

By Senator Rouson

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A bill to be entitled
An act relating to procedures for discharging persons
to avoid homelessness; providing a short title;
amending s. 420.626, F.S.; revising legislative
intent; encouraging certain facilities and
institutions, in collaboration with a continuum of
care lead agency, to develop and implement certain
procedures for when persons are discharged from
certain facilities or institutions; requiring the
Department of Children and Families to conduct a pilot
program in specified counties; requiring the
department to submit certain quarterly and, beginning
on a specified date, annual reports to the Governor
and the Legislature; revising certain procedures;
defining the term "client-level data"; requiring the
sharing of client-level data to comply with specified
state and federal laws and regulations; requiring a
continuum of care lead agency to evaluate certain
procedures and identify gaps and opportunities for
improvement in its annual continuum of care plan;
authorizing the State Office on Homelessness, in
conjunction with the Council on Homelessness, to
provide guidance to a continuum of care lead agency
for a specified purpose; providing an effective date.

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

Section 1. This act may be cited as the "Bridging Systems
to Housing Act."

16-00991B-26

20261132__

Section 2. Section 420.626, Florida Statutes, is amended to read:

420.626 Homelessness; discharge guidelines.—

(1) It is the intent of the Legislature, ~~to encourage mental health facilities or institutions under contract with, operated, licensed, or regulated by the state and local governments~~ to ensure, to the extent practicable, that persons leaving the their care or custody of hospitals and other facilities and institutions under contract with, operated by, licensed by, or regulated by the state and local governments are not discharged into homelessness without connecting such persons to the continuum of care.

(2) The following facilities and institutions, in collaboration with the continuum of care lead agency in the facility's or institution's catchment area, are encouraged to develop and implement procedures as provided under subsection (4) which are designed to reduce the discharge of persons into homelessness when such persons are admitted or housed for more than 24 hours at such facilities or institutions: hospitals and inpatient medical facilities not located in a county in which a pilot program is conducted under subsection (3); crisis stabilization units; residential treatment facilities; assisted living facilities; and detoxification centers.

(3) The department shall conduct a pilot program in Broward, Duval, Hillsborough, and Pinellas Counties for the development and implementation of the procedures required under subsection (4) for all hospitals and inpatient medical facilities located in those counties.

(a) Until the pilot program is fully implemented, the

16-00991B-26

20261132__

department must submit to the Governor, the President of the Senate, and the Speaker of the House of Representatives quarterly reports on the status of the pilot program in each designated county.

(b) By November 30, 2027, and annually thereafter, the department shall assess and submit a report on the effectiveness of the pilot program in each designated county to the Governor, the President of the Senate, and the Speaker of the House of Representatives.

(4)(3) The procedures for persons who consent to participate in services must ~~should~~ include all of the following:

(a) Development and implementation of an early assessment a screening process or other mechanism for identifying persons to be discharged from the facility or institution who reported being homeless at the time of intake, are at considerable risk for homelessness, or face an ~~some~~ imminent threat to their health and safety upon discharge.

(b) Development and implementation of a discharge plan that ensures ~~addressing how~~ identified persons are offered a transition from the facility or institution to the local continuum of care for connection to housing or shelter resources, if available, or supportive services ~~will secure housing and other needed care and support~~ upon discharge.

(c) Communication with the entities to whom identified persons may potentially be discharged to determine their capability to serve such persons and their acceptance of such persons into their programs, and selection of the entity determined to be best equipped to provide or facilitate the

16-00991B-26

20261132__

88 provision of suitable care and support. A discharge to an entity
89 may only occur during normal operating hours when the receiving
90 entity is open to receive the discharged person.

91 (d) Coordination of effort and sharing of information with
92 entities that are expected to bear the responsibility for
93 providing care or support to identified persons upon discharge
94 through the following processes:

95 1. Enrollment in the Homeless Management Information System
96 to collect and share client-level data in order to gain an
97 understanding of an identified person's characteristics,
98 eligibility, and needs for housing and related services; or

99 2. With an identified person's consent, development and
100 implementation of a process or mechanism to share client-level
101 data regarding a person's medical and mental health needs
102 outside of the Homeless Management Information System.

103
104 As used in this paragraph, the term "client-level data" means
105 detailed, individual-level information regarding the housing and
106 other relevant needs, such as mental health support, of a person
107 being discharged from a facility or institution. Client-level
108 data sharing is used to ensure the timely, continuous, and
109 coordinated delivery of housing-related services and supports
110 after an identified person is stabilized and before the person
111 is released from the facility or institution. The sharing of
112 client-level data must comply with federal and state privacy and
113 confidentiality laws and regulations.

114 (e) Provision of sufficient medication, medical equipment
115 and supplies, clothing, transportation, and other basic
116 resources necessary to ensure that the health and well-being of

16-00991B-26

20261132__

identified persons are not jeopardized upon their discharge.

(f) Development and implementation of a process for facilities and institutions to verify in the Homeless Management Information System whether a person is registered with the continuum of care and, if so, the entry of a referral in the Homeless Management Information System for such person. If a person is identified at intake as homeless or is at considerable risk of homelessness upon discharge, but the person is not registered in the Homeless Management Information System, the facility or institution must ensure such person contacts the 211 call center or other local nonemergency service referral hotline to facilitate registration in the Homeless Management Information System in order to receive a referral to the continuum of care's coordinated entry system.

(g) Provision of information, such as a website or other resource guides if available, to identified persons regarding resource availability through the 211 call center, any other local nonemergency service referral hotline, or the continuum of care.

(5) The continuum of care lead agency shall evaluate the procedures developed and implemented under subsection (4) and identify gaps and opportunities for improvement in its annual continuum of care plan submitted to the State Office on Homelessness. The State Office on Homelessness, in conjunction with the Council on Homelessness, may provide the continuum of care lead agency guidance to address ongoing gaps in services to strengthen local discharge planning practices.

~~(6)-(4) This section is intended only to recommend model guidelines and procedures that mental health facilities or~~

16-00991B-26

20261132__

~~institutions under contract with or operated, licensed, or~~
~~regulated by the state or local governments may consider when~~
~~discharging persons into the community.~~ This section is not an
entitlement, and no cause of action shall arise against the
state, the local government entity, or any other political
subdivision of this state for failure to follow any of the
procedures or provide any of the services suggested under this
section.

Section 3. This act shall take effect July 1, 2026.