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A bill to be entitled An act relating to criminal procedure; revising ch. 916, F.S., relating to mentally deficient and mentally ill defendants; amending s. 916.10, F.S.; redesignating ch. 916, F.S., as the "Forensic Procedure Act"; amending s. 916.105, F.S.; providing legislative intent with respect to the treatment of defendants who are guilty but insane; amending s. 916.106, F.S.; revising definitions; amending s. 916.107, F.S.; providing for rights of defendants who have been found guilty but insane; amending s. 916.108, F.S.; providing for the training of mental health experts; amending s. 916.11, F.S.; providing for appointing expert witnesses; transferring, renumbering, and amending s. 916.16, F.S.; providing for the committing court to retain jurisdiction of a person committed under ch. 916, F.S.; transferring, renumbering, and amending s. 916.175, F.S.; providing a penalty for a person who escapes from involuntary commitment; transferring, renumbering, and amending s. 916.178, F.S.; prohibiting the introduction or removal of certain articles from a forensic facility; transferring and renumbering s. 916.19, F.S., relating to institutional security personnel; transferring and renumbering s. 916.20, F.S., relating to the authority of the Department of Health to adopt rules with respect to ch. 916, F.S.;

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creating s. 916.118, F.S.; providing definitions; creating s. 916.119, F.S.; providing for applicability; amending s. 916.12, F.S.; providing for determining a person's mental competence to proceed; amending s. 916.13, F.S.; providing for involuntary commitment of a defendant adjudicated incompetent to proceed; amending s. 916.14, F.S.; providing that the statute of limitations does not apply if a defendant is adjudicated incompetent to proceed; amending s. 916.145, F.S.; providing for dismissal of charges; repealing s. 916.15, F.S., relating to the involuntary commitment of a defendant adjudicated not guilty by reason of insanity; amending s. 916.17, F.S.; providing for the conditional release of a defendant adjudicated incompetent to proceed; creating s. 916.21, F.S.; providing circumstances under which a defendant may be found guilty but insane; creating s. 916.22, F.S.; requiring that a defendant give notice of intent to plead guilty but insane; creating s. 916.23, F.S.; providing for a mental examination of the defendant; creating s. 916.24, F.S.; providing requirements for the form of the verdict; creating s. 916.25, F.S.; providing for entry of a judgment of quilty but insane; providing for notification of the victim; creating s. 916.26, F.S.; specifying circumstances under which the court shall place a defendant under

1 the jurisdiction of the Forensic Security 2 Review Board; providing for appealing such 3 order; creating s. 916.27, F.S.; providing for commitment of a defendant to the Department of 4 5 Health; providing a standard of proof for 6 dispositional proceedings; creating s. 916.28, 7 F.S.; providing for an order of discharge; creating s. 916.29, F.S.; providing for the 8 conditional release of a defendant by the 9 10 Forensic Security Review Board; providing for 11 conditions of release; providing for revoking such release; providing for application to the 12 board for discharge from or modification of the 13 order of conditional release; creating s. 14 916.31, F.S.; providing for the Forensic 15 Security Review Board to issue an order of 16 17 commitment; providing for application for discharge or conditional release; creating s. 18 19 916.32, F.S.; providing for a hearing on 20 discharge, conditional release, or commitment; specifying rights of the defendant at the 21 hearing; creating s. 916.33, F.S.; providing 22 for discharging the defendant from the 23 24 jurisdiction of the Forensic Security Review Board; providing for review; creating s. 25 916.34, F.S.; providing requirements for the 26 27 court with respect to a crime committed by a 28 defendant under the jurisdiction of the board; creating s. 916.35, F.S.; establishing the 29 30 Forensic Security Review Board within the 31 Department of Health; providing for the

1 Governor to appoint the members of the board; 2 providing for terms of office; authorizing the 3 payment of per diem expenses; providing for meetings of the board; providing for judicial 4 5 review of an order of the board; creating s. 6 916.37, F.S.; requiring the Department of 7 Health to adopt rules for evaluating and 8 treating defendants committed to the 9 department; providing requirements for 10 conditional release plans; creating s. 916.38, 11 F.S.; authorizing the Forensic Security Review Board to issue subpoenas; providing for 12 enforcement by the circuit court; creating s. 13 916.39, F.S.; authorizing a facility 14 administrator to apply for a leave of absence 15 on behalf of a defendant; requiring review by 16 17 the board; creating s. 916.41, F.S.; requiring the state attorneys to file certain statistical 18 19 records with respect to cases in which the defense of guilty but insane is asserted; 20 creating s. 916.42, F.S.; requiring the 21 Forensic Security Review Board to make certain 22 reports to the Governor and Legislature; 23 24 amending s. 40.29, F.S., relating to pay of jurors and witnesses; conforming a 25 cross-reference to changes made by the act; 26 27 requesting the Supreme Court to adopt rules to 28 reflect the provisions of the act; providing 29 appropriations; providing for application of 30 the act; providing an effective date. 31

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Section 1. Section 916.10, Florida Statutes, is amended to read: 916.10 Short title.--This chapter may be cited as the "Forensic Procedure Client Services Act." Section 2. Section 916.105, Florida Statutes, is amended to read: 916.105 Legislative intent.--(1) It is the intent of the Legislature that the Department of Health and Rehabilitative Services establish, locate, and maintain separate and secure facilities and programs for the treatment of forensic clients who have been found to be mentally retarded or mentally ill defendants, or who are guilty but insane have been acquitted of crimes by reason of insanity, and who, while still under the jurisdiction of the committing court, are committed to the department for mental retardation or mental health services as incompetent to proceed under ss. 916.118-916.17 or, with respect to forensic clients who are guilty but insane, are

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

those clients found by the department or the Forensic Security

28 Review Board to be appropriate for treatment in a community or

committed to the department under the jurisdiction of the

Forensic Security Review Board for disposition under ss.

916.21-916.42 the provisions of this chapter. The separate,

secure facilities designated by the department as forensic

<u>facilities</u> shall be sufficient to accommodate the number of clients committed <u>under the conditions noted above</u>, except

29 civil mental health treatment facility. Forensic Such

facilities shall be designed and administered so that ingress

and egress, together with other requirements of this chapter,

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may be strictly controlled by staff responsible for security in order to protect the client, hospital personnel, other clients, and citizens in adjacent communities.

- (2) It is further the intent of the Legislature that treatment programs for <u>forensic</u> clients who are <del>found to be</del> mentally retarded or mentally ill defendants and are involuntarily committed to certain mental retardation or mental health facilities, and who are still under the jurisdiction of the committing court, be provided in such a manner, subject to security requirements and other mandates of this chapter, as to ensure the rights of <u>the</u> <u>said</u> clients <u>and</u> the protection of the public, as provided in this chapter.
- (3) It is the intent of the Legislature that evaluation and treatment of mentally ill and mentally retarded defendants be provided in community inpatient or outpatient settings, in community residential facilities, or in civil, nonforensic facilities, whenever this is a feasible alternative to treatment in a state forensic facility.

Section 3. Section 916.106, Florida Statutes, is amended to read:

916.106 Definitions.--<u>As used in</u> <del>For the purposes of</del> this chapter, the term:

- (1) "Chemical weapon" means any shell, cartridge, bomb, gun, or other device capable of emitting chloroacetophenone (CN), chlorobenzalmalononitrile (CS) or any derivatives thereof in any form, or any other agent with lacrimatory properties, and shall include products such as that commonly known as "mace."
  - (2) "Court" means the circuit court.
- 30 <u>(2)(3)</u> "Department" means the Department of Health and Rehabilitative Services.

(3)(4) "Forensic client" or "patient" means any mentally retarded or mentally ill defendant, or any person found guilty but insane, person who is committed to the department or to the Forensic Security Review Board and placed into treatment as provided in this chapter. The terms apply to an adult or a juvenile who is prosecuted as an adult.and:

- (a) Who has been determined to need treatment for a mental illness or mental retardation;
- (b) Who has been found incompetent to stand trial or incompetent for sentencing, has been acquitted of a criminal offense by reason of insanity, has criminal charges pending, or has been found guilty of a criminal offense but is not an inmate of the Department of Corrections or any other correctional facility; and
  - (c) Who has been determined by the department to:
    - 1. Be dangerous to himself or herself or others; or
    - 2. Present a clear and present potential to escape.
- (4)(5) "Forensic facility" means a separate and secure facility established within the department for the treatment of forensic clients. Such separate and secure facilities shall be security-grade buildings located on grounds distinct in location from other treatment facilities for persons who are mentally ill. The Florida State Hospital may shall not be required to maintain separate treatment facilities for forensic clients mentally ill or mentally retarded persons found incompetent for trial or acquitted of a criminal offense by reason of insanity.
- (5) "Institutional security personnel" means staff members who meet or exceed the requirements of s. 943.13 and who are responsible for providing security, for protection of <u>forensic</u> clients and personnel, for the enforcement of rules,

for prevention and investigation of unauthorized activities, and for safequarding the interests of citizens in the 3 surrounding communities. (7) "Mentally ill" means having an impairment of the 4 5 emotional processes, of the ability to exercise conscious 6 control of one's actions, or of the ability to perceive 7 reality or to understand, which impairment substantially interferes with a person's ability to meet the ordinary 8 9 demands of living, regardless of etiology; except that, for 10 the purposes of this chapter, the term does not include simple 11 intoxication, persons who are solely mentally retarded, or conditions manifested only by antisocial behavior or drug 12 13 addiction. 14 (8) "Mental retardation" means significantly 15 subaverage general intellectual functioning existing concurrently with deficits in adaptive behavior and manifested 16 17 during the period from conception to age 18. "Significantly subaverage general intellectual functioning, " for the purpose 18 19 of this definition, means performance which is two or more standard deviations from the mean score on a standardized 20 intelligence test specified in the rules of the department. 21 22 "Adaptive behavior," for the purpose of this definition, means the effectiveness or degree with which an individual meets the 23 24 standards of personal independence and social responsibility 25 expected of the individual's age, cultural group, and community. 26

916.107 Rights of forensic clients.--

(1) RIGHT TO INDIVIDUAL DIGNITY. --

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amended to read:

Section 4. Section 916.107, Florida Statutes, is

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- (a) The policy of the state is that the individual dignity of the patient shall be respected at all times and upon all occasions, including any occasion when the patient is detained, transported, or treated. Persons who are mentally ill or mentally retarded and who are charged with, or who have been convicted of, committing criminal acts, or who have been found guilty but insane, shall receive appropriate treatment. In a criminal case involving a person who has been adjudicated incompetent to proceed stand trial or who has been found not guilty but insane by reason of insanity, or who has otherwise been found by the court to meet the criteria for involuntary commitment, a jail may be used as an emergency facility for up to 15 days after from the date the department receives a completed copy of the commitment order containing the documentation required by law Rules 3.212 and 3.217, Florida Rules of Criminal Procedure. In every case in which a mentally ill or mentally retarded person is held in a jail, evaluation and treatment shall be provided in the jail by the local receiving facility, the patient's physician or clinical psychologist, or any other mental health program available to provide such treatment until the person is transferred to the custody of the department.
- (b) Mentally ill or mentally retarded persons who are committed to the department pursuant to this chapter and who are initially placed in, or subsequently transferred to, a civil mental health treatment facility shall have the same rights as other persons committed to civil facilities as described in part I of chapter 394, as long as they remain in a civil facility.
  - (2) RIGHT TO TREATMENT.--

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- shall not deny treatment of mental illness or mental retardation to any client and that no services shall not be delayed at a forensic mental health treatment facility because the client is unable to pay. However, every reasonable effort to collect appropriate reimbursement for the cost of providing mental health services to persons able to pay for the services, including reimbursement from insurance or other third-party payments, shall be made by forensic facilities and jails that provide providing services pursuant to this chapter and in accordance with the provisions of s. 402.33.
- (b) Each client who is a patient at a forensic facility shall be given, at the time of admission and at regular intervals thereafter, a physical examination, which shall include screening for communicable disease by a health practitioner authorized by law to give such screenings and examinations.
- (c) Every patient committed pursuant to this <u>chapter</u> act shall be afforded the opportunity to participate in activities designed to enhance self-image and the beneficial effects of other treatments, as determined by the facility.
- (d) Not more than 30 days after admission, each patient shall have and receive, in writing, an individualized treatment plan that which the patient has had an opportunity to assist in preparing.
  - (3) RIGHT TO EXPRESS AND INFORMED CONSENT.--
- (a) A person committed to the department pursuant to this <u>chapter</u> act shall be asked to give express and informed written consent for treatment. "Express and informed consent" or "consent" means consent given voluntarily in writing after a conscientious and sufficient explanation and disclosure of

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30 31 the purpose of the proposed treatment, the common side effects of the treatment, if any, the expected duration of the treatment, and any alternative treatment available. If a patient in a forensic facility refuses such treatment as is deemed necessary by the patient's multidisciplinary treatment team at the forensic facility for the appropriate care of the patient and the safety of the patient or others, such treatment may be provided under the following circumstances:

- In an emergency situation in which there is immediate danger to the safety of the patient or others, such treatment may be provided upon the written order of a physician for a period not to exceed 48 hours, excluding weekends and legal holidays. If, after the 48-hour period, the patient has not given express and informed consent to the treatment initially refused, the administrator of the forensic facility shall, within 48 hours, excluding weekends and legal holidays, petition the committing court or the circuit court serving the county in which the facility is located, at the option of the facility administrator, for an order authorizing the continued treatment of the patient. In the interim, treatment may be continued without the consent of the patient upon the continued written order of a physician who has determined that the emergency situation continues to present a danger to the safety of the patient or others.
- 2. In a situation other than an emergency situation, the administrator of the forensic facility shall petition the court for an order authorizing the treatment of the patient. The order shall allow such treatment for a period not to exceed 90 days from the date of the entry of the order. Unless the court is notified in writing that the patient has provided express and informed consent in writing or that the patient

has been discharged by the committing court, the administrator shall, prior to the expiration of the initial 90-day order, petition the court for an order authorizing the continuation of treatment for another 90-day period. This procedure shall be repeated until the patient provides consent or is discharged by the committing court.

- 3. At the hearing on the issue of whether the court should enter an order authorizing treatment for which a patient has refused to give express and informed consent, the court shall determine by clear and convincing evidence that the patient is mentally ill or mentally retarded as defined in this chapter, that the treatment not consented to is essential to the care of the patient, and that the treatment not consented to is not experimental and does not present an unreasonable risk of serious, hazardous, or irreversible side effects. In arriving at the substitute judgment decision, the court must consider at least the following factors:
- a. The patient's expressed preference regarding treatment;
  - b. The probability of adverse side effects;
  - c. The prognosis without treatment; and
  - d. The prognosis with treatment.

The hearing shall be as convenient to the patient as may be consistent with orderly procedure and shall be conducted in physical settings not likely to be injurious to the patient's condition. The court may appoint a master to preside at the hearing. The patient or the patient's guardian, and his or her representative, shall be provided with a copy of the petition and the date, time, and location of the hearing. The patient has the right to have an attorney represent him or her at the

hearing, and, if the patient is indigent, the court shall appoint the office of the public defender to represent the patient at the hearing. The patient may testify or not, as he or she chooses, and has the right to cross-examine witnesses testifying on behalf of the facility and may present his or her own witnesses.

- (b) In addition to the provisions of paragraph (a), in the case of surgical procedures requiring the use of a general anesthetic or electroconvulsive treatment or nonpsychiatric medical procedures, and prior to performing the procedure, written permission shall be obtained from the patient, if he or she is legally competent, from the parent or guardian of a minor patient, or from the guardian of an incompetent patient. The administrator of the forensic facility or his or her designated representative may, with the concurrence of the patient's attending physician, authorize emergency surgical or nonpsychiatric medical treatment if such treatment is deemed lifesaving or for a situation threatening serious bodily harm to the patient and permission of the patient or the patient's guardian cannot be obtained.
- (4) QUALITY OF TREATMENT.--Each patient committed pursuant to this chapter shall receive treatment suited to his or her needs, which shall be administered skillfully, safely, and humanely with full respect for the patient's dignity and personal integrity. Each patient shall receive such medical, vocational, social, educational, and rehabilitative services as the patient's condition requires to bring about an early return to his or her community. In order to achieve this goal, the department is directed to coordinate its forensic mental health and mental retardation programs with all other

programs of the department and other appropriate state agencies.

- (5) COMMUNICATION, ABUSE REPORTING, AND VISITS. --
- (a) Each patient committed pursuant to the provisions of this chapter has the right to communicate freely and privately with persons outside the facility unless it is determined that such communication is likely to be harmful to the patient or others.
- (b) Each patient committed under the provisions of this chapter shall be allowed to receive, send, and mail sealed, unopened correspondence; and no patient's incoming or outgoing correspondence shall be opened, delayed, held, or censored by the facility unless there is reason to believe that it contains items or substances which may be harmful to the patient or others, in which case the administrator may direct reasonable examination of such mail and may regulate the disposition of such items or substances. "Correspondence" does shall not include parcels or packages. Forensic facilities are authorized to promulgate reasonable rules to provide for the inspection of parcels or packages and for the removal of contraband items for health or security reasons prior to the contents being given to a resident.
- (c) If a patient's right to communicate is restricted by the administrator, written notice of such restriction shall be served on the patient or the patient's guardian or representatives, and such restriction shall be recorded on the patient's clinical record with the reasons therefor. The restriction of a patient's right to communicate shall be reviewed at least every 90 days.
- (d) Each forensic facility shall establish reasonable rules governing visitors, visiting hours, and the use of

telephones by patients in the least restrictive possible manner.

- (e) Each patient committed pursuant to this chapter shall have ready access to a telephone in order to report an alleged abuse. The facility or program staff shall verbally and in writing inform each patient of the procedure for reporting abuse. A written copy of that procedure, including the telephone number of the abuse registry and reporting forms, shall be posted in plain view.
- (f) The department shall adopt rules providing a procedure for reporting abuse. Facility staff shall be required, as a condition of employment, to become familiar with the procedures for the reporting of abuse.
- PATIENTS.—A patient's right to his or her clothing and personal effects shall be respected. The department by rule, or the administrator of any facility by written institutional policy, may declare certain items to be hazardous to the welfare of patients or others or to the operation of the facility. Such items may be restricted from introduction into the facility or may be restricted from being in a patient's possession. The administrator may take temporary custody of such effects when required for medical and safety reasons. Custody of such personal effects shall be recorded in the patient's clinical record.
- (7) VOTING IN PUBLIC ELECTIONS.—A patient committed pursuant to this chapter who is eligible to vote according to the laws of the state has the right to vote in the primary and general elections. The department shall establish rules to enable patients to obtain voter registration forms, applications for absentee ballots, and absentee ballots.

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- (8) CLINICAL RECORD; CONFIDENTIALITY.--A clinical record for each patient shall be maintained. The record shall include data pertaining to admission and such other information as may be required under rules of the department. Unless waived by express and informed consent by the patient or the patient's legal guardian or, if the patient is deceased, by the patient's personal representative or by that family member who stands next in line of intestate succession or except as otherwise provided in this subsection, the clinical record is confidential and exempt from the provisions of s. 119.07(1) and s. 24(a), Art. I of the State Constitution.
  - (a) Such clinical record may be released:
- 1. To such persons and agencies as are designated by the patient or the patient's legal guardian.
  - 2. To persons authorized by order of court.
- 3. To a qualified researcher, as defined by rule; a staff member of the facility; or an employee of the department when the administrator of the facility or secretary of the department deems it necessary for treatment of the patient, maintenance of adequate records, compilation of treatment data, or evaluation of programs.
- 4. For statistical and research purposes if the information is abstracted in such a way as to protect the identity of individuals.
- 5. If a patient receiving services pursuant to this chapter has declared an intention to harm other persons; however, only the declaration may be disclosed.
- 6. To the parent of a mentally ill or mentally retarded person who is committed to, or is being treated by, a forensic mental health facility or program when such

information is limited to that person's treatment plan and current physical and mental condition. Release of such information shall be in accordance with the code of ethics of the profession involved.

- (b) Notwithstanding other provisions of this subsection, the department may request or receive from or provide to any of the following entities client information to facilitate treatment, rehabilitation, and continuity of care of any forensic client:
- 1. The Social Security Administration and the United States Department of Veterans Affairs;
- 2. Law enforcement agencies, state attorneys, public defenders or other attorneys defending the patient, and judges in regard to the patient's status;
- 3. Jail personnel in the jail to which a client may be returned; and
- 4. Community agencies and others expected to provide followup care to the patient upon his or her return to the community.
- (c) The department <u>shall</u> <u>may</u> provide notice to any patient's next of kin or first representative regarding any serious medical illness or the death of the patient.
- (d)1. Any law enforcement agency, treatment facility, or other governmental agency that receives information pursuant to this subsection shall maintain the confidentiality of such information except as otherwise provided herein.
- 2. Any agency or private practitioner who acts in good faith in releasing information pursuant to this subsection is not subject to civil or criminal liability for such release.
  - (9) HABEAS CORPUS. --

- (a) At any time, and without notice, a person detained by a facility, or a relative, friend, guardian, representative, or attorney on behalf of such person, may petition for a writ of habeas corpus to question the cause and legality of such detention and request that the circuit court issue a writ for release. Each patient committed pursuant to this chapter shall receive a written notice of the right to petition for a writ of habeas corpus.
- (b) A patient or the patient's guardian or representatives may file a petition in the circuit court in the county where the patient is committed alleging that the patient is being unjustly denied a right or privilege granted herein or that a procedure authorized herein is being abused. Upon the filing of such a petition, the circuit court shall have the authority to conduct a judicial inquiry and to issue any appropriate order to correct an abuse of the provisions of this chapter.
  - (10) TRANSPORTATION. --
- (a) The sheriff shall consult with the governing board of the county as to the most appropriate and cost-effective means of transportation for forensic clients committed for treatment. Such consultation shall include, but is not limited to, consideration of the cost to the county of transportation performed by sheriff's department personnel as opposed to transportation performed by other means and, if sheriff's department personnel are to be used for transportation, the effect such use will have, if any, on service delivery levels of the sheriff's road patrol. After such consultation with the governing board of the county, the sheriff shall determine the most appropriate and

cost-effective means of transportation for forensic clients committed for treatment.

- (b) The governing board of each county  $\underline{may}$  is authorized to contract with private transport companies for the transportation of such patients to and from a forensic facility.
- (c) Any company that transports a patient pursuant to this section is considered an independent contractor and is solely liable for the safe and dignified transportation of the patient. Any transport company that contracts with the governing board of a county for the transport of patients as provided for in this section shall be insured and provide no less than \$100,000 in liability insurance with respect to the transportation of the patients.
- (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 the patients.
- (11) LIABILITY FOR VIOLATIONS.—Any person who violates or abuses any rights or privileges of a patient provided by this chapter act is liable for damages as determined by law. Any person who acts in good faith in complying with the provisions of this chapter act is immune from civil or criminal liability for his or her actions in connection with the admission, diagnosis, treatment, or discharge of a patient to or from a facility. However, this subsection does not relieve any person from liability if the person is negligent.

Section 5. Section 916.108, Florida Statutes, is amended to read:

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916.108 Training of mental health experts.--The evaluation of defendants for competency to proceed stand trial or sanity at the time of the commission of the offense shall be conducted in such a way as to ensure uniform application of all applicable the criteria enumerated in Rules 3.210 and 3.216, Florida Rules of Criminal Procedure. The department shall develop, and may contract with accredited institutions:

- (1) To provide:
- A plan for training community mental health professionals to perform forensic evaluations and to standardize the applicable criteria and procedures to be used in these evaluations as provided in ss. 916.118-916.42.+
- (b) Clinical protocols and procedures based upon the applicable criteria. of Rules 3.210 and 3.216, Florida Rules of Criminal Procedure; and
- (c) Training for community mental health professionals in the application of these protocols and procedures in performing forensic evaluations and providing reports to the
- (2) To compile and maintain the necessary information for evaluating the success of the forensic training this program, including the number of persons trained, the cost of operating the program, and the effect on the quality of forensic evaluations as measured by appropriateness of admissions to state forensic facilities and to community-based

Section 6. Section 916.11, Florida Statutes, is amended to read:

916.11 Appointment of experts.--

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- (1)(a) Semiannually, the department shall provide the courts with a list of mental health professionals who have completed approved training as experts.
- (b) The court may appoint not <del>no</del> more than three or nor fewer than two experts to determine issues of the mental condition of a defendant in a criminal case, including the issues of competency to proceed stand trial, insanity, and involuntary hospitalization or placement. The panel of experts may evaluate the defendant in jail or in another appropriate local facility.
- (c) To the extent possible, at least one of the appointed experts shall be either a state-employed psychiatrist, psychologist, or physician if in the local vicinity; a psychiatrist, psychologist, or physician designated by the district alcohol, drug abuse, and mental health program office; or a community mental health center psychiatrist, psychologist, or physician.
- (d) If a defendant's suspected mental condition is mental retardation, the court shall appoint the developmental services program of the department of Health and Rehabilitative Services to examine the defendant and determine whether she or he meets the definition of "retardation" in s. 393.063 and, if so, whether she or he is competent to stand trial.
- (2) Expert witnesses appointed by the court to determine the mental condition of a defendant in a criminal case shall be allowed reasonable fees for services rendered as witnesses, which shall be paid by the county in which the indictment was found or the information or affidavit was filed. State employees shall be paid expenses pursuant to s. 112.061. The fees shall be taxed as costs in the case.

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Section 7. Section 916.16, Florida Statutes, is transferred, renumbered as section 916.111, Florida Statutes, and amended to read:

916.111 916.16 Jurisdiction of committing court.--The committing court shall retain jurisdiction in the case of any patient hospitalized or, if retarded, admitted to retardation residential services under pursuant to this chapter. No Such person may not be released except by order of the committing court. The administrative hearing examiner does not shall have no jurisdiction to determine issues of continuing hospitalization or release of any person admitted under pursuant to this chapter.

Section 8. Section 916.175, Florida Statutes, is transferred, renumbered as section 916.112, Florida Statutes, and amended to read:

916.112 916.175 Escape from treatment program; penalty.—A client involuntarily committed to the department under the provisions of this chapter who escapes or attempts to escape from such involuntary commitment commits the department is guilty of a felony of the second degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.

Section 9. Section 916.178, Florida Statutes, is transferred, renumbered as section 916.113, Florida Statutes, and amended to read:

916.113 916.178 Introduction or removal of certain articles unlawful; penalty.--

(1)(a) Except as authorized by law or as specifically authorized by the person in charge of a forensic facility, it is unlawful to introduce into or upon the grounds of any forensic facility under the supervision or control of the

department, or to take or attempt to take or send therefrom, any of the following articles, which are hereby declared to be contraband for the purposes of this section:

- 1. Any intoxicating beverage or beverage  $\underline{\text{that}}$  which causes or may cause an intoxicating effect;
  - 2. Any controlled substance as defined in chapter 893;
  - 3. Any firearm or deadly weapon; or
- 4. Any other item items as determined by the department, and as designated by departmental rule or by the administrator of any facility, and designated by written institutional policies, to be hazardous to the welfare of patients or the operation of the facility.
- (b) It is unlawful to transmit to, attempt to transmit to, or cause or attempt to cause to be transmitted to or received by any patient of any facility any article or thing declared by this section to be contraband, at any place which is outside of the grounds of such facility, except as authorized by law or as specifically authorized by the person in charge of such facility.
- (2)(a) All individuals or vehicles entering upon the grounds of any forensic facility under the supervision or control of the department <u>are shall be</u> subject to reasonable search and seizure of any contraband materials introduced thereon, for purpose of enforcement of this chapter.
- (b) These provisions shall be enforced by institutional security personnel as defined in  $\underline{s.\ 916.106(5)}$   $\underline{s.\ 916.106(6)}$ .
- (c) Whoever violates any provision of subparagraph (1)(a)2. or subparagraph (1)(a)3. commits is guilty of a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.

1 Section 10. Section 916.19, Florida Statutes, is transferred and renumbered as section 916.114, Florida 2 3 Statutes. 4 Section 11. Section 916.20, Florida Statutes, is 5 transferred and renumbered as section 916.115, Florida 6 Statutes. 7 Section 12. Section 916.118, Florida Statutes, is 8 created to read: 9 916.118 Definitions.--As used in ss. 916.118-916.17, 10 the term: 11 (1) "Mentally ill defendant" or "mentally retarded defendant" means a person who is mentally ill, as defined in 12 subsection (2), or mentally retarded, as defined in subsection 13 (3), who is committed to the department, and who: 14 (a) Has been determined to need treatment for mental 15 illness or mental retardation; 16 (b) Has been found incompetent to proceed, has 17 criminal charges pending, or has pleaded nolo contendere to, 18 19 or been found guilty of, a criminal offense regardless of 20 adjudication, but is not an inmate of the Department of 21 Corrections or any other correctional facility; and Has been determined by the department to: 22 1. Be dangerous to himself or herself, or to others; 23 24 or 25 2. Present a clear and present potential to escape. "Mentally ill" means having an impairment of the 26 (2) 27 emotional processes, of the ability to exercise conscious control of one's actions, or of the ability to perceive 28 29 reality or to understand, which impairment substantially 30 interferes with a person's ability to meet the ordinary demands of living, regardless of etiology. For the purposes of 31

ss. 916.118-916.17, the term does not include simple intoxication, a person who is solely mentally retarded, or a condition that is manifested only by antisocial behavior or drug addiction.

(3) "Mentally retarded" means significantly subaverage general intellectual functioning, with concurrent deficits in

general intellectual functioning, with concurrent deficits in adaptive behavior, which is manifested from birth until age 18. For the purpose of this subsection, the phrase significantly subaverage general intellectual functioning means performance at a level that is two or more standard deviations below the mean score on a standardized intelligence test specified by rule of the department. For this purpose of this subsection, the phrase "adaptive behavior" means the effectiveness or degree with which an individual meets the standards of personal independence and social responsibility expected of an individual of his or her age, cultural group, and community.

Section 13. Section 916.119, Florida Statutes, is created to read:

916.119 Applicability of ss. 916.118-916.17.--Sections 916.118-916.17 apply to any mentally ill or mentally retarded defendant defined in s. 916.118.

Section 14. Section 916.12, Florida Statutes, is amended to read:

916.12 Mental competence to proceed stand trial.--

(1) A person is incompetent to <u>proceed</u> stand trial within the meaning of <u>ss. 916.118-916.17</u> this chapter if the person does not have sufficient present ability to consult with her or his lawyer with a reasonable degree of rational understanding or if the person <u>does not have a has no rational</u>

 and, as well as factual, understanding of the proceedings against her or him.

(2) A defendant who, because of psychotropic medication, is able to understand the nature of proceedings and assist in her or his defense shall not automatically be deemed incompetent to <a href="mailto:proceed">proceed</a> stand trial simply because the defendant's satisfactory mental functioning is dependent upon such medication. As used in this subsection, <a href="mailto:the term">the term</a> "psychotropic medication" means any drug or compound used to treat mental or emotional disorders affecting the mind, behavior, intellectual functions, perception, moods, or emotions and includes antipsychotic, antidepressant, antimanic, and antianxiety drugs.

Section 15. Section 916.13, Florida Statutes, is amended to read:

- 916.13 Involuntary commitment of defendant adjudicated incompetent to <a href="mailto:proceed">proceed</a> stand trial or incompetent for sentencing.--
- (1) CRITERIA.--Every <u>defendant</u> person adjudicated incompetent to <u>proceed</u> stand trial or incompetent for sentencing, pursuant to the applicable Florida Rules of Criminal Procedure, may be involuntarily committed for treatment upon a finding by the court of clear and convincing evidence that:
- (a) The person is mentally ill and because of her or his mental illness, or that the person is mentally retarded and because of her or his mental retardation:
- 1. The person 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 person 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 her or his well-being; or

- 2. There is a substantial likelihood that in the near future the person will inflict serious bodily harm on herself or himself or another person, as evidenced by recent behavior causing, attempting, or threatening such harm; and
- (b) All available, less restrictive treatment alternatives, including treatment in community residential facilities or community inpatient or outpatient settings, which would offer an opportunity for improvement of the person's condition have been judged to be inappropriate.
  - (2) ADMISSION FOR TREATMENT TO A FORENSIC FACILITY .--
- (a) Every <u>defendant</u> <u>person</u> who has been adjudicated incompetent to <u>proceed</u> stand trial or incompetent for <u>sentencing</u>, and who meets the criteria for commitment to the department under <u>ss. 916.118-916.17</u> the provisions of this <u>chapter</u>, shall be committed to the department, and the department may retain and treat the defendant. No later than 6 months after the date of commitment or at the end of any period of extended commitment, or at any time the administrator shall have determined that the defendant has regained competency to <u>proceed</u> stand trial or no longer meets the criteria for continued commitment, the administrator shall file a report with the court pursuant to the applicable Florida Rules of Criminal Procedure.
- (b) A defendant adjudicated incompetent to <u>proceed</u> stand trial due to her or his mental retardation may be ordered into a secure facility designated by the department for retarded defendants. The department may not transfer a client from the secure facility to another residential setting

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amended to read:

without first notifying the court; the department may transfer such defendant unless the department receives written objection to the transfer from the court within 30 days after receipt of the notice by the court. A No retarded client may not be placed in the designated secure facility except by criminal court order. However, if criminal charges are subsequently dropped and the client is involuntarily admitted to retardation residential services, the placement at the secure facility may be continued if so ordered by the committing court following a hearing with the same due process requirements as set out in s. 393.11 for an initial involuntary admission. Such court hearings shall be held at least annually, with notice to the state attorney, and each order of continuing placement shall be based on a finding that the client is likely to physically injure others as specified in s.  $393.11 \frac{\text{s. } 393.11(1)(c)2}{\text{c.}}$ . In no case may A client's placement in a secure facility may not exceed the maximum sentence for the crime for which she or he was charged. Section 16. Section 916.14, Florida Statutes, is

916.14 Statute of limitations; former jeopardy.--The statute of limitations is shall not be applicable to criminal charges dismissed because of the incompetency of the defendant to proceed stand trial. If a defendant is declared incompetent to proceed stand trial during trial and afterwards is declared competent to proceed stand trial, the defendant's other, uncompleted trial does shall not constitute former jeopardy.

Section 17. Section 916.145, Florida Statutes, is amended to read:

916.145 Adjudication of incompetency due to mental retardation; dismissal of charges.—The charges against any defendant adjudicated incompetent to proceed stand trial due to his or her mental retardation shall be dismissed if the defendant remains incompetent to proceed stand trial 2 years after such adjudication, unless the court in its order specifies its reasons for believing that the defendant will become competent to proceed stand trial and the time within which the defendant is expected to become competent to proceed stand trial.

Section 18. <u>Section 916.15, Florida Statutes, is repealed.</u>

Section 19. Section 916.17, Florida Statutes, is amended to read:

916.17 Conditional release.--

- release of any defendant who has been committed <u>under ss.</u>

  916.118-916.17 according to a finding of incompetency to stand trial or an adjudication of not guilty by reason of insanity, based on an approved plan for providing appropriate outpatient care and treatment. <u>If At such time as</u> the administrator determines that shall determine outpatient treatment of the defendant <u>is to be</u> appropriate, she or he may file with the court, with copies to all parties, a written plan for outpatient treatment, including recommendations from qualified professionals. Such a plan may be submitted by the defendant. The plan <u>must shall</u> 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) If at any time it appears 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 and may modify the release conditions or order that the defendant be returned to the department for further treatment.
- (3) If at any time it is determined after a hearing that the defendant no longer requires court-supervised followup care, the court shall terminate its jurisdiction in the cause and discharge the defendant.

Section 20. Section 916.21, Florida Statutes, is created to read:

916.21 Guilty but insane; evidence.--

- (1) A defendant is guilty but insane if, because of a mental disease or defect, the defendant:
- (a) Did not know what he or she was doing or did not know the consequences of what he or she did; or
- (b) Knew what he or she was doing and knew the consequences of what he or she did, but did not know it was wrong.

- (2) As used in ss. 916.21-916.42, the term "mental disease or defect" does not include an abnormality manifested only by repeated criminal or otherwise antisocial conduct or any abnormality constituting solely a personality disorder.
- insanity is an affirmative defense through which the defendant must assert and prove by clear and convincing evidence that, at the time the act constituting the criminal offense was committed, the defendant, as a result of a mental disease or defect, was unable to appreciate the nature and effect of the wrongfulness of the act.

Section 21. Section 916.22, Florida Statutes, is created to read:

- 916.22 Notice prerequisite to defense; content.--
- (1) A defendant may not introduce evidence on the issue of insanity unless he or she gives notice of intent to do so in the manner provided in subsection (2).
- (2) The defendant shall make a plea of not guilty and shall file a written notice of intent to assert an insanity defense under ss. 916.21-916.42. If the court finds just cause for failure to file the notice at the time of making the plea, notice may be filed at any time after the plea, but before trial. If the defendant fails to file such notice, the defendant may not introduce evidence for the establishment of an insanity defense under ss. 916.21-916.42 unless the court, in its discretion, permits such evidence to be introduced on the basis that the defendant demonstrates just cause for failure to file the notice.

Section 22. Section 916.23, Florida Statutes, is created to read:

1 916.23 Mental examination of defendant; notice required .-- Upon the filing of the notice of intent to assert 2 3 an insanity defense under ss. 916.21-916.42, the state may have at least one psychiatrist or licensed psychologist of its 4 5 selection examine the defendant. The state must file notice 6 with the court of its intention to have the defendant 7 examined. 8 Section 23. Section 916.24, Florida Statutes, is created to read: 9 10 916.24 Form of verdict of guilty but insane. -- When the 11 defendant is found guilty but insane under ss. 916.21-916.42, the verdict and judgment must so state. 12 13 Section 24. Section 916.25, Florida Statutes, is created to read: 14 916.25 Entry of order; victim notification.--15 (1)(a) After entry of a judgment of guilty but insane, 16 17 the court shall, on the basis of the evidence given at the trial, or at a separate hearing if requested by either party, 18 19 make an order of commitment to the department for custody, care, and treatment; an order of conditional release, pending 20 a determination as to care and treatment upon an initial 21 hearing by the Forensic Security Review Board; or an order of 22 discharge, whichever is appropriate under ss. 916.21-916.42. 23 24 With respect to an order of commitment to the department for custody, care, and treatment or an order of 25 conditional release pending determination by the board as to 26 27 care and treatment, the Forensic Security Review Board shall 28 determine the care and treatment of the defendant and has 29 jurisdiction for such purpose under ss. 916.21-916.42. 30 31

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1 (c) The committing court retains continuing jurisdiction over a defendant found guilty but insane until 2 3 the court issues a final order of discharge. (2) If the court makes an order of commitment to the 4 5 department for custody, care, and treatment or an order of conditional release pending determination as to care and 6 7 treatment upon an initial hearing by the Forensic Security 8 Review Board, the court shall also: (a) State on the record the offense for which the 9 10 defendant was charged. 11 (b) Make specific findings in its order as to whether there is a victim of the offense for which the defendant has 12 been found quilty but insane and, if so, whether the victim 13 wishes to be notified of any hearings by the Forensic Security 14 Review Board which concern the defendant or of any conditional 15 release of the defendant, discharge of the defendant, or 16 17 escape of the defendant from custody. Section 25. Section 916.26, Florida Statutes, is 18 19 created to read: 916.26 Order giving jurisdiction to the Forensic 20 21 Security Review Board; order of commitment or conditional 22 release; notice; appeal.--23 (1) Following the entry of a judgment under s. 916.24 24 and the dispositional determination under s. 916.25, the court shall order that the defendant be placed under the 25 jurisdiction of the Forensic Security Review Board if the 26 27 court finds that: 28 (a) The defendant was charged with a felony or was

criminal episode in which the defendant caused physical injury

charged with a misdemeanor committed during the course of a

or risk of physical injury to another;

- (b) By a preponderance of the evidence, the defendant
  is affected by a mental disease or defect and, because of such
  condition, is manifestly dangerous to others; and
  (c) The defendant requires commitment to the
  - (c) The defendant requires commitment to the department for custody, care, and treatment or conditional release pending determination as to care and treatment upon an initial hearing by the board under ss. 916.21-916.42.
  - (2) The determination as to whether the defendant should be committed to the department for custody, care, and treatment or conditionally released pending determination as to care and treatment upon an initial hearing by the board under ss. 916.21-916.42 shall be made as follows:
  - (a) If the court finds that the defendant is affected by a mental disease or defect and, because of such condition, is manifestly dangerous to others and is not a proper subject for conditional release, the court shall order the person committed to the department for custody, care, and treatment, pending determination as to care and treatment upon an initial hearing by the board in accordance with ss. 916.21-916.42.
  - (b)1. If the court finds that the defendant is affected by a mental disease or defect and, because of such condition, is manifestly dangerous to others, but the defendant can be adequately controlled with supervision and treatment if conditionally released and that necessary supervision and treatment are available, the court may order the defendant conditionally released pending determination as to care and treatment upon an initial hearing by the board, subject to any supervisory orders of the court in the best interests of justice, the protection of society, and the welfare of the person.

- 2. The court shall designate an appropriate person or state, county, or local agency to supervise the defendant upon release, subject to such conditions as the court directs in the order for conditional release. The court shall notify the supervisor of the designated agency and shall provide the supervisor an opportunity to be heard before the defendant is released to supervision.
- 3. After receiving an order entered under this paragraph, the court-designated supervisor shall assume immediate supervision of the defendant pending the initial board hearing. If, at the initial board hearing, the board approves the court-designated supervisor and conditionally releases the defendant as provided in s. 916.29, the court-designated supervisor shall continue to supervise the defendant pursuant to the direction of the board, and must report in writing at least once each month to the board concerning the defendant's compliance with the court's conditions of release.
- (3) For purposes of ss. 916.21-916.42, a defendant who is affected by a mental disease or defect that is in a state of remission is considered to have a mental disease or defect that requires supervision if the disease may, with reasonable probability, occasionally become active and, when active, render the defendant manifestly dangerous to others.
- (4) Before determining whether a person should be conditionally released pending determination as to care and treatment upon an initial hearing by the board, the court may order evaluations, examinations, and compliance as provided in ss. 916.21-916.42.
- (5) In making its determination as to whether a defendant should be committed to the department for custody,

care, and treatment or conditionally released pending determination as to care and treatment upon an initial hearing by the board, the court's primary concern shall be the protection of the public.

- (6) If the court conditionally releases the defendant pending determination as to care and treatment upon an initial hearing by the board, the court shall notify the board in writing of the court's order of conditional release, the supervisor designated, and all other conditions of release.

  The defendant shall remain on conditional release pending an initial hearing by the board in accordance with ss.

  916.21-916.42. Upon compliance with this section and subject to final discharge by the committing court, the board shall assume jurisdiction over the defendant.
- (7) An order of the court under this section is a final order and may be appealed by the defendant found guilty but insane. The defendant is entitled, on appeal, to suitable counsel. If the defendant is indigent, an attorney shall be appointed to represent him or her.
- (8) Upon placing a defendant under the jurisdiction of the board, the court shall notify the defendant of the right to appeal and the right to a hearing before the board in accordance with ss. 916.29(6) and 916.31(4).

Section 26. Section 916.27, Florida Statutes, is created to read:

- 916.27 Commitment to the department or conditional release to the board; standard of proof.--
- (1) Following the entry of a judgment under s. 916.24 and the dispositional determination under s. 916.25, if the court finds by a preponderance of the evidence that the defendant is affected by a mental disease or defect and,

because of such condition, is manifestly dangerous to others and requires commitment to the department for custody, care, 2 3 and treatment or conditional release to the board, the court shall make such disposition of the person under s. 916.26. 4 5 (2) Unless stated otherwise, the standard of proof in 6 all dispositional proceedings under ss. 916.21-916.42 is a 7 preponderance of the evidence. 8 Section 27. Section 916.28, Florida Statutes, is created to read: 9 10 916.28 Order of discharge. -- Following the entry of a 11 judgment under s. 916.24 and the dispositional determination under s. 916.25, if the court finds that the defendant is no 12 longer affected by a mental disease or defect or, if so 13 affected, is no longer manifestly dangerous to others and is 14 not in need of care, supervision, or treatment, the court 15 shall order the defendant discharged from custody. 16 17 Section 28. Section 916.29, Florida Statutes, is created to read: 18 19 916.29 Conditional release by Forensic Security Review Board; supervision; termination, modification, or discharge; 20 21 hearing.--(1) The conditional release of a defendant by the 22 Forensic Security Review Board includes, but is not limited 23 24 to: 25 (a) The monitoring of mental health treatment under the supervisory order of the board. 26 27 The supervision of the board's conditions of release under subsection (2). 28 29 The supervision of the court's conditions of 30 release under s. 916.26(2)(b).

1 (2)(a) If the Forensic Security Review Board 2 determines: 3 1. Upon its initial hearing: 4 That a defendant who has been committed by the 5 court to the department under s. 916.26(2)(a) for custody, 6 care, and treatment; or 7 That a defendant who has been conditionally 8 released by the court pending board determination as to care 9 and treatment; 10 Upon any hearing, that a defendant who has been 11 committed by the board to the department for custody, care, 12 and treatment 13 is affected by a mental disease or defect and, because of such 14 condition, is manifestly dangerous to others but can be 15 adequately controlled with supervision and treatment if 16 17 conditionally released by the board, and that necessary supervision and treatment are available, the board may order 18 19 such defendant conditionally released, subject to supervisory orders of the board which are in the best interest of justice, 20 21 the protection of the public, and the welfare of the 22 defendant. (b) The board may designate any person or any state, 23 24 county, or local agency the board considers capable of supervising the defendant's care and treatment upon release, 25 subject to conditions that the board and the committing court 26 27 directs in the conditional release order. If the defendant has 28 been conditionally released by the court pending an initial 29 hearing by the board, the board shall authorize the 30 court-designated supervisor at the initial hearing to continue supervision, unless the defendant or the court-designated 31

supervisor demonstrates at the initial hearing that a different supervisor is necessary. The board shall notify the defendant or agency to whom care and treatment supervision is designated and shall provide such defendant or agency an opportunity to be heard before the release of the defendant to supervision.

- (c) After receiving an order entered under this section, the designated supervisor shall assume supervision of the defendant pursuant to the direction of the board, and must report in writing not less than once per month to the board concerning the supervised defendant's compliance with the board's conditions of release.
- (d) Subject to its duties to safeguard the best interests of justice, the protection of society, and the welfare of the defendant, the board shall make every reasonable effort to assure continuity of supervision.
- (3) Conditions of release contained in orders entered under this section and s. 916.26(2)(b) may be modified from time to time, and a defendant's conditional release may be terminated by order of the board.
- (4) For purposes of ss. 916.21-916.42, a defendant who is affected by a mental disease or defect that is in a state of remission is considered to have a mental disease or defect requiring supervision when the disease may, with reasonable probability, occasionally become active and, when active, render the defendant manifestly dangerous to others. In such case, the defendant may be continued on conditional release by the board as provided in this section.
- (5)(a) As a condition of release, the board may require the defendant to report to any state or local mental health program for evaluation. Whenever medical, psychiatric,

or psychological treatment is recommended, the board may order the defendant, as a condition of release, to cooperate with and accept the treatment from the program.

- (b) The program to which the defendant is referred for evaluation shall perform the evaluation and submit a written report of its findings to the board. If the program finds that treatment of the defendant is appropriate, it shall include its recommendations for treatment in the report to the board.
- (c) Whenever treatment is provided by the program, it shall furnish reports to the board on a regular basis concerning the progress of the defendant.
- (d) Copies of all reports submitted to the board under this section shall be furnished to the department, the defendant, and the defendant's counsel. The confidentiality of these reports shall be determined under s. 916.107(8).
- (e) The program shall comply with any other conditions of release prescribed by order of the board under this section or by order of the court under s. 916.26(2)(b).
- conditionally released under the jurisdiction of the board, it appears to the board or its chairperson that the defendant has violated the terms of his or her conditional release or that the mental health of the defendant has changed, the board or its chairperson may order the defendant returned to the custody of the department for evaluation or treatment. A written order of the board, or its chairperson on behalf of the board, is sufficient warrant for any officer, as defined in s. 943.10(4), to take the defendant into custody and transport him or her as soon as practicable to the custody of the department. Within 20 days after the return of the defendant to the custody of the department, the board shall

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conduct a hearing. Notice of the time and place of the hearing shall be given to the defendant and the defendant's attorney.

- (b) The board may continue the defendant on conditional release or, if it finds by a preponderance of the evidence that the defendant is affected by a mental disease or defect and, because of such condition, is manifestly dangerous to others and cannot be adequately controlled if conditional release is continued, the board may order the defendant committed to the department for custody, care, and treatment.
- (c) The state must prove by a preponderance of the evidence the defendant's unfitness for conditional release.
- (d) A defendant in custody as provided in this subsection has the same rights as any defendant who appears before the board under s. 916.32.
- (7) A community mental health program director, a director of a facility providing treatment to a defendant on conditional release, any officer as defined in s. 943.10(14), or any person responsible for supervising a defendant on conditional release may take a defendant on conditional release into custody or request that the defendant be taken into custody if there is reasonable cause to believe that the defendant is manifestly dangerous to others because of a mental disease or defect and that the defendant is in need of immediate custody, care, or treatment. Any defendant taken into custody under this subsection shall be transported and held for not more than 15 days in a jail or other facility before being transported to the department for custody, care, and treatment. A defendant taken into custody under this subsection has the same rights as any defendant who appears before the board under s. 916.32.

- (8)(a) Any defendant conditionally released under the jurisdiction of the board may apply to the board for discharge from or modification of the order of conditional release on the grounds that the defendant is no longer affected by a mental disease or defect or, if still so affected, is no longer manifestly dangerous to others and no longer requires supervision, medication, care, or treatment.
- 1. If the application is for discharge from an order of conditional release, and if the board approves such application, it shall be submitted to the committing court for approval and final order of discharge.
- 2. The applicant, at any hearing under this subsection, must prove his or her fitness for discharge from or modification of the order of conditional release by a preponderance of the evidence.
- 3. An application for discharge from or modification of conditional release brought by any one defendant under this subsection may not be filed more often than once every 6 months.
- (b) Upon application by any defendant, or by an agency responsible for supervision or treatment pursuant to an order of conditional release, the board shall conduct a hearing to determine whether to continue, modify, or terminate the defendant's conditions of release. The application must be accompanied by a report that sets forth the supporting facts.
- (9) The board shall maintain and keep current the medical, social, and criminal history of all defendants under its jurisdiction. The confidentiality of records maintained by the board shall be determined under s. 916.107(8).
- (10) In any determination as to whether a defendant should be committed to the department, conditionally released,

or discharged, the primary concern shall be the protection of the public.

Section 29. Section 916.31, Florida Statutes, is created to read:

916.31 Order of commitment; application for discharge or conditional release; release plan.--

- (1) If the Forensic Security Review Board determines, upon its initial hearing or at any later hearing held under ss. 916.21-916.42, that a defendant over whom the court has given the board jurisdiction under ss. 916.21-916.42 is affected by a mental disease or defect and, because of such condition, is manifestly dangerous to others and is not a proper subject for conditional release, the board shall order that the defendant be committed to the department for custody, care, and treatment.
- (2)(a) If, at any time after the court or the board has committed a defendant to the department for custody, care, and treatment, the department is of the opinion:
- 1. That the defendant is no longer affected by a mental disease or defect or, if so affected, is no longer manifestly dangerous to others, the department shall apply to the board for an order of discharge, pending application to and final order of the committing court.
- 2. That the defendant continues to be affected by a mental disease or defect and continues to be manifestly dangerous to others, but that the defendant can be controlled with proper care, medication, supervision, and treatment if conditionally released, the department shall apply to the board for an order of conditional release.
- (b) The application must be accompanied by a report that sets forth the facts supporting the opinion of the

department. If the application is for conditional release, the application must also be accompanied by a verified conditional-release plan.

- (c) The board shall hold a hearing on the application within 60 days after its receipt. Upon the conclusion of the hearing, the board shall notify the department and the committing court of its determinations.
- (3) The state attorney may choose a psychiatrist or licensed psychologist to examine the defendant before the initial hearing or before any later hearing on discharge or conditional release. Written results of the examination must be filed with the board and must include, but need not be limited to, an opinion as to the mental condition of the defendant; whether the defendant is affected by a mental disease or defect and, because of such condition, is manifestly dangerous to others; and whether the defendant can be adequately controlled with treatment as a condition of release.
- (4) Any defendant who has been committed to the department for custody, care, and treatment, or any person who is acting on such defendant's behalf, may apply to the board for an order of conditional release or for an order of discharge, pending application to and final order of the committing court, upon the grounds that:
- (a) The defendant is no longer affected by a mental disease or defect;
- (b) If so affected, the defendant is no longer manifestly dangerous to others; or
- 29 <u>(c) The defendant continues to be affected by a mental</u>
  30 <u>disease or defect and would continue to be manifestly</u>
  31 <u>dangerous to others without treatment, but that the defendant</u>

can be adequately controlled and given proper care and treatment if placed on conditional release.

- (5) When application is made under subsection (4), the board shall require a report from the department. The report must be prepared and transmitted as provided in subsection (2). The defendant must prove his or her fitness for discharge or conditional release under the standards of subsection (4) by a preponderance of the evidence. However, if more than 2 years have passed since the state had the burden of proof on that issue, the state must bear the burden of proving by a preponderance of the evidence the defendant's lack of fitness for discharge or conditional release. An application for the discharge or conditional release of any defendant committed to the department for custody, care, and treatment may not be filed more than once every 6 months, commencing on the date of the defendant's initial board hearing.
- (6) The board is not required to hold a hearing on a first application under subsection (4) any sooner than 90 days after the initial hearing. However, any hearing that results from a properly filed subsequent request must be held within 60 days after the date the application is filed.
- (7)(a) A defendant committed by the court under s.

  916.26 to the department may not be held for custody, care,
  and treatment for more than 90 days after the date of the
  court's commitment order without an initial hearing before the
  board to determine whether the person should be conditionally
  released by the board or discharged, pending application to
  and final order of the committing court.
- (b) A subsequent hearing to determine whether the defendant should be conditionally released by the board or discharged, pending application to and final order of the

committing court, must be held before the board prior to the defendant being held under the jurisdiction of the board for 2 3 longer than 2 years. Section 30. Section 916.32, Florida Statutes, is 4 5 created to read: 6 916.32 Hearings on discharge, conditional release, 7 commitment, or modification; psychiatric reports; notice .--8 (1) The Forensic Security Review Board shall conduct a 9 hearing upon application for conditional release or for modification or termination of conditional release filed under 10 11 s. 916.29; upon application for conditional release or discharge from any commitment order filed under s. 916.31; 12 upon application for discharge from the jurisdiction of the 13 board, pending application to and final order of the 14 committing court, filed under s. 916.33; and upon application 15 filed as otherwise required by ss. 916.21-916.42, and shall 16 17 make findings and determinations on the issues before it. If the board finds that the defendant is no longer 18 19 affected by a mental disease or defect or, if so affected, is no longer manifestly dangerous to others, the board shall 20 21 order that the defendant be discharged from the jurisdiction of the board. An order of the board to release a defendant 22 from the jurisdiction of the board shall be made pending 23 24 application to and final order of the committing court. (b) If the board finds that the defendant continues to 25 be affected by a mental disease or defect and is manifestly 26 27 dangerous to others, but can be adequately controlled if 28 conditionally released with treatment as a condition of 29 release, the board shall order the defendant conditionally 30 released as provided in s. 916.29, and the defendant shall

remain under conditional release until discharged by the

board, pending application to and final order of the committing court.

- (c) If the board finds that the defendant has not recovered from a mental disease or defect and is manifestly dangerous to others and cannot adequately be controlled if conditionally released on supervision, the board shall order that the defendant be committed to the department for custody, care, and treatment.
- (2) At any time the board may appoint a psychiatrist or licensed psychologist to examine any defendant under the jurisdiction of the board and to report to the board. A report filed with the board pursuant to the examination must include, but need not be limited to, an opinion as to the mental condition of the defendant, whether the defendant is affected by a mental disease or defect and because of such condition is manifestly dangerous to others, and whether the defendant can be adequately controlled with treatment as a condition of release. To facilitate the examination of the defendant, the board may order that the defendant be placed in the temporary custody of any forensic facility or other suitable facility.
- (3) The board may make the findings and determinations required by subsection (1) based upon the written reports submitted under subsection (2). An examining psychiatrist or licensed psychologist who submitted a report may be summoned by the board to give testimony if any member of the board desires further information. The board shall consider all evidence available to it which is material, relevant, and reliable regarding the issues before the board. Such evidence may include, but need not be limited to, the record of trial, the information supplied by the state attorney or any other interested party including the defendant, any information

concerning the person's mental condition, and the entire psychiatric and criminal history of the defendant.

- (4) The board shall furnish to the defendant, the defendant's attorney, the state attorney, and the committing court written notice of any hearing conducted under subsection

  1) within a reasonable time before the hearing. The notice must include:
  - (a) The time, place, and location of the hearing.
- (b) The nature of the hearing and the specific action for which a hearing has been requested, the issues to be considered at the hearing, and a reference to the particular laws and rules involved.
- (c) A statement of the authority and jurisdiction under which the hearing is to be held.
  - (d) A statement of all rights under subsection (5).
  - (5) At the hearing, the defendant has the right to:
- (a) Appear at all proceedings held under this section, except deliberations by the board.
- $\underline{\mbox{(b) Cross-examine all witnesses who testify at the}}$  hearing.
- (c) Subpoena witnesses and documents as provided in s. 916.38.
- (d) Be represented by an attorney, to consult with the attorney before the hearing, and, if indigent, to have an attorney appointed to represent him or her.
- (e) Examine all information, documents, and reports that the board considers. All information, documents, and reports shall be disclosed to the defendant for examination as soon as such information, documents, and reports are available to the board.

1	(6) A record must be kept of all hearings before the
2	board, except board deliberations.
3	(7) Upon the request of any party before the board, or
4	on its own motion, the board may continue a hearing for a
5	reasonable period, which may not exceed 60 days, to obtain
6	additional information or testimony or for other good cause.
7	(8) Within 15 days after a hearing conducted under
8	subsection (1), the board shall provide to the defendant, the
9	defendant's attorney, the state attorney, and the committing
10	court written notice of the board's decision.
11	(9) The standard of proof on all issues at hearings of
12	the board is a preponderance of the evidence.
13	(10) If the board determines that the defendant is
14	indigent, the board shall appoint an attorney to represent him
15	or her.
16	(11) The state attorney of the circuit from which the
17	defendant was committed shall represent the state at any
18	hearing before the board.
19	Section 31. Section 916.33, Florida Statutes, is
20	created to read:
21	916.33 Discharge of defendant under jurisdiction of
22	Forensic Security Review Board; periodic status review
23	(1) Any defendant who is under the jurisdiction of the
24	Forensic Security Review Board pursuant to ss. 916.21-916.42
25	shall be discharged, pending application to and final order of
26	the committing court, at such time as the board, upon a
27	hearing, finds by a preponderance of the evidence that the
28	defendant is no longer affected by a mental disease or defect
29	or, if so affected, is no longer manifestly dangerous to
30	others so as to require regular medical care, medication,
31	supervision, or treatment.

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provide such notification.

1 (2) For purposes of subsection (1), a defendant affected by a mental disease or defect in a state of remission 2 3 is considered to have a mental disease or defect. A defendant whose mental disease or defect may, with reasonable 4 probability, occasionally become active and, when active, 5 6 render the defendant manifestly dangerous to others may not be 7 discharged. The defendant shall continue under such 8 supervision and treatment as the board deems necessary for the protection of the public and the defendant. 9 (3) Any defendant who is under the jurisdiction of the 10 11 board and who has spent 5 years on conditional release shall be brought before the board for a hearing within 30 days 12 before the expiration of the 5-year period. The board shall 13 review the defendant's status and determine whether the 14 defendant should be discharged from the jurisdiction of the 15 board, pending application to and final order of the 16 17 committing court. Section 32. Section 916.34, Florida Statutes, is 18 19 created to read: 916.34 Commission of a crime by a defendant under the 20 21 jurisdiction of the Forensic Security Review Board; notice to 22 victim.--23 (1) When a defendant who is under the jurisdiction of 24 the Forensic Security Review Board commits another crime, the court shall make the findings described in s. 916.25(2) with 25 respect to the additional crime. 26 27 (2) If the court determines that a victim, including a victim of the new crime, desires notification as described in 28 s. 916.25(2), the board shall make a reasonable effort to 29

1 Section 33. Section 916.35, Florida Statutes, is 2 created to read: 3 916.35 Forensic Security Review Board; judicial review or order; rulemaking authority.--4 5 There is established the Forensic Security Review (1)Board, which shall be an autonomous body that is located 6 within the Department of Health for administrative purposes 7 8 only. The board shall be composed of nine members appointed by 9 the Governor. 10 (2) The board shall be composed of the following 11 members: 12 (a) One psychiatrist who is experienced in the criminal justice system and who is not otherwise employed 13 14 full-time by the department or a community mental health 15 program. (b) One licensed psychologist who is experienced in 16 17 the criminal justice system and who is not otherwise employed 18 full-time by the department or a community mental health 19 program. 20 (c) A member who has substantial experience in the 21 processes of parole and probation. 22 (d) Two members of the general public. 23 (e) An attorney who has substantial experience in criminal trial practice who is not a state attorney, assistant 24 state attorney, public defender, or assistant public defender. 25 26 (f) A member who has substantial experience in 27 victims' issues. 28 (q) One licensed mental health professional who is 29 experienced in the criminal justice system and not otherwise 30 employed full-time by the department or a community mental 31 health program.

- (h) One developmental services professional who has expertise in mental retardation.
- (3) On the initial appointees, three members shall be appointed to terms of 2 years, three members shall be appointed to terms of 3 years, and three members shall be appointed to terms of 4 years. Thereafter, members of the board shall be appointed to terms of 4 years. Before the expiration of the term of a member, the Governor shall appoint a successor whose term shall begin on the following July 1. A member is eligible for reappointment. If a vacancy occurs on the board, the Governor shall appoint a member to the board for the unexpired portion of the term.
- (4) Members of the board may not be compensated for serving on the board but are entitled to reimbursement for travel and per diem expenses under s. 112.061.
- (5) Subject to any applicable laws, the board may hire employees to aid it in performing its duties.
- (6)(a) The board shall elect one of its members as chairperson for a 1-year term and shall determine the duties and powers of the chairperson.
- (b) Three members of the board constitute a quorum for purposes of transacting business.
- (7) The board shall meet at least twice each month unless the chairperson determines that there is not sufficient business before the board to warrant a meeting at the scheduled time. The board shall hold meetings at each of the state's forensic hospitals, depending on the caseload and presence of defendants in the area of each hospital who require a hearing under this chapter. The board shall also meet at other times and places at the call of the chairperson or a majority of the members of the board.

1 (8)(a) When a defendant is adversely affected or aggrieved by a final order of the board, the defendant is 2 3 entitled to judicial review of the final order. The defendant is entitled to be represented by counsel and, if the defendant 4 5 is indigent, an attorney shall be appointed to represent him 6 or her. 7 (b) The order and the proceedings are subject to 8 review by the circuit court upon a petition filed within 60 9 days after issuance of the order for which review is sought. 10 The board shall submit to the court the record of the 11 proceeding or, if the defendant agrees, a shortened record. The record must include a certified true copy of a tape 12 recording of the proceedings at any hearing held in accordance 13 with s. 916.32. A copy of the record transmitted to the court 14 shall be delivered to the defendant by the board. 15 (C) The court may affirm, reverse, or remand the 16 17 order. The filing of the petition does not stay the 18 19 board's order, but the board or the circuit court may order a stay upon application and conditioned upon terms that are 20 deemed proper by the board or the circuit court. 21 The Forensic Security Review Board may adopt rules 22 to administer its policies, procedures, and other requirements 23 24 and to carry out its duties under this chapter. 25 Section 34. Section 916.37, Florida Statutes, is created to read: 26 27 916.37 Assignment of defendants committed to the 28 custody, care, and treatment of the department; release 29 plan.--30 The department shall adopt rules for the

assignment of defendants who have been committed to the

department for custody, care, and treatment under ss.

916.21-916.42 and shall adopt standards for evaluating and treating defendants.

- (2) Whenever the Forensic Security Review Board requires the preparation of a predischarge or preconditional release plan before a hearing or as a condition of granting discharge or conditional release, the department shall prepare and submit the plan to the board and the committing court.
- (3) In preparing a conditional release plan under subsection (2), the department shall contract with a community mental health program, another public agency, a private corporation, or an individual to provide supervision and treatment for the conditionally released defendant, pending designation by the board at the hearing.
- (4) To ensure that the conditionally released defendant's treatment plan is implemented, the department shall allocate the funds necessary to the appropriate treatment services in the community.
- Section 35. Section 916.38, Florida Statutes, is created to read:
- $\underline{\texttt{916.38}}$  Subpoena power of the Forensic Security Review Board.--
- (1) Upon the request of any party to a hearing before the Forensic Security Review Board, the board or its designated representative shall issue subpoenas requiring the attendance and testimony of witnesses.
- (2) Upon the request of any party to a hearing before the board and a proper showing of the general relevance and reasonable scope of any documentary or physical evidence that is sought, the board or its designated representative shall issue subpoenas to produce such evidence.

- (3) Any witness who appears under subpoena, other than the parties to the hearing or a state officer or employee, shall receive fees and mileage as prescribed by law for a witness in a civil action. If the board or its designated representative certifies that the testimony of a witness is relevant and material, any person who has paid fees and mileage to that witness is entitled to reimbursement by the board.
- issued under this section or if a party or witness refuses to testify regarding any matter on which the party or witness may be lawfully interrogated, the circuit court, on the application of the board, its designated representative, or the party requesting issuance of the subpoena, shall initiate proceedings for contempt as in the case of disobedience of the requirements of a subpoena issued by the court.
- with an order of the board issued under subsection (2), the circuit court, on application of the board or its designated representative, shall initiate proceedings for contempt as in the case of disobedience of the requirements of an order issued by the court.

Section 36. Section 916.39, Florida Statutes, is created to read:

916.39 Leave of absence; application for board consideration.—If, at any time after the confinement of a defendant in a forensic facility or other treatment program for custody, care, and treatment under s. 916.26(2)(a) or s. 916.31(1), the administrator of the facility or program is of the opinion that a leave of absence from custody would be

therapeutic for the defendant, the administrator shall apply to the board for an order authorizing leave for up to 30 days.

- (1) The application must include the purpose of the requested leave and facts showing that the defendant will not be dangerous to others while on leave; the defendant's current mental health status and diagnosis, escape history, frequency of temporary leaves of absence, and associated problems, if any; and the defendant's current medication orders.
- (2) The board shall also consider departure and return dates and times; the location of the defendant during the leave period; persons with whom the defendant will associate during the period; and persons who will be responsible for supervising the defendant, including guardians, relatives, or friends, and the defendant himself or herself.
- (3) If the application is granted, the defendant may be permitted to leave the facility or program subject to any other condition that the administrator or board deems appropriate. Such condition may include screening for alcohol or drug use.

Section 37. Section 916.41, Florida Statutes, is created to read:

916.41 Statistical records of assertions of mental disease and defect as a defense.--Each state attorney shall submit to the State Courts Administrator, in the manner prescribed by the State Courts Administrator, statistical records on cases in which the defense of guilty but insane is asserted.

Section 38. Section 916.42, Florida Statutes, is created to read:

916.42 Annual report.--Not less than 30 days before the opening of each regular session of the Legislature, the

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Forensic Security Review Board shall file a written report with the Governor, the President of the Senate, the Speaker of the House of Representatives, and the minority leaders of each house which contains, but need not be limited to, a detailed analysis of the treatment services being rendered, the number of offenders in each program, the current status of each offender in the program, the criminal recidivism and revocation rates, and the costs involved in operating the programs.

Section 39. Subsection (1) of section 40.29, Florida Statutes, is amended to read:

- 40.29 Clerks to estimate amount for pay of jurors and witnesses and make requisition.--
- (1) The clerk of the court in and for any county shall make an estimate of the amount necessary during any quarterly fiscal period beginning July 1 and during each succeeding quarterly fiscal period for the payment by the state of:
  - (a) Jurors in the circuit court and the county court;
  - (b) Witnesses before the grand jury;
- (c) Witnesses summoned to appear for an investigation, preliminary hearing, or trial in a criminal case when the witnesses are summoned by a state attorney or on behalf of an indigent defendant;
- (d) Mental health professionals who are appointed pursuant to s. 394.473 and required in a court hearing involving an indigent; and
- (e) Expert witnesses who are appointed pursuant to s. 916.11(3)and required in a court hearing involving an indigent;

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and shall forward each such estimate to the State Courts 2. Administrator no later than the date scheduled by the State 3 Courts Administrator. At the time of any forwarding of such estimate, the clerk of such court shall make a requisition 4 5 upon the State Courts Administrator for the amount of such 6 estimate; and the State Courts Administrator may reduce the 7 amount if in his or her judgment the requisition is excessive. 8 Section 40. The Supreme Court is requested to amend 9 the Florida Rules of Criminal Procedure as necessary to 10 reflect the provisions of this act. 11 Section 41. (1) The sum of \$125,000 is appropriated from the General Revenue Fund to the Forensic Security Review 12 Board for the operating expenses of the board and two staff 13 14 positions are authorized. The sum of \$250,000 is appropriated from the 15 General Revenue Fund to the Forensic Security Review Board for 16 17 per diem, travel, and other expenses that are incurred by the 18 members of the board. 19 Section 42. This act applies to all persons who are under court supervision on October 1, 1998, pursuant to an 20 21 adjudication of not guilty by reason of insanity. Section 43. This act shall take effect October 1, 22 23 1998. 24 25 26 27 28 29 30

SENATE SUMMARY Revises ch. 916, F.S., relating to mentally retarded or mentally ill defendants, to create the "Forensic Procedure Act." Establishes the Forensic Security Review Procedure Act." Establishes the Forensic Security Review Board to assume jurisdiction, upon court order, of a defendant who is found guilty but insane. Provides for the board to order that such defendant be committed to the Department of Health for custody, care, and treatment. Provides for an order of conditional release. Provides criteria, standards, and procedures for such proceedings. Provides standards of proof for hearings and for the rights of a defendant. Provides for conditional release plans. Provides for judicial review of an order of the Forensic Security Review Board. Authorizes the board to issue subpoenas. Requires that the state attorneys file certain statistical records with respect to cases in which the defendant asserts the defense of guilty but insane. Requests that the Supreme Court adopt guilty but insane. Requests that the Supreme Court adopt rules to implement the act. Provides appropriations. (See bill for details.)