, Florida Statutes, is amended 246 to read:

247 394.462 Transportation.—A transportation plan shall be 248 developed and implemented by each county in collaboration with 249 the managing entity in accordance with this section. A county 250 may enter into a memorandum of understanding with the governing

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2.51 boards of nearby counties to establish a shared transportation 252 plan. When multiple counties enter into a memorandum of 253 understanding for this purpose, the counties shall notify the 254 managing entity and provide it with a copy of the agreement. The 255 transportation plan shall describe methods of transport to a 256 facility within the designated receiving system for individuals 257 subject to involuntary examination under s. 394.463 or 258 involuntary admission under s. 397.6772, s. 397.679, s. 259 397.6798, or s. 397.6957 <del>s. 397.6811,</del> and may identify 260 responsibility for other transportation to a participating 261 facility when necessary and agreed to by the facility. The plan 262 may rely on emergency medical transport services or private 263 transport companies, as appropriate. The plan shall comply with 264 the transportation provisions of this section and ss. 397.6772, 265 397.6795, <del>397.6822,</del> and 397.697.

266

(1) TRANSPORTATION TO A RECEIVING FACILITY.-

(a) Each county shall designate a single law enforcement
agency within the county, or portions thereof, to take a person
into custody upon the entry of an ex parte order or the
execution of a certificate for involuntary examination by an
authorized professional and to transport that person to the
appropriate facility within the designated receiving system
pursuant to a transportation plan.

(b)1. The designated law enforcement agency may decline totransport the person to a receiving facility only if:

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276	a. The jurisdiction designated by the county has										
277	contracted on an annual basis with an emergency medical										
278	transport service or private transport company for										
279	transportation of persons to receiving facilities pursuant to										
280	this section at the sole cost of the county; and										
281	b. The law enforcement agency and the emergency medical										
282	transport service or private transport company agree that the										
283	continued presence of law enforcement personnel is not necessary										
284	for the safety of the person or others.										
285	2. The entity providing transportation may seek										
286	reimbursement for transportation expenses. The party responsible										
287	for payment for such transportation is the person receiving the										
288	transportation. The county shall seek reimbursement from the										
289	following sources in the following order:										
290	a. From a private or public third-party payor, if the										
291	person receiving the transportation has applicable coverage.										
292	b. From the person receiving the transportation.										
293	c. From a financial settlement for medical care,										
294	treatment, hospitalization, or transportation payable or										
295	accruing to the injured party.										
296	(c) A company that transports a patient pursuant to this										
297	subsection is considered an independent contractor and is solely										
298	liable for the safe and dignified transport of the patient. Such										
299	company must be insured and provide no less than \$100,000 in										
300	liability insurance with respect to the transport of patients.										

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(d) Any company that contracts with a governing board of a county to transport patients shall comply with the applicable rules of the department to ensure the safety and dignity of patients.

(e) When a law enforcement officer takes custody of a person pursuant to this part, the officer may request assistance from emergency medical personnel if such assistance is needed for the safety of the officer or the person in custody.

309 (f) When a member of a mental health overlay program or a mobile crisis response service is a professional authorized to 310 311 initiate an involuntary examination pursuant to s. 394.463 or s. 312 397.675 and that professional evaluates a person and determines that transportation to a receiving facility is needed, the 313 314 service, at its discretion, may transport the person to the 315 facility or may call on the law enforcement agency or other 316 transportation arrangement best suited to the needs of the 317 patient.

When any law enforcement officer has custody of a 318 (q) 319 person based on either noncriminal or minor criminal behavior 320 that meets the statutory guidelines for involuntary examination pursuant to s. 394.463, the law enforcement officer shall 321 322 transport the person to the appropriate facility within the 323 designated receiving system pursuant to a transportation plan. 324 Persons who meet the statutory guidelines for involuntary 325 admission pursuant to s. 397.675 may also be transported by law

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326 enforcement officers to the extent resources are available and 327 as otherwise provided by law. Such persons shall be transported 328 to an appropriate facility within the designated receiving 329 system pursuant to a transportation plan.

330 When any law enforcement officer has arrested a person (h) 331 for a felony and it appears that the person meets the statutory 332 guidelines for involuntary examination or placement under this 333 part, such person must first be processed in the same manner as 334 any other criminal suspect. The law enforcement agency shall 335 thereafter immediately notify the appropriate facility within 336 the designated receiving system pursuant to a transportation 337 plan. The receiving facility shall be responsible for promptly arranging for the examination and treatment of the person. A 338 339 receiving facility is not required to admit a person charged 340 with a crime for whom the facility determines and documents that 341 it is unable to provide adequate security, but shall provide 342 examination and treatment to the person where he or she is held.

(i) If the appropriate law enforcement officer believes that a person has an emergency medical condition as defined in s. 395.002, the person may be first transported to a hospital for emergency medical treatment, regardless of whether the hospital is a designated receiving facility.

(j) The costs of transportation, evaluation,
hospitalization, and treatment incurred under this subsection by
persons who have been arrested for violations of any state law

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351 or county or municipal ordinance may be recovered as provided in 352 s. 901.35.

(k) The appropriate facility within the designated receiving system pursuant to a transportation plan must accept persons brought by law enforcement officers, or an emergency medical transport service or a private transport company authorized by the county, for involuntary examination pursuant to s. 394.463.

(1) The appropriate facility within the designated receiving system pursuant to a transportation plan must provide persons brought by law enforcement officers, or an emergency medical transport service or a private transport company authorized by the county, pursuant to s. 397.675, a basic screening or triage sufficient to refer the person to the appropriate services.

(m) Each law enforcement agency designated pursuant to paragraph (a) shall establish a policy that reflects a single set of protocols for the safe and secure transportation and transfer of custody of the person. Each law enforcement agency shall provide a copy of the protocols to the managing entity.

(n) When a jurisdiction has entered into a contract with an emergency medical transport service or a private transport company for transportation of persons to facilities within the designated receiving system, such service or company shall be given preference for transportation of persons from nursing

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homes, assisted living facilities, adult day care centers, or adult family-care homes, unless the behavior of the person being transported is such that transportation by a law enforcement officer is necessary.

(o) This section may not be construed to limit emergency examination and treatment of incapacitated persons provided in accordance with s. 401.445.

383

(2) TRANSPORTATION TO A TREATMENT FACILITY.-

(a) If neither the patient nor any person legally obligated or responsible for the patient is able to pay for the expense of transporting a voluntary or involuntary patient to a treatment facility, the transportation plan established by the governing board of the county or counties must specify how the hospitalized patient will be transported to, from, and between facilities in a safe and dignified manner.

(b) A company that transports a patient pursuant to this subsection is considered an independent contractor and is solely liable for the safe and dignified transportation of the patient. Such company must be insured and provide no less than \$100,000 in liability insurance with respect to the transport of patients.

(c) A company that contracts with one or more counties to transport patients in accordance with this section shall comply with the applicable rules of the department to ensure the safety and dignity of patients.

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(d) County or municipal law enforcement and correctional personnel and equipment may not be used to transport patients adjudicated incapacitated or found by the court to meet the criteria for involuntary placement pursuant to s. 394.467, except in small rural counties where there are no cost-efficient alternatives.

407 (3) TRANSFER OF CUSTODY.-Custody of a person who is
408 transported pursuant to this part, along with related
409 documentation, shall be relinquished to a responsible individual
410 at the appropriate receiving or treatment facility.

411 Section 5. Paragraph (a) of subsection (1) and subsection
412 (4) of section 394.4625, Florida Statutes, are amended to read:
413 394.4625 Voluntary admissions.-

414

(1) AUTHORITY TO RECEIVE PATIENTS.-

415 A facility may receive for observation, diagnosis, or (a) 416 treatment any person 18 years of age or older who applies making 417 application by express and informed consent for admission or any 418 person age 17 or under whose parent or legal guardian applies 419 for admission whom such application is made by his or her 420 guardian. If found to show evidence of mental illness, to be 421 competent to provide express and informed consent, and to be 422 suitable for treatment, such person 18 years of age or older may 423 be admitted to the facility. A person age 17 or under may be 424 admitted only after a clinical review hearing to verify the 425 voluntariness of the minor's assent consent.

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426 TRANSFER TO VOLUNTARY STATUS. - An involuntary patient (4)427 who applies to be transferred to voluntary status shall be 428 transferred to voluntary status immediately, unless the patient 429 has been charged with a crime, or has been involuntarily placed 430 for treatment by a court pursuant to s. 394.467 and continues to meet the criteria for involuntary placement. When transfer to 431 432 voluntary status occurs, notice shall be given as provided in s. 433 394.4599, and if the patient is a minor, the minor's assent to 434 voluntary care must be verified as provided in paragraph (1) (a). 435 Section 6. Paragraphs (a), (e), (f), and (g) of subsection 436 (2) of section 394.463, Florida Statutes, are amended to read: 437 394.463 Involuntary examination.-INVOLUNTARY EXAMINATION.-438 (2) 439 (a) An involuntary examination may be initiated by any one 440 of the following means: 441 1. A circuit or county court may enter an ex parte order stating that a person appears to meet the criteria for 442 443 involuntary examination and specifying the findings on which 444 that conclusion is based. The ex parte order for involuntary 445 examination must be based on written or oral sworn testimony 446 that includes specific facts that support the findings. If other 447 less restrictive means are not available, such as voluntary 448 appearance for outpatient evaluation, a law enforcement officer, 449 or other designated agent of the court, shall take the person into custody and deliver him or her to an appropriate, or the 450

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451 nearest, facility within the designated receiving system 452 pursuant to s. 394.462 for involuntary examination. The order of 453 the court shall be made a part of the patient's clinical record. 454 A fee may not be charged for the filing of an order under this 455 subsection. A facility accepting the patient based on this order 456 must send a copy of the order to the department within 5 working 457 days. The order may be submitted electronically through existing 458 data systems, if available. The order shall be valid only until 459 the person is delivered to the facility or for the period 460 specified in the order itself, whichever comes first. If a time 461 limit is not specified in the order, the order is valid for 7 462 days after the date that the order was signed.

2. A law enforcement officer may shall take a person who 463 464 appears to meet the criteria for involuntary examination into 465 custody and deliver the person or have him or her delivered to 466 an appropriate, or the nearest, facility within the designated 467 receiving system pursuant to s. 394.462 for examination. A law 468 enforcement officer transporting a person pursuant to this 469 subparagraph shall restrain the person in the least restrictive 470 manner available and appropriate under the circumstances. The 471 officer shall execute a written report detailing the 472 circumstances under which the person was taken into custody, 473 which must be made a part of the patient's clinical record. Any 474 facility accepting the patient based on this report must send a copy of the report to the department within 5 working days. 475

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476 A physician, a physician assistant, a clinical 3. 477 psychologist, a psychiatric nurse, an advanced practice 478 registered nurse registered under s. 464.0123, a mental health 479 counselor, a marriage and family therapist, or a clinical social 480 worker may execute a certificate stating that he or she has 481 examined a person within the preceding 48 hours and finds that 482 the person appears to meet the criteria for involuntary 483 examination and stating the observations upon which that 484 conclusion is based. If other less restrictive means, such as 485 voluntary appearance for outpatient evaluation, are not 486 available, a law enforcement officer shall take into custody the 487 person named in the certificate and deliver him or her to the 488 appropriate, or nearest, facility within the designated 489 receiving system pursuant to s. 394.462 for involuntary 490 examination. The law enforcement officer shall execute a written 491 report detailing the circumstances under which the person was 492 taken into custody. The report and certificate shall be made a 493 part of the patient's clinical record. Any facility accepting 494 the patient based on this certificate must send a copy of the 495 certificate to the department within 5 working days. The 496 document may be submitted electronically through existing data 497 systems, if applicable.

498

499 When sending the order, report, or certificate to the 500 department, a facility shall, at a minimum, provide information

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501 about which action was taken regarding the patient under 502 paragraph (g), which information shall also be made a part of 503 the patient's clinical record.

504 (e) The department shall receive and maintain the copies 505 of ex parte orders, involuntary outpatient services orders 506 issued pursuant to s. 394.4655, involuntary inpatient placement 507 orders issued pursuant to s. 394.467, professional certificates, and law enforcement officers' reports. These documents shall be 508 509 considered part of the clinical record, governed by the 510 provisions of s. 394.4615. These documents shall be used to 511 prepare, at least annually, annual reports analyzing the data 512 obtained from these documents, without information identifying 513 patients, and the department shall post provide copies of the 514 reports on its website to the department, the President of the 515 Senate, the Speaker of the House of Representatives, and the 516 minority leaders of the Senate and the House of Representatives.

517 A patient shall be examined by a physician or a (f) 518 clinical psychologist, or by a psychiatric nurse performing 519 within the framework of an established protocol with a 520 psychiatrist at a facility without unnecessary delay to 521 determine if the criteria for involuntary services are met. 522 Emergency treatment may be provided upon the order of a 523 physician if the physician determines that such treatment is 524 necessary for the safety of the patient or others. The patient may not be released by the receiving facility or its contractor 525

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526 without the documented approval of a psychiatrist or a clinical 527 psychologist or, if the receiving facility is owned or operated 528 by a hospital, or health system, or a nationally accredited community mental health center, the release may also be approved 529 530 by a psychiatric nurse performing within the framework of an 531 established protocol with a psychiatrist, or an attending 532 emergency department physician with experience in the diagnosis and treatment of mental illness after completion of an 533 534 involuntary examination pursuant to this subsection. A 535 psychiatric nurse may not approve the release of a patient if 536 the involuntary examination was initiated by a psychiatrist 537 unless the release is approved by the initiating psychiatrist.

538 The examination period must be for up to 72 hours and (q) 539 begins when a patient arrives at the receiving facility. For a 540 minor, the examination shall be initiated within 12 hours after 541 the patient's arrival at the facility. Within the examination 542 period or, if the examination period ends on a weekend or 543 holiday, no later than the next working day thereafter, one of 544 the following actions must be taken, based on the individual 545 needs of the patient:

546 1. The patient shall be released, unless he or she is 547 charged with a crime, in which case the patient shall be 548 returned to the custody of a law enforcement officer;

549 2. The patient shall be released, subject to subparagraph550 1., for voluntary outpatient treatment;

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551 The patient, unless he or she is charged with a crime, 3. 552 shall be asked to give express and informed consent to placement 553 as a voluntary patient and, if such consent is given, the 554 patient shall be admitted as a voluntary patient; or 555 A petition for involuntary services shall be filed in 4. 556 the circuit court if inpatient treatment is deemed necessary or 557 with the criminal county court, as defined in s. 394.4655(1), as 558 applicable. When inpatient treatment is deemed necessary, the 559 least restrictive treatment consistent with the optimum 560 improvement of the patient's condition shall be made available. 561 When a petition is to be filed for involuntary outpatient 562 placement, it shall be filed by one of the petitioners specified 563 in s. 394.4655(4)(a). A petition for involuntary inpatient 564 placement shall be filed by the facility administrator. 565 Section 7. Subsection (5), paragraphs (a), (b), and (c) of 566 subsection (6), and paragraph (d) of subsection (7) of section 567 394.467, Florida Statutes, are amended to read: 568 394.467 Involuntary inpatient placement.-569 (5) CONTINUANCE OF HEARING. - The patient and the state are 570 independently entitled is entitled, with the concurrence of the 571 patient's counsel, to at least one continuance of the hearing. 572 The patient's continuance may be for a period of for up to 4 573 weeks and requires the concurrence of his or her counsel. The 574 state's continuance may be for a period of up to 5 court working 575 days and requires a showing of good cause and due diligence by

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576 the state before requesting the continuance. The state's failure 577 to timely review any readily available document or failure to 578 attempt to contact a known witness does not warrant a 579 continuance. 580 (6) HEARING ON INVOLUNTARY INPATIENT PLACEMENT. -581 (a)1. The court shall hold the hearing on involuntary 582 inpatient placement within 5 court working days, unless a 583 continuance is granted. 584 2. Except for good cause documented in the court file, the 585 hearing must be held in the county or the facility, as 586 appropriate, where the patient is located, must be as convenient 587 to the patient as is consistent with orderly procedure, and 588 shall be conducted in physical settings not likely to be 589 injurious to the patient's condition. If the court finds that 590 the patient's attendance at the hearing is not consistent with 591 the best interests of, or is likely to be injurious to, the 592 patient, or the patient knowingly, intelligently, and 593 voluntarily waives his or her right to be present, and the 594 patient's counsel does not object, the court may waive the 595 presence of the patient from all or any portion of the hearing. 596 Upon a showing of good cause, including, but not limited to, 597 specific symptoms of the respondent's condition, and if all 598 parties consent, the court may permit all witnesses, including, 599 but not limited to, any medical professionals or personnel who are or have been involved with the patient's treatment, to 600

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601	remotely attend and testify at the hearing under oath by audio-										
602	video teleconference. Any witness intending to remotely attend										
603	and testify at the hearing must provide the parties with all										
604	relevant documents by the close of business on the day before										
605	the hearing. The state attorney for the circuit in which the										
606	patient is located shall represent the state, rather than the										
607	petitioning facility administrator, as the real party in										
608	interest in the proceeding. The facility shall make the										
609	respondent's clinical records available to the state attorney										
610	and the respondent's attorney within 24 hours of the involuntary										
611	placement petition's filing so that the state can evaluate and										
612	prepare its case before the hearing. However, such records shall										
613	remain confidential, and the state attorney may not use any										
614	record obtained under this part for criminal investigation or										
615	prosecution purposes, or for any purpose other than the										
616	patient's civil commitment under this chapter.										
617	3. The court may appoint a magistrate to preside at the										
618	hearing on the petition and any ancillary proceedings thereto.										
619	One of the professionals who executed the petition for										
620	involuntary inpatient placement certificate shall be a witness.										
621	The court shall allow testimony deemed relevant and admissible										
622	pursuant to the Florida Rules of Evidence from listed										
623	individuals regarding the person's prior history and how that										
624	history relates to the person's current condition. The patient										
625	and the patient's guardian or representative shall be informed										
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626 by the court of the right to an independent expert examination. 627 If the patient cannot afford such an examination, the court 628 shall ensure that one is provided, as otherwise provided for by law. The independent expert's report is confidential and not 629 630 discoverable, unless the expert is to be called as a witness for 631 the patient at the hearing. The testimony in the hearing must be 632 given under oath, and the proceedings must be recorded. The 633 patient may refuse to testify at the hearing.

634 (b) If the court concludes that the patient meets the 635 criteria for involuntary inpatient placement, it may order that 636 the patient be transferred to a treatment facility or, if the 637 patient is at a treatment facility, that the patient be retained 638 there or be treated at any other appropriate facility, or that 639 the patient receive services, on an involuntary basis, for up to 640 90 days. However, any order for involuntary mental health 641 services in a treatment facility may be for up to 6 months. The 642 order shall specify the nature and extent of the patient's 643 mental illness, and, unless the patient has transferred to a 644 voluntary status, the facility must discharge the patient at any 645 time he or she no longer meets the criteria for involuntary 646 inpatient treatment. The court may not order an individual with 647 a developmental disability as defined in s. 393.063, traumatic 648 brain injury, or dementia who lacks a co-occurring mental 649 illness to be involuntarily placed in a state treatment facility. The facility shall discharge a patient any time the 650

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651 patient no longer meets the criteria for involuntary inpatient
652 placement, unless the patient has transferred to voluntary
653 status.

654 (C) If at any time before the conclusion of the 655 involuntary placement hearing on involuntary inpatient placement 656 it appears to the court that the person does not meet the 657 criteria of for involuntary inpatient placement under this 658 section, but instead meets the criteria for involuntary 659 outpatient services, the court may order the person evaluated 660 for involuntary outpatient services pursuant to s. 394.4655. The petition and hearing procedures set forth in s. 394.4655 shall 661 662 apply. If the person instead meets the criteria for involuntary 663 assessment, protective custody, or involuntary admission or 664 treatment pursuant to s. 397.675, then the court may order the 665 person to be admitted for involuntary assessment for a period of 666 5 days pursuant to s. 397.6957 s. 397.6811. Thereafter, all 667 proceedings are governed by chapter 397.

668 (7) PROCEDURE FOR CONTINUED INVOLUNTARY INPATIENT669 PLACEMENT.-

(d) If at a hearing it is shown that the patient continues to meet the criteria for involuntary inpatient placement, the administrative law judge shall sign the order for continued involuntary inpatient placement for up to <del>90 days. However, any</del> <del>order for involuntary mental health services in a treatment</del> <del>facility may be for up to</del> 6 months. The same procedure shall be

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676	repeated before the expiration of each additional period the											
677												
678												
679	The procedure required in this subsection must be followed											
680	before the expiration of each additional period the patient is											
681												
682	Section 8. Subsection (3) of section 394.495, Florida											
683	Statutes, is amended to read:											
684	394.495 Child and adolescent mental health system of care;											
685	programs and services											
686	(3) Assessments must be performed by:											
687	(a) A <u>clinical psychologist</u> , clinical social worker,											
688	physician, psychiatric nurse, or psychiatrist, as those terms											
689	are defined in s. 394.455 professional as defined in s.											
690	<del>394.455(5), (7), (33), (36), or (37)</del> ;											
691	(b) A professional licensed under chapter 491; or											
692	(c) A person who is under the direct supervision of a											
693	clinical psychologist, clinical social worker, physician,											
694	psychiatric nurse, or psychiatrist, as those terms are defined											
695	in s. 394.455, qualified professional as defined in s.											
696	<del>394.455(5), (7), (33), (36), or (37)</del> or a professional licensed											
697	under chapter 491.											
698	Section 9. Subsection (5) of section 394.496, Florida											
699	Statutes, is amended to read:											
700	394.496 Service planning											
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701 A clinical psychologist, clinical social worker, (5) 702 physician, psychiatric nurse, or psychiatrist, as those terms 703 are defined in s. 394.455, professional as defined in s. 704 <del>394.455(5), (7), (33), (36), or (37)</del> or a professional licensed 705 under chapter 491 must be included among those persons 706 developing the services plan. 707 Section 10. Paragraph (a) of subsection (2) of section 708 394.499, Florida Statutes, is amended to read: 709 394.499 Integrated children's crisis stabilization 710 unit/juvenile addictions receiving facility services.-711 Children eligible to receive integrated children's (2)712 crisis stabilization unit/juvenile addictions receiving facility 713 services include: 714 (a) A person under 18 years of age for whom voluntary 715 application is made by his or her parent or legal guardian, if 716 such person is found to show evidence of mental illness and to 717 be suitable for treatment pursuant to s. 394.4625. A person 718 under 18 years of age may be admitted for integrated facility 719 services only after a hearing to verify that the assent consent 720 to admission is voluntary is conducted pursuant to s. 394.4625. 721 Section 11. Paragraph (c) of subsection (3) and subsection (5) of section 394.9086, Florida Statutes, are amended, and 722 723 paragraphs (d) and (e) are added to subsection (3) of that 724 section, to read: 725 394.9086 Commission on Mental Health and Substance Abuse.-

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726	(3) MEMBERSHIP; TERM LIMITS; MEETINGS											
727	(c) The commission shall convene no later than September											
728	1, 2021. The commission shall meet quarterly or upon the call of											
729	the chair. The commission <u>may</u> <del>shall</del> hold its meetings <u>in person</u>											
730	or via teleconference or other electronic means.											
731	(d) Members of the commission are entitled to receive											
732	reimbursement for per diem and travel expenses pursuant to s.											
733	<u>112.061.</u>											
734	(e) Notwithstanding any other law, the commission may											
735	request and shall be provided with access to any information or											
736	records, including exempt or confidential and exempt information											
737	or records, which are necessary for the commission to carry out											
738	its duties. Information or records obtained by the commission											
739	which are otherwise exempt or confidential and exempt shall											
740	retain such exempt or confidential and exempt status, and the											
741	commission may not disclose any such information or records.											
742	(5) REPORTSBy January 1, 2023 September 1, 2022, the											
743	commission shall submit an interim report to the President of											
744	the Senate, the Speaker of the House of Representatives, and the											
745	Governor containing its findings and recommendations on how to											
746	best provide and facilitate mental health and substance abuse											
747	services in the state. The commission shall submit its final											
748	report to the President of the Senate, the Speaker of the House											
749	of Representatives, and the Governor by September 1, 2023.											
750	Section 12. Subsection (3) of section 397.305, Florida											
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751 Statutes, is amended to read:

752 397.305 Legislative findings, intent, and purpose.-753 It is the purpose of this chapter to provide for a (3) 754 comprehensive continuum of accessible and quality substance 755 abuse prevention, intervention, clinical treatment, and recovery 756 support services in the most appropriate and least restrictive 757 environment which promotes long-term recovery while protecting 758 and respecting the rights of individuals, primarily through 759 community-based private not-for-profit providers working with 760 local governmental programs involving a wide range of agencies 761 from both the public and private sectors.

Section 13. Subsections (19) and (23) of section 397.311,Florida Statutes, are amended to read:

764 397.311 Definitions.—As used in this chapter, except part 765 VIII, the term:

(19) "Impaired" or "substance abuse impaired" means <u>having</u> a <u>substance use disorder or</u> a condition involving the use of alcoholic beverages, <u>illicit or prescription drugs</u>, or any psychoactive or mood-altering substance in such a manner as to induce mental, emotional, or physical problems <u>or</u> and cause socially dysfunctional behavior.

(23) "Involuntary <u>treatment</u> services" means an array of behavioral health services that may be ordered by the court for persons with substance abuse impairment or co-occurring substance abuse impairment and mental health disorders.

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776	Section 14. Section 397.341, Florida Statutes, is created											
777	to read:											
778	397.341 Transportation of individuals by law enforcement											
779	officersA law enforcement officer transporting an individual											
780	pursuant to this chapter shall restrain that individual in the											
781	least restrictive manner available and appropriate under the											
782	circumstances.											
783	Section 15. Subsection (11) is added to section 397.501,											
784	Florida Statutes, to read:											
785	397.501 Rights of individualsIndividuals receiving											
786	substance abuse services from any service provider are											
787	guaranteed protection of the rights specified in this section,											
788	unless otherwise expressly provided, and service providers must											
789	ensure the protection of such rights.											
790	(11) POST-DISCHARGE CONTINUUM OF CAREUpon discharge, a											
791	facility must provide, in writing, information to an individual											
792	with a substance use disorder, at a minimum, regarding services											
793	available in the individual's geographic area which would assist											
794	in the individual's recovery.											
795	Section 16. Section 397.675, Florida Statutes, is amended											
796	to read:											
797	397.675 Criteria for involuntary admissions, including											
798	protective custody, emergency admission, and other involuntary											
799	assessment, involuntary treatment, and alternative involuntary											
800	assessment for minors, for purposes of assessment and											
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801 stabilization, and for involuntary treatment.—A person meets the 802 criteria for involuntary admission if there is good faith reason 803 to believe that the person is substance abuse impaired or has a 804 <u>substance use disorder and a</u> co-occurring mental health disorder 805 and, because of such impairment or disorder:

806 (1) Has lost the power of self-control with respect to 807 substance abuse; and

808 (2)(a) Is in need of substance abuse services and, by 809 reason of substance abuse impairment, his or her judgment has 810 been so impaired that he or she is incapable of appreciating his 811 or her need for such services and of making a rational decision 812 in that regard, although mere refusal to receive such services 813 does not constitute evidence of lack of judgment with respect to 814 his or her need for such services; or

815 Without care or treatment, is likely to suffer from (b) 816 neglect or refuse to care for himself or herself; that such 817 neglect or refusal poses a real and present threat of 818 substantial harm to his or her well-being; and that it is not 819 apparent that such harm may be avoided through the help of 820 willing family members or friends or the provision of other 821 services, or there is substantial likelihood that the person has 822 inflicted, or threatened to or attempted to inflict, or, unless admitted, is likely to inflict, physical harm on himself, 823 824 herself, or another.

825

Section 17. Subsection (1) of section 397.6751, Florida

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826	Statutes, is amended to read:											
827												
828	involuntary admissions											
829	(1) It is the responsibility of the service provider to:											
830	(a) Ensure that a person who is admitted to a licensed											
831	service component meets the admission criteria specified in s.											
832	397.675;											
833	(b) Ascertain whether the medical and behavioral											
834	conditions of the person, as presented, are beyond the safe											
835												
836	(c) Provide for the admission of the person to the service											
837	component that represents the most appropriate and least											
838	restrictive available setting that is responsive to the person's											
839	treatment needs;											
840	(d) Verify that the admission of the person to the service											
841	component does not result in a census in excess of its licensed											
842	service capacity;											
843	(e) Determine whether the cost of services is within the											
844	financial means of the person or those who are financially											
845	responsible for the person's care; and											
846	(f) Take all necessary measures to ensure that each											
847	individual in treatment is provided with a safe environment, and											
848	to ensure that each individual whose medical condition or											
849	behavioral problem becomes such that he or she cannot be safely											
850	managed by the service component is discharged and referred to a											
	Page 34 of 57											

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851 more appropriate setting for care.

852 Section 18. Section 397.681, Florida Statutes, is amended 853 to read:

854 397.681 Involuntary petitions; general provisions; court 855 jurisdiction and right to counsel.-

856 JURISDICTION.-The courts have jurisdiction of (1)857 involuntary assessment and stabilization petitions and 858 involuntary treatment petitions for substance abuse impaired 859 persons, and such petitions must be filed with the clerk of the 860 court in the county where the person is located or resides. The 861 clerk of the court may not charge a fee for the filing of a 862 petition under this section. The chief judge may appoint a 863 general or special magistrate to preside over all or part of the 864 proceedings related to the petition or any ancillary matters 865 thereto. The alleged impaired person is named as the respondent.

866 (2) RIGHT TO COUNSEL.-A respondent has the right to 867 counsel at every stage of a proceeding relating to a petition 868 for his or her involuntary assessment and a petition for his or 869 her involuntary treatment for substance abuse impairment. A 870 respondent who desires counsel and is unable to afford private 871 counsel has the right to court-appointed counsel and to the benefits of s. 57.081. If the court believes that the respondent 872 873 needs the assistance of counsel, the court shall appoint such 874 counsel for the respondent without regard to the respondent's 875 wishes. If the respondent is a minor not otherwise represented

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876 in the proceeding, the court shall immediately appoint a quardian ad litem to act on the minor's behalf. 877 878 Section 19. Section 397.6811, Florida Statutes, is 879 repealed. 880 Section 20. Section 397.6814, Florida Statutes, is 881 repealed. 882 Section 21. Section 397.6815, Florida Statutes, is 883 repealed. 884 Section 22. Section 397.6818, Florida Statutes, is 885 repealed. Section 23. Section 397.6819, Florida Statutes, is 886 887 repealed. 888 Section 24. Section 397.6821, Florida Statutes, is 889 repealed. 890 Section 25. Section 397.6822, Florida Statutes, is 891 repealed. Section 26. Section 397.693, Florida Statutes, is amended 892 893 to read: 894 397.693 Involuntary treatment.-A person may be the subject 895 of a petition for court-ordered involuntary treatment pursuant 896 to this part  $\tau$  if that person: 897 (1) Reasonably appears to meet meets the criteria for 898 involuntary admission provided in s. 397.675; and: (2) (1) Has been placed under protective custody pursuant 899 900 to s. 397.677 within the previous 10 days;

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901	(3)(2) Has been subject to an emergency admission pursuant
902	to s. 397.679 within the previous 10 days; <u>or</u>
903	(4) (3) Has been assessed by a qualified professional
904	within <u>30</u> 5 days <del>;</del>
905	(4) Has been subject to involuntary assessment and
906	stabilization pursuant to s. 397.6818 within the previous 12
907	<del>days; or</del>
908	(5) Has been subject to alternative involuntary admission
909	pursuant to s. 397.6822 within the previous 12 days.
910	Section 27. Section 397.695, Florida Statutes, is amended
911	to read:
912	397.695 Involuntary <u>treatment</u> services; persons who may
913	petition
914	(1) If the respondent is an adult, a petition for
915	involuntary <u>treatment</u> services may be filed by the respondent's
916	spouse or legal guardian, any relative, a service provider, or
917	an adult who has direct personal knowledge of the respondent's
918	substance abuse impairment and his or her prior course of
919	assessment and treatment.
920	(2) If the respondent is a minor, a petition for
921	involuntary treatment may be filed by a parent, legal guardian,
922	or service provider.
923	(3) The court or the clerk of the court may waive or
924	prohibit any service of process fees if a petitioner is
925	determined to be indigent under s. 57.082.
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926 Section 28. Section 397.6951, Florida Statutes, is amended 927 to read:

928 397.6951 Contents of petition for involuntary <u>treatment</u> 929 services.-

930 (1) A petition for involuntary treatment services must 931 contain the name of the respondent; the name of the petitioner 932 or petitioners; the relationship between the respondent and the 933 petitioner; the name of the respondent's attorney, if known; the 934 findings and recommendations of the assessment performed by the 935 qualified professional; and the factual allegations presented by 936 the petitioner establishing the need for involuntary outpatient 937 services for substance abuse impairment. The factual allegations 938 must demonstrate:

939 <u>(a)(1)</u> The reason for the petitioner's belief that the 940 respondent is substance abuse impaired;

941 <u>(b)(2)</u> The reason for the petitioner's belief that because 942 of such impairment the respondent Has lost the power of self-943 control with respect to substance abuse; and

944 <u>(c)1.(3)(a)</u> The reason the petitioner believes that the 945 respondent has inflicted or is likely to inflict physical harm 946 on himself or herself or others unless the court orders the 947 involuntary services; or

948 <u>2.(b)</u> The reason the petitioner believes that the 949 respondent's refusal to voluntarily receive care is based on 950 judgment so impaired by reason of substance abuse that the

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951	respondent is incapable of appreciating his or her need for care
952	and of making a rational decision regarding that need for care.
953	(2) The petition may be accompanied by a certificate or
954	report of a qualified professional or a licensed physician who
955	examined the respondent within 30 days before the petition was
956	filed. This certificate or report must include the qualified
957	professional's or physician's findings relating to his or her
958	assessment of the patient and his or her treatment
959	recommendations. If the respondent was not assessed before the
960	filing of a treatment petition or refused to submit to an
961	evaluation, the lack of assessment or refusal must be noted in
962	the petition.
963	(3) If there is an emergency, the petition must also
964	describe the respondent's exigent circumstances and include a
965	request for an ex parte assessment and stabilization order that
966	must be executed pursuant to s. 397.6955(4).
967	Section 29. Section 397.6955, Florida Statutes, is amended
968	to read:
969	397.6955 Duties of court upon filing of petition for
970	involuntary <u>treatment</u> services
971	(1) Upon the filing of a petition for involuntary
972	treatment services for a substance abuse impaired person with
973	the clerk of the court, the court shall immediately determine
974	whether the respondent is represented by an attorney or whether
975	the appointment of counsel for the respondent is appropriate.
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976 If, based on the contents of the petition, the court appoints 977 counsel for the person, the clerk of the court shall immediately 978 notify the office of criminal conflict and civil regional 979 counsel, created pursuant to s. 27.511, of the appointment. The 980 office of criminal conflict and civil regional counsel shall 981 represent the person until the petition is dismissed, the court 982 order expires, or the person is discharged from involuntary 983 treatment services, or the office is otherwise discharged by the 984 court. An attorney that represents the person named in the 985 petition shall have access to the person, witnesses, and records relevant to the presentation of the person's case and shall 986 987 represent the interests of the person, regardless of the source 988 of payment to the attorney.

989 (2) The court shall schedule a hearing to be held on the 990 petition within <u>10 court working</u> 5 days unless a continuance is 991 granted. The court may appoint a magistrate to preside at the 992 hearing.

993 (3) A copy of the petition and notice of the hearing must 994 be provided to the respondent; the respondent's parent, 995 guardian, or legal custodian, in the case of a minor; the 996 respondent's attorney, if known; the petitioner; the 997 respondent's spouse or guardian, if applicable; and such other 998 persons as the court may direct. If the respondent is a minor, a 999 copy of the petition and notice of the hearing must be personally delivered to the respondent. The clerk court shall 1000

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1001 also issue a summons to the person whose admission is sought, 1002 and unless a circuit court's chief judge authorizes 1003 disinterested private process servers to serve parties under 1004 this chapter, a law enforcement agency must effect service for 1005 the initial treatment hearing. 1006 (4) (a) When the petitioner asserts that emergency 1007 circumstances exist, or when upon review of the petition the 1008 court determines that an emergency exists, the court may rely 1009 solely on the contents of the petition and, without the 1010 appointment of an attorney, enter an ex parte order for the 1011 respondent's involuntary assessment and stabilization which must 1012 be executed during the period when the hearing on the petition for treatment is pending. The court may further order a law 1013 1014 enforcement officer or other designated agent of the court to: 1015 Take the respondent into custody and deliver him or her 1. 1016 to either the nearest appropriate licensed service provider or a 1017 licensed service provider designated by the court to be 1018 evaluated; and 1019 2. Serve the respondent with the notice of hearing and a copy of the petition. 1020 1021 (b) The service provider must promptly inform the court 1022 and parties of the respondent's arrival and may not hold the 1023 respondent for longer than 72 hours of observation thereafter, 1024 unless: 1025 1. The service provider seeks additional time under s. Page 41 of 57

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1026 397.6957(1)(c) and the court, after a hearing, grants that 1027 motion; 1028 2. The respondent shows signs of withdrawal, or a need to 1029 be either detoxified or treated for a medical condition, which 1030 shall extend the amount of time the respondent may be held for 1031 observation until the issue is resolved; or 1032 3. The original or extended observation period ends on a weekend or holiday, in which case the provider may hold the 1033 1034 respondent until the next court working day. 1035 (c) If the ex parte order was not executed by the initial hearing date, it shall be deemed void. However, should the 1036 1037 respondent not appear at the hearing for any reason, including lack of service, and upon reviewing the petition, testimony, and 1038 1039 evidence presented, the court reasonably believes the respondent 1040 meets this chapter's commitment criteria and that a substance 1041 abuse emergency exists, the court may issue or reissue an ex 1042 parte assessment and stabilization order that is valid for 90 1043 days. If the respondent's location is known at the time of the 1044 hearing, the court: 1045 1. Shall continue the case for no more than 10 court 1046 working days; and 1047 2. May order a law enforcement officer or other designated 1048 agent of the court to: 1049 a. Take the respondent into custody and deliver him or her 1050 to be evaluated either by the nearest appropriate licensed

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1051	service provider or by a licensed service provider designated by
1052	the court; and
1053	b. If a hearing date is set, serve the respondent with
1054	notice of the rescheduled hearing and a copy of the involuntary
1055	treatment petition if the respondent has not already been
1056	served.
1057	
1058	Otherwise, the petitioner and the service provider must promptly
1059	inform the court that the respondent has been assessed so that
1060	the court may schedule a hearing as soon as practicable. The
1061	service provider must serve the respondent, before his or her
1062	discharge, with the notice of hearing and a copy of the
1063	petition. However, if the respondent has not been assessed
1064	within 90 days, the court must dismiss the case.
1065	Section 30. Section 397.6957, Florida Statutes, is amended
1066	to read:
1067	397.6957 Hearing on petition for involuntary treatment
1068	services
1069	(1) (a) The respondent must be present at a hearing on a
1070	petition for involuntary <u>treatment</u> services <u>unless he or she</u>
1071	knowingly, intelligently, and voluntarily waives his or her
1072	right to be present or, upon receiving proof of service and
1073	evaluating the circumstances of the case, the court finds that
1074	his or her presence is inconsistent with his or her best
1075	interests or is likely to be injurious to himself or herself or

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1076	<u>others.</u> The court shall hear and review all relevant evidence,
1077	including testimony from individuals such as family members
1078	familiar with the respondent's prior history and how it relates
1079	to his or her current condition, and the review of results of
1080	the assessment completed by the qualified professional in
1081	connection with this chapter. The court may also order drug
1082	tests. Upon a showing of good cause, including, but not limited
1083	to, such as specific symptoms of the respondent's condition, and
1084	if all parties consent, the court may permit all witnesses, such
1085	as any medical professionals or personnel who are or have been
1086	involved with the respondent's treatment, to remotely attend and
1087	testify at the hearing under oath via audio-video
1088	teleconference. Any witness intending to remotely attend and
1089	testify at the hearing must provide the parties with all
1090	relevant documents by the close of business on the day before
1091	the hearing the respondent's protective custody, emergency
1092	admission, involuntary assessment, or alternative involuntary
1093	admission. The respondent must be present unless the court finds
1094	that his or her presence is likely to be injurious to himself or
1095	herself or others, in which event the court must appoint a
1096	guardian advocate to act in behalf of the respondent throughout
1097	the proceedings.
1098	(b) A respondent cannot be involuntarily ordered into
1099	treatment under this chapter without a clinical assessment being
1100	performed, unless he or she is present in court and expressly
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1101	waives the assessment. In nonemergency situations, if the
1102	respondent was not, or had previously refused to be, assessed by
1103	a qualified professional and, based on the petition, testimony,
1104	and evidence presented, it reasonably appears that the
1105	respondent qualifies for involuntary treatment services, the
1106	court shall issue an involuntary assessment and stabilization
1107	order to determine the appropriate level of treatment the
1108	respondent requires. Additionally, in cases where an assessment
1109	was attached to the petition, the respondent may request, or the
1110	court on its own motion may order, an independent assessment by
1111	a court-appointed physician or an otherwise agreed-upon
1112	physician. If an assessment order is issued, it is valid for 90
1113	days, and if the respondent is present or there is either proof
1114	of service or his or her location is known, the involuntary
1115	treatment hearing shall be continued for no more than 10 court
1116	working days. Otherwise, the petitioner and the service provider
1117	must promptly inform the court that the respondent has been
1118	assessed so that the court may schedule a hearing as soon as
1119	practicable. The service provider shall then serve the
1120	respondent, before his or her discharge, with the notice of
1121	hearing and a copy of the petition. The assessment must occur
1122	before the new hearing date, and if there is evidence indicating
1123	that the respondent will not voluntarily appear at the
1124	forthcoming hearing, or is a danger to self or others, the court
1125	may enter a preliminary order committing the respondent to an
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1126	appropriate treatment facility for further evaluation until the
1127	date of the rescheduled hearing. However, if after 90 days the
1128	respondent remains unassessed, the court shall dismiss the case.
1129	(c)1. The respondent's assessment by a qualified
1130	professional must occur within 72 hours after his or her arrival
1131	at a licensed service provider unless he or she shows signs of
1132	withdrawal or a need to be either detoxified or treated for a
1133	medical condition, which shall extend the amount of time the
1134	respondent may be held for observation until that issue is
1135	resolved. If the person conducting the assessment is not a
1136	licensed physician, the assessment must be reviewed by a
1137	licensed physician within the 72-hour period. If the respondent
1138	is a minor, such assessment must be initiated within the first
1139	12 hours after the minor's admission to the facility. The
1140	service provider may also move to extend the 72 hours of
1141	observation by petitioning the court in writing for additional
1142	time. The service provider must furnish copies of such motion to
1143	all parties in accordance with applicable confidentiality
1144	requirements, and, after a hearing, the court may grant
1145	additional time or expedite the respondent's involuntary
1146	treatment hearing. The involuntary treatment hearing, however,
1147	may be expedited only by agreement of the parties on the hearing
1148	date or if there is notice and proof of service as provided in
1149	s. 397.6955(1) and (3). If the court grants the service
1150	provider's petition, the service provider may hold the
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1151	respondent until its extended assessment period expires or until
1152	the expedited hearing date. However, if the original or extended
1153	observation period ends on a weekend or holiday, the provider
1154	may hold the respondent until the next court working day.
1155	2. Upon the completion of his or her report, the qualified
1156	professional, in accordance with applicable confidentiality
1157	requirements, shall provide copies to the court and all relevant
1158	parties and counsel. This report must contain a recommendation
1159	on the level, if any, of substance abuse and, if applicable, co-
1160	occurring mental health treatment the respondent requires. The
1161	qualified professional's failure to include a treatment
1162	recommendation, much like a recommendation of no treatment,
1163	shall result in the petition's dismissal.
1164	(d) The court may order a law enforcement officer or other
1165	designated agent of the court to take the respondent into
1166	custody and transport him or her to or from the treating or
1167	assessing service provider and the court for his or her hearing.
1168	(2) The petitioner has the burden of proving by clear and
1169	convincing evidence that:
1170	(a) The respondent is substance abuse impaired <del>and</del> has a
1171	history of lack of compliance with treatment for substance
1172	abuse; and
1173	(b) Because of such impairment the respondent is unlikely
1174	to voluntarily participate in the recommended services or is
1175	unable to determine for himself or herself whether services are
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1176 necessary and: 1177 Without services, the respondent is likely to suffer 1. 1178 from neglect or refuse to care for himself or herself; that such 1179 neglect or refusal poses a real and present threat of substantial harm to his or her well-being; and that there is a 1180 1181 substantial likelihood that without services the respondent will 1182 cause serious bodily harm to himself, herself, or another in the 1183 near future, as evidenced by recent behavior; or 1184 2. The respondent's refusal to voluntarily receive care is based on judgment so impaired by reason of substance abuse that 1185 1186 the respondent is incapable of appreciating his or her need for care and of making a rational decision regarding that need for 1187 1188 care. (3) One of the qualified professionals who executed the 1189 1190 involuntary services certificate must be a witness. The court 1191 shall allow testimony from individuals, including family 1192 members, deemed by the court to be relevant under state law, 1193 regarding the respondent's prior history and how that prior 1194 history relates to the person's current condition. The Testimony 1195 in the hearing must be taken under oath, and the proceedings 1196 must be recorded. The respondent patient may refuse to testify 1197 at the hearing. 1198 (4) If at any point during the hearing the court has 1199 reason to believe that the respondent, due to mental illness other than or in addition to substance abuse impairment, is 1200

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1201	likely to neglect or injure himself, herself, or another if
1202	allowed to remain at liberty, or otherwise meets the involuntary
1203	commitment provisions of part I of chapter 394, the court may
1204	initiate involuntary examination proceedings under such
1205	provisions.
1206	(5) (4) At the conclusion of the hearing, the court shall
1207	either dismiss the petition or order the respondent to receive
1208	involuntary <u>treatment</u> services from his or her chosen licensed
1209	service provider if possible and appropriate. Any treatment
1210	order must include findings regarding the respondent's need for
1211	treatment and the appropriateness of other less restrictive
1212	alternatives.
1213	Section 31. Section 397.697, Florida Statutes, is amended
1214	to read:
1215	397.697 Court determination; effect of court order for
1216	involuntary <u>treatment</u> services.—
1217	(1) (a) When the court finds that the conditions for
1218	involuntary <u>treatment</u> services have been proved by clear and
1219	convincing evidence, it may order the respondent to receive
1220	involuntary <u>treatment</u> services from a publicly funded licensed
1221	service provider for a period not to exceed 90 days. The court
1222	may also order a respondent to undergo treatment through a
1223	privately funded licensed service provider if the respondent has
1224	the ability to pay for the treatment, or if any person on the
1225	respondent's behalf voluntarily demonstrates a willingness and

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1226 an ability to pay for the treatment. If the court finds it 1227 necessary, it may direct the sheriff to take the respondent into 1228 custody and deliver him or her to the licensed service provider 1229 specified in the court order, or to the nearest appropriate 1230 licensed service provider, for involuntary treatment services. 1231 When the conditions justifying involuntary treatment services no 1232 longer exist, the individual must be released as provided in s. 1233 397.6971. When the conditions justifying involuntary treatment 1234 services are expected to exist after 90 days of treatment 1235 services, a renewal of the involuntary treatment services order 1236 may be requested pursuant to s. 397.6975 before the end of the 1237 90-day period.

1238 (b) To qualify for involuntary outpatient treatment, an 1239 individual must be supported by a social worker or case manager 1240 of a licensed service provider or a willing, able, and 1241 responsible individual appointed by the court who shall inform 1242 the court and parties if the respondent fails to comply with his 1243 or her outpatient program. In addition, unless the respondent 1244 has been involuntarily ordered into inpatient treatment under 1245 this chapter at least twice during the last 36 months, or 1246 demonstrates the ability to substantially comply with the 1247 outpatient treatment while waiting for residential placement to 1248 become available, he or she must receive an assessment from a 1249 qualified professional or licensed physician expressly recommending outpatient services, such services must be 1250

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1251 available in the county in which the respondent is located, and 1252 it must appear likely that the respondent will follow a 1253 prescribed outpatient care plan. 1254 (2)In all cases resulting in an order for involuntary 1255 treatment services, the court shall retain jurisdiction over the 1256 case and the parties for the entry of such further orders as the 1257 circumstances may require. The court's requirements for 1258 notification of proposed release must be included in the 1259 original order. 1260 An involuntary treatment services order also (3)1261 authorizes the licensed service provider to require the 1262 individual to receive treatment services that will benefit him 1263 or her, including treatment services at any licensable service 1264 component of a licensed service provider. While subject to the 1265 court's oversight, the service provider's authority under this 1266 section is separate and distinct from the court's broad 1267 continuing jurisdiction under subsection (2). Such oversight 1268 includes, but is not limited to, submitting reports regarding 1269 the respondent's progress or compliance with treatment as 1270 required by the court. 1271 (4) If the court orders involuntary treatment services, a 1272 copy of the order must be sent to the managing entity within 1 1273 working day after it is received from the court. Documents may 1274 be submitted electronically through though existing data 1275 systems, if applicable. The department shall also receive and Page 51 of 57

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1276	maintain copies of involuntary assessment and treatment orders
1277	issued pursuant to ss. 397.6955 and 397.6957, professional
1278	certificates, and law enforcement officers' protective custody
1279	reports. These documents shall be used to prepare annual reports
1280	analyzing the data obtained from these documents, without
1281	information identifying patients, and the department shall
1282	provide copies of these reports on its website, beginning July
1283	<u>1, 2023.</u>
1284	Section 32. Section 397.6971, Florida Statutes, is amended
1285	to read:
1286	397.6971 Early release from involuntary treatment
1287	services
1288	(1) At any time before the end of the 90-day involuntary
1289	treatment services period, or before the end of any extension
1290	granted pursuant to s. 397.6975, an individual receiving
1291	involuntary <u>treatment</u> services may be determined eligible for
1292	discharge to the most appropriate referral or disposition for
1293	the individual when any of the following apply:
1294	(a) The individual no longer meets the criteria for
1295	involuntary admission and has given his or her informed consent
1296	to be transferred to voluntary treatment status.
1297	(b) If the individual was admitted on the grounds of
1298	likelihood of <u>self-neglect or the</u> infliction of physical harm
1299	upon himself or herself or others, such likelihood no longer
1300	exists.

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1301	(c) If the individual was admitted on the grounds of need
1302	for assessment and stabilization or treatment, accompanied by
1303	inability to make a determination respecting such need:
1304	1. Such inability no longer exists; or
1305	2. It is evident that further treatment will not bring
1306	about further significant improvements in the individual's
1307	condition.
1308	(d) The individual <del>is</del> no longer <u>needs treatment</u> <del>in need of</del>
1309	services.
1310	(e) The director of the service provider determines that
1311	the individual is beyond the safe management capabilities of the
1312	provider.
1313	(2) Whenever a qualified professional determines that an
1314	individual admitted for involuntary <u>treatment</u> services qualifies
1315	for early release under subsection (1), the service provider
1316	shall immediately discharge the individual and must notify all
1317	persons specified by the court in the original treatment order.
1318	Section 33. Section 397.6975, Florida Statutes, is amended
1319	to read:
1320	397.6975 Extension of involuntary treatment services
1321	period
1322	(1) Whenever a service provider believes that an
1323	individual who is nearing the scheduled date of his or her
1324	release from involuntary <u>treatment</u> services continues to meet
1325	the criteria for involuntary <u>treatment</u> services in s. 397.693 <u>or</u>
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1326 s. 397.6957, a petition for renewal of the involuntary treatment 1327 services order must may be filed with the court at least 10 days 1328 before the expiration of the court-ordered services period. The 1329 petition may be filed by the service provider or by the person 1330 who filed the petition for the initial treatment order if the 1331 petition is accompanied by supporting documentation from the 1332 service provider. The court shall immediately schedule a hearing 1333 within 10 court working to be held not more than 15 days after 1334 filing of the petition and. The court shall provide the copy of 1335 the petition for renewal and the notice of the hearing to all 1336 parties and counsel to the proceeding. The hearing is conducted 1337 pursuant to ss. 397.6957 and 397.697 and must be before the circuit court unless referred to a magistrate s. 397.6957. 1338

1339 If the court finds that the petition for renewal of (2) 1340 the involuntary treatment services order should be granted, it 1341 may order the respondent to receive involuntary treatment services for a period not to exceed an additional 90 days. When 1342 1343 the conditions justifying involuntary treatment services no longer exist, the individual must be released as provided in s. 1344 1345 397.6971. When the conditions justifying involuntary treatment 1346 services continue to exist after an additional 90 days of 1347 treatment service, a new petition requesting renewal of the 1348 involuntary treatment services order may be filed pursuant to this section. 1349

1350

(3) Within 1 court working day after the filing of a

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1351 petition for continued involuntary services, the court shall appoint the office of criminal conflict and civil regional 1352 1353 counsel to represent the respondent, unless the respondent is 1354 otherwise represented by counsel. The clerk of the court shall 1355 immediately notify the office of criminal conflict and civil 1356 regional counsel of such appointment. The office of criminal 1357 conflict and civil regional counsel shall represent the 1358 respondent until the petition is dismissed or the court order 1359 expires or the respondent is discharged from involuntary 1360 services. Any attorney representing the respondent shall have 1361 access to the respondent, witnesses, and records relevant to the 1362 presentation of the respondent's case and shall represent the 1363 interests of the respondent, regardless of the source of payment 1364 to the attorney. 1365 (4) Hearings on petitions for continued involuntary 1366 services shall be before the circuit court. The court may 1367 appoint a magistrate to preside at the hearing. The procedures 1368 for obtaining an order pursuant to this section shall be in 1369 accordance with s. 397.697. 1370 (5) Notice of hearing shall be provided to the respondent 1371 or his or her counsel. The respondent and the respondent's 1372 counsel may agree to a period of continued involuntary services 1373 without a court hearing. 1374 (6) The same procedure shall be repeated before the expiration of each additional period of involuntary services. 1375

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1376	(7) If the respondent has previously been found
1377	incompetent to consent to treatment, the court shall consider
1378	testimony and evidence regarding the respondent's competence.
1379	Section 34. Section 397.6977, Florida Statutes, is amended
1380	to read:
1381	397.6977 Disposition of individual upon completion of
1382	involuntary <u>treatment</u> services.—At the conclusion of the 90-day
1383	period of court-ordered involuntary <u>treatment</u> services, the
1384	respondent is automatically discharged unless a motion for
1385	renewal of the involuntary <u>treatment</u> services order has been
1386	filed with the court pursuant to s. 397.6975.
1387	Section 35. Section 397.6978, Florida Statutes, is
1388	repealed.
1389	Section 36. Paragraph (c) of subsection (7) of section
1390	394.4655, Florida Statutes, is amended to read:
1391	394.4655 Involuntary outpatient services
1392	(7) HEARING ON INVOLUNTARY OUTPATIENT SERVICES
1393	(c) If, at any time before the conclusion of the initial
1394	hearing on involuntary outpatient services, it appears to the
1395	court that the person does not meet the criteria for involuntary
1396	outpatient services under this section but, instead, meets the
1397	criteria for involuntary inpatient placement, the court may
1398	order the person admitted for involuntary inpatient examination
1399	under s. 394.463. If the person instead meets the criteria for
1400	involuntary assessment, protective custody, or involuntary
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1401 admission pursuant to s. 397.675, the court may order the person to be admitted for involuntary assessment for a period of 5 days 1402 1403 pursuant to s. 397.6957 s. 397.6811. Thereafter, all proceedings 1404 are governed by chapter 397. 1405 Section 37. For the 2022-2023 fiscal year, the sum of 1406 \$633,000 in recurring funds from the General Revenue Fund is 1407 appropriated to the Department of Children and Families for the 1408 purpose of implementing this act. 1409 Section 38. This act shall take effect July 1, 2022.

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