By Senator Bradley

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A bill to be entitled

An act relating to mental health; amending s. 394.461, F.S.; authorizing the Department of Children and Families to issue a conditional designation for up to a certain number of days to allow the implementation of certain corrective measures by receiving facilities, treatment facilities, and receiving systems; amending s. 916.107, F.S.; requiring the sheriff to administer or to permit the department to administer the appropriate psychotropic medication to forensic clients before admission to a state mental health treatment facility; amending s. 916.12, F.S.; revising what an expert is required to specifically report on for recommended treatment for a defendant to attain competence to proceed, if the expert finds that a defendant is incompetent to proceed; providing report requirements; amending s. 916.13, F.S.; revising the circumstances under which every defendant who is charged with a felony and who is adjudicated incompetent to proceed may be involuntarily committed for treatment upon specified findings by the court; requiring a court to review the examining expert's report before issuing a commitment order; decreasing the timeframe in which an administrator or his or her designee is required to file a certain report with the court; requiring that a defendant be transported to the committing court's jurisdiction within a certain number of days after certain occurrences; requiring that the referring mental health facility transfer the 6-00907B-23 20231412

patient with medication and assist in discharge planning with medical teams at the receiving county jail to ensure continuity of care; reenacting ss. 394.658(1)(a), 916.106(9), and 916.17(1) and (2), F.S., relating to the Criminal Justice, Mental Health, and Substance Abuse Reinvestment Grant Program requirements; the definition of the term "forensic client" or "client"; and conditional release; respectively, to incorporate the amendment made to s. 916.13, F.S., in references thereto; providing an effective date.

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

Section 1. Section 394.461, Florida Statutes, is amended to read:

394.461 Designation of receiving and treatment facilities and receiving systems.—The department is authorized to designate and monitor receiving facilities, treatment facilities, and receiving systems and may suspend or withdraw such designation for failure to comply with this part and rules adopted under this part. The department may issue a conditional designation for up to 60 days to allow the implementation of corrective measures. Unless designated by the department, facilities are not permitted to hold or treat involuntary patients under this part.

(1) RECEIVING FACILITY.—The department may designate any community facility as a receiving facility. Any other facility within the state, including a private facility or a federal

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facility, may be so designated by the department, provided that such designation is agreed to by the governing body or authority of the facility.

- (2) TREATMENT FACILITY.—The department may designate any state—owned, state—operated, or state—supported facility as a state treatment facility. A civil patient may shall not be admitted to a state treatment facility without previously undergoing a transfer evaluation. Before a court hearing for involuntary placement in a state treatment facility, the court shall receive and consider the information documented in the transfer evaluation. Any other facility, including a private facility or a federal facility, may be designated as a treatment facility by the department, provided that such designation is agreed to by the appropriate governing body or authority of the facility.
- (3) PRIVATE FACILITIES.—Private facilities designated as receiving and treatment facilities by the department may provide examination and treatment of involuntary patients, as well as voluntary patients, and are subject to all the provisions of this part.
 - (4) REPORTING REQUIREMENTS.-
- (a) A facility designated as a public receiving or treatment facility under this section shall report to the department on an annual basis the following data, unless these data are currently being submitted to the Agency for Health Care Administration:
 - 1. Number of licensed beds.
 - 2. Number of contract days.
 - 3. Number of admissions by payor class and diagnoses.

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- 4. Number of bed days by payor class.
- 5. Average length of stay by payor class.
- 6. Total revenues by payor class.
- (b) For the purposes of this subsection, "payor class" means Medicare, Medicare HMO, Medicaid, Medicaid HMO, private-pay health insurance, private-pay health maintenance organization, private preferred provider organization, the Department of Children and Families, other government programs, self-pay patients, and charity care.
- (c) The data required under this subsection shall be submitted to the department no later than 90 days following the end of the facility's fiscal year.
- (d) The department shall issue an annual report based on the data required pursuant to this subsection. The report shall include individual facilities' data, as well as statewide totals. The report shall be submitted to the Governor, the President of the Senate, and the Speaker of the House of Representatives.
- (5) RECEIVING SYSTEM.—The department shall designate as a receiving system one or more facilities serving a defined geographic area developed pursuant to s. 394.4573 which is responsible for assessment and evaluation, both voluntary and involuntary, and treatment, stabilization, or triage for patients who have a mental illness, a substance use disorder, or co-occurring disorders. Any transportation plans developed pursuant to s. 394.462 must support the operation of the receiving system.
 - (6) RULES.—The department may adopt rules relating to:
 - (a) Procedures and criteria for receiving and evaluating

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facility applications for designation, which may include onsite facility inspection and evaluation of an applicant's licensing status and performance history, as well as consideration of local service needs.

- (b) Minimum standards consistent with this part that a facility must meet and maintain in order to be designated as a receiving or treatment facility and procedures for monitoring continued adherence to such standards.
- (c) Procedures and criteria for designating receiving systems which may include consideration of the adequacy of services provided by facilities within the receiving system to meet the needs of the geographic area using available resources.
- (d) Procedures for receiving complaints against a designated facility or designated receiving system and for initiating inspections and investigations of facilities or receiving systems alleged to have violated the provisions of this part or rules adopted under this part.
- (e) Procedures and criteria for the suspension or withdrawal of designation as a receiving facility or receiving system.

Section 2. Subsection (1) of section 916.107, Florida Statutes, is amended to read:

916.107 Rights of forensic clients.-

- (1) RIGHT TO INDIVIDUAL DIGNITY.-
- (a) The policy of the state is that the individual dignity of the client shall be respected at all times and upon all occasions, including any occasion when the forensic client is detained, transported, or treated. Clients with mental illness, intellectual disability, or autism and who are charged with

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committing felonies shall receive appropriate treatment or training. In a criminal case involving a client who has been adjudicated incompetent to proceed or not quilty by reason of insanity, a jail may be used as an emergency facility for up to 15 days following the date the department or agency receives a completed copy of the court commitment order containing all documentation required by the applicable Florida Rules of Criminal Procedure. For a forensic client who is held in a jail awaiting admission to a facility of the department or agency, evaluation and treatment or training may be provided in the jail by the local community mental health provider for mental health services, by the developmental disabilities program for persons with intellectual disability or autism, the client's physician or psychologist, or any other appropriate program until the client is transferred to a civil or forensic facility. The sheriff shall administer or permit the department to administer the appropriate psychotropic medication to a forensic client before his or her admission to a state mental health treatment facility.

(b) Forensic clients who are initially placed in, or subsequently transferred to, a civil facility as described in part I of chapter 394 or to a residential facility as described in chapter 393 shall have the same rights as other persons committed to these facilities for as long as they remain there.

Section 3. Subsection (4) of section 916.12, Florida Statutes, is amended to read:

916.12 Mental competence to proceed.-

(4) If an expert finds that the defendant is incompetent to proceed, the expert shall report on any recommended treatment

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for the defendant to attain competence to proceed. In considering the issues relating to treatment, the examining expert shall specifically report on <u>all of the following</u>:

- (a) The mental illness causing the incompetence. +
- (b) The completion of a clinical assessment by approved mental health experts trained by the department to ensure the safety of the patient and the community.
- (c) The treatment or treatments appropriate for the mental illness of the defendant and an explanation of each of the possible treatment alternatives, including, at a minimum, mental health services, treatment services, rehabilitative services, support services, and case management services as those terms are defined in s. 394.67(16), which may be provided by or within multidisciplinary community treatment teams, such as Florida Assertive Community Treatment, conditional release programs, outpatient services or intensive outpatient treatment programs, and supportive employment and supportive housing opportunities in treating and supporting the recovery of the patient. in order of choices;
- $\underline{\text{(d)}}$ (c) The availability of acceptable treatment, and, if treatment is available in the community, the expert shall so state in the report.; and
- (e) (d) The likelihood of the defendant's attaining competence under the treatment recommended, an assessment of the probable duration of the treatment required to restore competence, and the probability that the defendant will attain competence to proceed in the foreseeable future.

The examining expert's report to the court must include a full

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and detailed explanation regarding why the alternative treatment options referenced in the evaluation are insufficient to meet the needs of the defendant.

Section 4. Section 916.13, Florida Statutes, is amended to read:

- 916.13 Involuntary commitment of defendant adjudicated incompetent.—
- (1) Every defendant who is charged with a felony and who is adjudicated incompetent to proceed may be involuntarily committed for treatment upon a finding by the court of clear and convincing evidence that:
- (a) The defendant has a mental illness and because of the mental illness:
- 1. The defendant is manifestly incapable of surviving alone or with the help of willing and responsible family or friends, including available alternative services, and, without treatment, the defendant is likely to suffer from neglect or refuse to care for herself or himself and such neglect or refusal poses a real and present threat of substantial harm to the defendant's well-being; or
- 2. There is a substantial likelihood that in the near future the defendant will inflict serious bodily harm on herself or himself or another person, as evidenced by recent behavior causing, attempting, or threatening such harm;
- (b) All available, less restrictive treatment alternatives, including treatment in community residential facilities, or community inpatient or outpatient settings, or any other mental health services, treatment services, rehabilitative services, support services, or case management services as those terms are

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defined or described in s. 394.67(16) which would offer an opportunity for improvement of the defendant's condition have been judged to be inappropriate; and

- (c) There is a substantial probability that the mental illness causing the defendant's incompetence will respond to treatment and the defendant will regain competency to proceed in the reasonably foreseeable future.
- Before issuing a commitment order, the court must review the examining expert's report to ensure alternative treatment options have been fully considered and found insufficient to meet the needs of the defendant.
- (2) A defendant who has been charged with a felony and who has been adjudicated incompetent to proceed due to mental illness, and who meets the criteria for involuntary commitment under this chapter, may be committed to the department, and the department shall retain and treat the defendant.
- (a) Immediately after receipt of a completed copy of the court commitment order containing all documentation required by the applicable Florida Rules of Criminal Procedure, the department shall request all medical information relating to the defendant from the jail. The jail shall provide the department with all medical information relating to the defendant within 3 business days after receipt of the department's request or at the time the defendant enters the physical custody of the department, whichever is earlier.
- (b) Within $\underline{60 \text{ days}}$ $\underline{6 \text{ months}}$ after the date of admission and at the end of any period of extended commitment, or at any time the administrator or his or her designee determines that the

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defendant has regained competency to proceed or no longer meets the criteria for continued commitment, the administrator or designee shall file a report with the court pursuant to the applicable Florida Rules of Criminal Procedure.

(c) A competency hearing must be held within 30 days after the court receives notification that the defendant is competent to proceed or no longer meets the criteria for continued commitment. The defendant must be transported in accordance with s. 916.107 to the committing court's jurisdiction within 7 days after notification that the defendant is competent to proceed or no longer meets the criteria for continued commitment. A determination on the issue of competency must be made at a hearing within 30 days after the notification for the hearing. If the defendant is receiving psychotropic medication at a mental health facility at the time he or she is discharged and transferred to the jail, the administering of such medication must continue unless the jail physician documents the need to change or discontinue it. To ensure continuity of care, the referring mental health facility shall transfer the patient with up to 30 days of medications and assist in discharge planning with medical teams at the receiving county jail. The jail and department physicians shall collaborate to ensure that medication changes do not adversely affect the defendant's mental health status or his or her ability to continue with court proceedings; however, the final authority regarding the administering of medication to an inmate in jail rests with the jail physician.

Section 5. For the purpose of incorporating the amendment made by this act to section 916.13, Florida Statutes, in a

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reference thereto, paragraph (a) of subsection (1) of section 394.658, Florida Statutes, is reenacted to read:

394.658 Criminal Justice, Mental Health, and Substance Abuse Reinvestment Grant Program requirements.—

- (1) The Criminal Justice, Mental Health, and Substance Abuse Statewide Grant Review Committee, in collaboration with the Department of Children and Families, the Department of Corrections, the Department of Juvenile Justice, the Department of Elderly Affairs, and the Office of the State Courts Administrator, shall establish criteria to be used to review submitted applications and to select the county that will be awarded a 1-year planning grant or a 3-year implementation or expansion grant. A planning, implementation, or expansion grant may not be awarded unless the application of the county meets the established criteria.
- (a) The application criteria for a 1-year planning grant must include a requirement that the applicant county or counties have a strategic plan to initiate systemic change to identify and treat individuals who have a mental illness, substance abuse disorder, or co-occurring mental health and substance abuse disorders who are in, or at risk of entering, the criminal or juvenile justice systems. The 1-year planning grant must be used to develop effective collaboration efforts among participants in affected governmental agencies, including the criminal, juvenile, and civil justice systems, mental health and substance abuse treatment service providers, transportation programs, and housing assistance programs. The collaboration efforts shall be the basis for developing a problem-solving model and strategic plan for treating adults and juveniles who are in, or at risk of

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entering, the criminal or juvenile justice system and doing so at the earliest point of contact, taking into consideration public safety. The planning grant shall include strategies to divert individuals from judicial commitment to community-based service programs offered by the Department of Children and Families in accordance with ss. 916.13 and 916.17.

Section 6. For the purpose of incorporating the amendment made by this act to section 916.13, Florida Statutes, in a reference thereto, subsection (9) of section 916.106, Florida Statutes, is reenacted to read:

- 916.106 Definitions.—For the purposes of this chapter, the term:
- (9) "Forensic client" or "client" means any defendant who has been committed to the department or agency pursuant to s. 916.13, s. 916.15, or s. 916.302.

Section 7. For the purpose of incorporating the amendment made by this act to section 916.13, Florida Statutes, in references thereto, subsections (1) and (2) of section 916.17, Florida Statutes, are reenacted to read:

916.17 Conditional release.

(1) Except for an inmate currently serving a prison sentence, the committing court may order a conditional release of any defendant in lieu of an involuntary commitment to a facility pursuant to s. 916.13 or s. 916.15 based upon an approved plan for providing appropriate outpatient care and treatment. Upon a recommendation that outpatient treatment of the defendant is appropriate, a written plan for outpatient treatment, including recommendations from qualified professionals, must be filed with the court, with copies to all

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parties. Such a plan may also be submitted by the defendant and filed with the court with copies to all parties. The plan shall include:

- (a) Special provisions for residential care or adequate supervision of the defendant.
 - (b) Provisions for outpatient mental health services.
- (c) If appropriate, recommendations for auxiliary services such as vocational training, educational services, or special medical care.

In its order of conditional release, the court shall specify the conditions of release based upon the release plan and shall direct the appropriate agencies or persons to submit periodic reports to the court regarding the defendant's compliance with the conditions of the release and progress in treatment, with copies to all parties.

(2) Upon the filing of an affidavit or statement under oath by any person that the defendant has failed to comply with the conditions of release, that the defendant's condition has deteriorated to the point that inpatient care is required, or that the release conditions should be modified, the court shall hold a hearing within 7 days after receipt of the affidavit or statement under oath. After the hearing, the court may modify the release conditions. The court may also order that the defendant be returned to the department if it is found, after the appointment and report of experts, that the person meets the criteria for involuntary commitment under s. 916.13 or s. 916.15.

Section 8. This act shall take effect July 1, 2023.