1 A bill to be entitled 2 An act relating to criminal defendants with 3 mental conditions or alleged mental conditions; creating the "Insanity Defense Reform Act"; 4 creating s. 916.201, F.S.; providing a short 5 6 title; amending and renumbering s. 916.106, 7 F.S., relating to definitions with respect to 8 the Forensic Client Services Act; providing or 9 revising definitions; creating s. 916.203, 10 F.S.; barring mental condition from being raised as a defense to any criminal offense 11 charged; requiring that a person suffering from 12 a mental condition requiring treatment be 13 committed to the Department of Corrections or 14 15 as otherwise provided by law for placement in an appropriate facility for treatment; 16 17 providing for incarceration or less restrictive 18 confinement if a sentence of incarceration has 19 been imposed on the person; providing for time 20 incarcerated for treatment to be credited 21 against the remainder of the time sentenced to incarceration; providing for construction; 22 23 creating s. 916.204, F.S.; prohibiting trial, 24 conviction, sentencing, or punishment of a 25 person during the period the person lacks 26 capacity to understand the proceedings or 27 assist in the defense as a result of mental 28 illness; creating s. 916.205, F.S.; providing 29 for examination of a defendant by a 30 psychiatrist or psychologist appointed by the court, or designated by the Secretary of

1 Children and Family Services upon the court's 2 request, under specified circumstances when there is reason to doubt the defendant's 3 fitness to proceed; providing for appointment 4 5 of additional experts; providing for court 6 orders to confine the defendant up to 30 days 7 for examination purposes; providing for release 8 of records; providing for a report; providing 9 for voluntary examination; providing for 10 defendant's release within a specified period after being confined solely for the purpose of 11 examination; creating s. 916.206, F.S.; 12 13 providing for court determination of the 14 defendant's fitness to proceed; requiring a 15 hearing under specified circumstances when the report is contested; providing certain rights 16 17 of the contesting party; providing for 18 suspension of the criminal proceeding, under 19 certain circumstances; providing for commitment 20 of the defendant for up to 90 days to the 21 Department of Children and Family Services for 22 care and treatment at an appropriate facility, 23 or commitment to the Department of Corrections if the defendant is found "dangerously mentally 24 25 ill, " as defined; providing exceptions; 26 providing for initial commitment orders and 27 orders for continued commitment up to an 28 additional 180 days; providing for admission 29 evaluations; prescribing contents and 30 guidelines for progress reports; requiring any determination by the director of the facility

1 that the defendant is fit to proceed to be 2 reported to the court; providing for involuntary commitment proceedings to be 3 instituted under specified circumstances; 4 5 requiring the Department of Children and Family Services to determine whether the defendant is 6 7 fit to proceed in its review of commitments; 8 providing for notice to the court and 9 resumption of the criminal proceedings or 10 dismissal of the charge, under specified circumstances; creating s. 916.207, F.S.; 11 providing for inadmissibility for certain 12 13 purposes of certain statements by the person 14 subject to the psychiatric or psychological 15 examination or treatment; providing exceptions; creating s. 916.208, F.S.; providing for forms 16 of general verdict; creating s. 916.209, F.S.; 17 18 providing for psychiatric or psychological examination of a defendant when there is reason 19 to believe that the mental condition of the 20 21 defendant will be a significant factor in 22 sentencing and when good cause is shown; 23 providing for payment of the examination by the defendant if financially able; providing for 24 25 the order appointing or requesting designation 26 of a psychiatrist or licensed psychologist to 27 specify the issues to be resolved; providing 28 for alternative examination methods; 29 prescribing guidelines and contents of 30 examination reports; providing for construction; creating s. 916.211, F.S.;

1 prescribing criteria with respect to the 2 defendant's mental condition for the court to 3 consider in sentencing the defendant, under specified circumstances when the mental 4 5 condition is a significant factor; requiring court authorization of treatment during the 6 7 period of confinement or probation or other 8 supervision specified in the sentence under 9 specified circumstances when the court makes 10 certain findings by clear and convincing evidence; requiring pronouncement of sentence; 11 creating s. 916.212, F.S.; requiring the 12 13 Department of Corrections and Department of 14 Children and Family Services to adopt rules 15 providing for certain procedures with respect to treatment and treatment plans for criminal 16 defendants for whom the sentencing court has 17 18 authorized treatment; creating s. 916.213, 19 F.S.; providing for adoption of rules by the Department of Children and Family Services and 20 21 Department of Corrections with respect to 22 transfer to facilities of the Department of 23 Children and Family Services of persons committed to the Department of Corrections; 24 amending s. 40.29, F.S., relating to estimated 25 26 pay for jurors and witnesses, to conform to 27 changes made by the act; amending s. 394.467, 28 F.S., relating to involuntary placement; 29 removing reference to insanity defense and 30 removing cross reference to conform to changes made by the act; amending s. 394.4672, F.S.,

1 relating to procedure for placement of veteran 2 with federal agency; removing reference to insanity defense to conform to changes made by 3 4 the act; amending ss. 916.105, 916.107, 5 916.108, and 916.11, F.S., relating to 6 legislative intent, rights of forensic clients, 7 training of mental health experts, and 8 appointment of experts, respectively; 9 conforming provisions relating to forensic 10 client services to changes made by the act; repealing s. 916.10, F.S., relating to the 11 short title of the Forensic Client Services 12 13 Act, s. 916.13, F.S., relating to involuntary 14 commitment of defendant adjudicated incompetent 15 to stand trial or incompetent for sentencing, s. 916.145, F.S., relating to adjudication of 16 incompetency due to mental retardation and 17 18 dismissal of charges, s. 916.15, F.S., relating 19 to involuntary commitment of defendant adjudicated not guilty by reason of insanity, 20 21 s. 916.16, F.S., relating to jurisdiction of 22 committing court, and s. 916.17, F.S., relating 23 to conditional release; amending s. 916.178, F.S., relating to unlawful introduction or 24 25 removal of certain articles; conforming a cross 26 reference; repealing Rules 3.210, 3.211, 3.212, 27 3.213, 3.214, 3.215, 3.216, 3.217, 3.218, and 28 3.219, Florida Rules of Criminal Procedure, relating to incompetence to proceed and 29 30 procedures for raising the issue, competence to proceed and scope of examination and report,

hearing and disposition, continuing incompetency to proceed, incompetency to proceed to sentencing, effect of adjudication of incompetency to proceed, insanity at time of offense or probation or community control violation, judgment of not guilty by reason of insanity, commitment of a defendant found not guilty by reason of insanity, and conditional release, respectively, to the extent of inconsistency with the act; providing for severability; providing an effective date.

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

Section 1. This act may be cited as the "Insanity Defense Reform Act."

Section 2. Section 916.106, Florida Statutes, is renumbered as section 916.202, Florida Statutes, and amended to read:

 $\underline{916.202}$ $\underline{916.106}$ Definitions.--For the purposes of this chapter:

- (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.
- 29 (3) "Dangerous mental illness" means a mental
 30 condition which causes the person to need supervision,
 31 evaluation, treatment, and care and to present a substantial

risk of physical harm to other persons as manifested by evidence of violent behavior by the person.

 $\underline{(4)}$ "Department" means the Department of <u>Children</u> Health and Family Rehabilitative Services.

(5)(4) "Forensic client" or "patient" means any mentally retarded or mentally ill person or dangerously mentally ill person who is committed to the department or Department of Corrections and:

- (a) Who has been determined to need treatment for a mental illness or $\underline{\text{dangerous mental illness}}$ $\underline{\text{mental retardation}};$ and
- (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.
 - (6)(5) "Forensic facility" means:
- (a) 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 shall not be required to maintain separate treatment facilities for mentally ill or mentally retarded persons found incompetent for trial or acquitted of a criminal offense by reason of insanity.; or

(b) A state hospital, state correctional or other state institution, or mental health center equipped to evaluate or rehabilitate dangerously mentally ill defendants.

(7) "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 clients and personnel, for the enforcement of rules, for prevention and investigation of unauthorized activities, and for safeguarding the interests of citizens in the surrounding communities.

(8)(7) "Mental illness Mentally ill" includes, but is not limited to, a mental disease or defect and means having an impairment of the emotional processes, of the ability to exercise conscious control of one's actions, or of the ability to perceive reality or to understand, which impairment substantially interferes with a person's ability to meet the ordinary demands of living, regardless of etiology; except that, for the purposes of this chapter, the term does not include simple intoxication, persons who are solely mentally retarded, or conditions manifested only by antisocial behavior or drug addiction.

(9)(8) "Mental retardation" means significantly subaverage general intellectual functioning existing concurrently with deficits in adaptive behavior and manifested during the period from conception to age 18. "Significantly subaverage general intellectual functioning," for the purpose of this definition, means performance which is two or more standard deviations from the mean score on a standardized intelligence test specified in the rules of the department. "Adaptive behavior," for the purpose of this definition, means the effectiveness or degree with which an individual meets the

standards of personal independence and social responsibility expected of the individual's age, cultural group, and 2 3 community. Section 3. Sections 916.201, 916.203, 916.204, 4 5 916.205, 916.206, 916.207, 916.208, 916.209, 916.211, 916.212, 6 and 916.213, Florida Statutes, are created to read: 7 916.201 Short title.--Sections 916.201-916.213, 8 Florida Statutes, may be cited as the "Mental Condition of 9 Criminal Defendants Act." 10 916.203 Mental condition not a defense; treatment during incarceration. --11 (1) Mental condition shall not be a defense to any 12 13 charge of criminal conduct. 14 (2) If the court finds that a person convicted of a 15 crime suffers from any mental condition requiring treatment, 16 such person shall be committed to the Department of 17 Corrections or as otherwise provided by law for placement in an appropriate facility for treatment, with due regard for 18 19 such conditions of security as the case may require. In the 20 event a sentence of incarceration has been imposed, the 21 defendant shall receive treatment in a facility that provides 22 for incarceration or less restrictive confinement. In the 23 event that a course of treatment thus commenced shall be 24 concluded prior to the expiration of the sentence imposed, the offender shall remain liable for the remainder of such 25 26 sentence, but shall have credit for time incarcerated for 27 treatment. 28 (3) Nothing in ss. 916.201-916.213 is intended to 29 prevent the admission of expert evidence concerning any state

of mind which is an element of the offense, subject to the

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rules of evidence.

916.204 Lack of capacity to understand proceedings.--No person who, as a result of mental illness, lacks capacity to understand the proceedings against him or her or to assist in his or her own defense shall be tried, convicted, sentenced, or punished for the commission of an offense so long as such incapacity endures.

916.205 Examination of defendant.--

- (1) Whenever there is reason to doubt the defendant's fitness to proceed as set forth in s. 916.203, the court shall appoint experts to examine the defendant as provided in s. 916.11. In addition, at least one qualified psychiatrist or licensed psychologist shall request the Secretary of Children and Family Services to designate at least one qualified psychiatrist or licensed psychologist to examine the report upon the mental condition of the defendant as to the defendant's capacity to assist counsel with defense or to understand the proceedings. The cost of examination shall be paid by the defendant if he or she is financially able. The determination of ability to pay shall be made in accordance with part III of chapter 27 and any other laws of this state governing provisions of counsel to indigent defendants.
- (2) Within 3 days, excluding Saturdays, Sundays, and legal holidays, of the appointment or designation, the examiner shall determine the best location for the examination. If practical, the examination shall be conducted locally on an outpatient basis.
- (3) If the examiner determines that confinement is necessary for purposes of the examination, the court may order the defendant to be confined to a jail, hospital, or other suitable facility for that purpose for a period not exceeding 30 days. The order of confinement shall require the county

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sheriff to transport the defendant to and from the facility 1 and shall notify the facility of any known medical, 2 behavioral, or security requirements of the defendant. The court, upon request, may make available to the examiner any 4 court records relating to the defendant.

- (4) In such examination any method may be employed which is accepted by the examiner's profession for the examination of those alleged not to be competent to assist counsel in their defense.
- (5) Upon completion of the examination, a report shall be submitted to the court and shall include the following:
 - (a) A description of the nature of the examination;
- (b) A diagnosis or evaluation of the mental condition of the defendant;
- (c) An opinion as to the defendant's capacity to understand the proceedings against him or her and to assist in his or her own defense;
- (d) When directed by the court, an opinion as to the capacity of the defendant to form a particular state of mind which is an element of the offense charged.
- (6) If the examination cannot be conducted by reason of the unwillingness of the defendant to participate in the examination, the report shall so state and shall include, if possible, an opinion as to whether such unwillingness of defendant was the result of mental illness.
- (7) The report of the examination shall be filed with the clerk of the court, who shall deliver copies to the prosecuting attorney and to counsel for the defendant.
- (8) When the defendant wishes to be examined by an expert of the defendant's own choice, such examiner shall be

permitted to have reasonable access to the defendant for the purpose of examination.

- (9) In addition to the psychiatrist or licensed psychologist, the court may appoint additional experts to examine the defendant besides those required by s. 916.11.
- decisions about treatment, the court may authorize consent to be given pursuant to part I of chapter 394 and any other civil commitment laws of this state. A defendant lacks capacity to make informed decisions about treatment if, by reason of mental illness, after conscientious efforts at explanation, the defendant is unable to achieve a rudimentary understanding of the purpose, nature, and possible significant risks and benefits of treatment.
- (11) If the defendant was confined solely for the purpose of examination, he or she shall be released from the facility within 3 days, excluding Saturdays, Sundays, and legal holidays, following notification of completion of the examination.
- 916.206 Determination of fitness of defendant to proceed.--
- (1) When the defendant's fitness to proceed is drawn in question, the issue shall be determined by the court. If neither the prosecuting attorney nor counsel for the defendant contests the findings of the report filed pursuant to s.

 916.205, the court may make the determination on the basis of such report. If the finding is contested, the court shall hold a hearing on the issue. If the report is received in evidence upon such hearing, the party who contests the finding thereof shall have the right to summon as a witness and to examine the

psychiatrist or licensed psychologist who submitted the report and to offer evidence upon the issue.

- (2) If the court determines that the defendant lacks fitness to proceed, the criminal proceeding against the defendant shall be suspended, except as otherwise provided in this section, and the court shall commit the defendant to the custody of the department for care and treatment at an appropriate facility of the department or, if the defendant is found to be dangerously mentally ill, to the Department of Corrections for a period not exceeding 90 days.
- (a) The order of commitment shall require the county sheriff to transport the defendant to and from the facility and require an evaluation of the defendant's mental condition at the time of admission to the facility, and a progress report on the defendant's mental condition.
- whether the defendant is fit to proceed or, if not, whether there is a substantial probability the defendant will be fit to proceed within the foreseeable future. If the report concludes that there is a substantial probability that the defendant will be fit to proceed in the foreseeable future, the court may order the continued commitment of the defendant for an additional 180 days. If at any time the director of the facility to which the defendant is committed determines that the defendant is fit to proceed, such determination shall be reported to the court.
- (3) Each report shall be filed with the clerk of the court, who shall deliver copies to the prosecuting attorney and to counsel for the defendant. Upon receipt of a report, the court shall determine, after a hearing if a hearing is requested, whether the defendant is fit to proceed. If the

court determines that the defendant is fit to proceed, the proceeding shall be resumed. If, at the end of the initial 90 days, the court determines that the defendant is unfit and there is not a substantial probability the defendant will be fit to proceed within the foreseeable future, or if the defendant is not fit to proceed after the expiration of the additional 180 days, involuntary commitment proceedings shall be instituted pursuant to the laws of this state in the court in which the criminal charge is pending.

(4) The department shall review at least monthly its commitment under this section. In its review of commitments, the department shall determine whether the defendant is fit to proceed with trial. If the defendant is fit to proceed, the court in which the criminal charge is pending shall be notified and the criminal proceedings may resume. However, if the court is of the view that so much time has elapsed, excluding any time spent free from custody by reason of the escape of the defendant, since the commitment of the defendant that it would be unjust to resume the criminal proceeding, the court may dismiss the charge.

person.—A statement made by a person subjected to psychiatric or psychological examination or treatment pursuant to s.

916.204, s. 916.205, or s. 916.206, for the purposes of such examination or treatment, shall not be admissible in evidence in any criminal proceeding against the defendant on any issue other than the defendant's ability to assist counsel at trial or to form any specific intent which is an element of the crime charged, except that such statements of a defendant to a psychiatrist or psychologist as are relevant for impeachment

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purposes may be received subject to the usual rules of evidence governing matters of impeachment.

916.208 Forms of general verdict.--For purposes of this chapter, general verdict upon a plea of not guilty is either "guilty" or "not guilty," which imports a conviction or an acquittal of the offense charged.

916.209 Examination of defendant for evidence of mental condition; appointment of psychiatrists or licensed psychologists; hospitalization reports.--

- (1) If there is reason to believe the mental condition of the defendant will be a significant factor at sentencing and for good cause shown, the court shall appoint at least one psychiatrist or licensed psychologist to examine and report upon the mental condition of the defendant. The cost of examination shall be paid by the defendant if he or she is financially able. The determination of ability to pay shall be made in accordance with part III of chapter 27 and any other laws of this state governing provision of counsel to indigent defendants. The order appointing or requesting the designation of a psychiatrist or licensed psychologist shall specify the issues to be resolved for which the examiner is appointed or designated.
- (2) In making such examinations, any method may be employed which is accepted by the examiner's profession for the examination of those alleged to be suffering from a mental illness.
- $\underline{\mbox{(3)}}$ The report of the examination shall include the following:
 - (a) A description of the nature of the examination;
- (b) A diagnosis, evaluation, or prognosis of the mental condition of the defendant;

1	(c) An analysis of the degree of the defendant's
2	mental illness and level of functional impairment;
3	(d) An assessment of whether treatment is available
4	for the defendant's mental condition;
5	(e) An analysis of the relative risks and benefits of
6	treatment or nontreatment; and
7	(f) An assessment of the risk of danger that the
8	defendant may create to the public if at large.
9	(4) The report of the examination shall be filed with
10	the clerk of the court, who shall deliver copies to the
11	prosecuting attorney and to counsel for the defendant.
12	(5) When the defendant wishes to be examined by an
13	expert of the defendant's own choice, such examiner shall be
14	permitted to have reasonable access to the defendant for the
15	purpose of examination.
16	(6) Nothing in this section is intended to limit the
17	consideration of other evidence relevant to the imposition of
18	sentence.
19	916.211 Consideration of mental illness in
20	sentencing
21	(1) Evidence of mental condition shall be received, if
22	offered, at the time of sentencing of any person convicted of
23	a crime. In determining the sentence to be imposed, in
24	addition to other criteria provided by law, if the defendant's
25	mental condition is a significant factor, the court shall
26	<pre>consider such factors as:</pre>
27	(a) The extent and degree to which the defendant is
28	<pre>mentally ill;</pre>
29	(b) The level of functional impairment;
30	(c) The prognosis for improvement or rehabilitation;
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1	(d) The availability of treatment and level of care
2	required;
3	(e) Any risk or danger that the defendant may create
4	for the public, if at large, or the absence of such risk;
5	(f) The capacity of the defendant to appreciate the
6	wrongfulness of his or her conduct or to conform his or her
7	conduct to the requirements of law to the time of the offense
8	charged.
9	(2) The court shall authorize treatment during the
LO	period of confinement or probation or other form of
1	postrelease supervision specified in the sentence if, after
L2	the sentencing hearing, it concludes by clear and convincing
L3	<pre>evidence that:</pre>
L4	(a) The defendant suffers from a severe and reliably
L5	diagnosable mental illness resulting in the defendant's
L6	inability to appreciate the wrongfulness of his or her conduct
L7	or to conform his or her conduct to the requirements of law;
L8	(b) Without treatment, the immediate prognosis is for
L9	major distress resulting in serious mental or physical
20	deterioration of the defendant;
21	(c) Treatment is available for such mental illness;
22	<u>and</u>
23	(d) The relative risks and benefits of treatment or
24	nontreatment are such that a reasonable person would consent
25	to treatment.
26	(3) In addition to making the authorization of
27	treatment, if any, the court shall pronounce sentence as
28	provided by law.
29	916.212 Review of involuntary treatmentThe
R O	Department of Corrections and Department of Children and

Family Services shall adopt rules for procedures ensuring 1 2 that: 3 (1) Treatment plans are developed for patients at the 4 facility for whom the sentencing court has authorized 5 treatment; 6 (2) The relative risks and benefits or specific modes 7 of treatment contained in such plans are explained, to the 8 extent possible, to each patient; 9 (3) When treatment is given over the objection of a patient, there is a review of the decision to provide 10 treatment independent of the treating professional; and 11 12 (4) A statement explaining the reasons for giving 13 treatment over objection of the patient is entered in the patient's treatment record over the signature of the facility 14 15 administrator. 916.213 Transfer to noncorrectional 16 facilities.--Prisoners with a mental illness committed to the 17 18 Department of Corrections may be transferred to facilities of 19 the Department of Children and Family Services in accordance 20 with rules adopted jointly by the two departments. 21 Section 4. Subsection (1) of section 40.29, Florida 22 Statutes, is amended to read: 23 40.29 Clerks to estimate amount for pay of jurors and witnesses and make requisition. --24 25 (1) The clerk of the court in and for any county shall 26 make an estimate of the amount necessary during any quarterly 27 fiscal period beginning July 1 and during each succeeding 28 quarterly fiscal period for the payment by the state of: 29 (a) Jurors in the circuit court and the county court;

(b) Witnesses before the grand jury;

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- (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;

and shall forward each such estimate to the State Courts
Administrator no later than the date scheduled by the State
Courts Administrator. At the time of any forwarding of such
estimate, the clerk of such court shall make a requisition
upon the State Courts Administrator for the amount of such
estimate; and the State Courts Administrator may reduce the
amount if in his or her judgment the requisition is excessive.

Section 5. Paragraph (a) of subsection (7) of section 394.467, Florida Statutes, is amended to read:

394.467 Involuntary placement.--

- (7) PROCEDURE FOR CONTINUED INVOLUNTARY PLACEMENT. --
- (a) Hearings on petitions for continued involuntary placement shall be administrative hearings and shall be conducted in accordance with the provisions of s. 120.57(1), except that any order entered by the hearing officer shall be final and subject to judicial review in accordance with s. 120.68. Orders concerning patients committed after successfully pleading not guilty by reason of insanity shall be governed by the provisions of s. 916.15.

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Section 6. Subsection (3) of section 394.4672, Florida Statutes, is amended to read:

394.4672 Procedure for placement of veteran with federal agency.--

(3) Upon receipt of a certificate of the United States Department of Veterans Affairs or such other federal agency that facilities are available for the care or treatment of mentally ill persons and that the person is eligible for care or treatment, the administrator of the receiving or treatment facility may cause the transfer of that person to the United States Department of Veterans Affairs or other federal agency. Upon effecting such transfer, the committing court shall be notified by the transferring agency. No person shall be transferred to the United States Department of Veterans Affairs or other federal agency if he or she is confined pursuant to the conviction of any felony or misdemeanor or if he or she has been acquitted of the charge solely on the ground of insanity, unless prior to transfer the court placing such person enters an order for the transfer after appropriate motion and hearing and without objection by the United States Department of Veterans Affairs.

Section 7. Section 916.10, Florida Statutes, is hereby repealed:

916.10 Short title.--This chapter may be cited as the "Forensic Client Services Act."

Section 8. Section 916.105, Florida Statutes, is amended to read:

916.105 Legislative intent.--

29 (1) It is the intent of the Legislature that the
30 Department of <u>Children Health</u> and <u>Family Rehabilitative</u>
31 Services establish, locate, and maintain separate and secure

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facilities and programs for the treatment of forensic clients who have been found to be mentally retarded or mentally ill defendants, or who 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 under the provisions of this chapter. The separate, secure facilities shall be sufficient to accommodate the number of clients committed under the conditions noted above, except those clients found by the department to be appropriate for treatment in a civil mental health treatment facility. Such facilities shall be designed and administered so that ingress and egress, together with other requirements of this chapter, 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 clients who are found to be mentally ill retarded or dangerously mentally ill defendants and are involuntarily committed to any facility 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 said clients 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

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alternative <u>otherwise permitted by law</u> to treatment in a state forensic facility.

Section 9. Section 916.107, Florida Statutes, is amended to read:

916.107 Rights of forensic clients.--

- (1) RIGHT TO INDIVIDUAL DIGNITY. --
- (a) The policy of the state is that the individual dignity of the 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 dangerously mentally ill retarded and who are charged with, or who have been convicted of, committing criminal acts shall receive appropriate treatment. In a criminal case involving a person who has been found adjudicated incompetent to stand trial or not guilty 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 from the date the department receives a completed copy of the commitment order containing the documentation required by the Rules 3.212 and 3.217, Florida Rules of Criminal Procedure. In every case in which a mentally ill or dangerously mentally ill 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 or Department of Corrections.
- (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.--

- Department of Corrections shall not deny treatment of mental illness or dangerous mental illness retardation to any client and that no services shall 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 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 which the patient has had an opportunity to assist in preparing.

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- (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 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 <u>dangerously</u> mentally <u>ill</u> 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, if otherwise permitted by law. In order to achieve this goal, the department is directed to coordinate its forensic mental health programs with all other programs of the department, the Department of Corrections, 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 otherwise prohibited by law or 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 otherwise provided by law or 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" 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 to the department 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.
- (6) CARE AND CUSTODY OF PERSONAL EFFECTS OF 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.
- (8) CLINICAL RECORD; CONFIDENTIALITY.--A clinical record for each patient shall be maintained by the department. 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 may 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 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 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 10. Section 916.108, Florida Statutes, is amended to read:

916.108 Training of mental health experts.--The evaluation of defendants for competency to 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 laws and rules 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) A plan for training community mental health professionals to perform forensic evaluations and to standardize the criteria and procedures to be used in these evaluations;
- (b) Clinical protocols and procedures based upon the 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 courts; and
- (2) To compile and maintain the necessary information for evaluating the success of 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 care programs.

Section 11. Section 916.11, Florida Statutes, is amended to read:

- 916.11 Appointment of experts.--
- (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 no more than three 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 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.
- involves is mental retardation, the court shall appoint the developmental services program of the Department of Children Health and Family Rehabilitative Services to examine the defendant and determine whether she or he meets the definition of "retardation" in s. 393.063 and, if so, offer an opinion on 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.

Section 12. Section 916.12, Florida Statutes, reads: 916.12 Mental competence to stand trial.--

- (1) A person is incompetent to stand trial within the meaning of 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 has no rational, 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 stand trial simply because the defendant's satisfactory mental functioning is dependent upon such medication. As used in this subsection, "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 13. Section 916.13, Florida Statutes, is hereby repealed:

916.13 Involuntary commitment of defendant adjudicated incompetent to stand trial or incompetent for sentencing.--

(1) CRITERIA. -- Every person adjudicated incompetent to 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 TO A FORENSIC FACILITY. --

(a) Every person who has been adjudicated incompetent to stand trial or incompetent for sentencing, and who meets the criteria for commitment to the department under the provisions of this chapter, shall be committed to the department, and the department may retain and treat the defendant. No later than 6 months after the date of

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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 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 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 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. No retarded client may 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(1)(c)2. In no case may a client's placement in a secure facility exceed the maximum sentence for the crime for which she or he was charged.

Section 14. Section 916.14, Florida Statutes, reads: 916.14 Statute of limitations; former jeopardy.--The statute of limitations shall not be applicable to criminal

charges dismissed because of the incompetency of the defendant to stand trial. If a defendant is declared incompetent to stand trial during trial and afterwards is declared competent to stand trial, the defendant's other, uncompleted trial shall not constitute former jeopardy.

Section 15. Section 916.145, Florida Statutes, is hereby repealed:

916.145 Adjudication of incompetency due to mental retardation; dismissal of charges.—The charges against any defendant adjudicated incompetent to stand trial due to his or her mental retardation shall be dismissed if the defendant remains incompetent to 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 stand trial and the time within which the defendant is expected to become competent to stand trial.

Section 16. Section 916.15, Florida Statutes, is hereby repealed:

916.15 Involuntary commitment of defendant adjudicated not guilty by reason of insanity.--

- (1) A person who is acquitted of criminal charges because of a finding of not guilty by reason of insanity may be involuntarily committed pursuant to such finding if the person is mentally ill and, because of the person's illness, is manifestly dangerous to himself or herself or others.
- (2) Every person acquitted of criminal charges by reason of insanity and found to meet the criteria for involuntary commitment may be committed and treated in accordance with the provisions of this section and the applicable Florida Rules of Criminal Procedure. The department shall admit a defendant so adjudicated to an

appropriate facility or program for treatment and may retain and treat such defendant. No later than 6 months after the date of admission, prior to the end of any period of extended commitment, or at any time the administrator shall have determined that the defendant no longer meets the criteria for continued commitment placement, the administrator shall file a report with the court pursuant to the applicable Florida Rules of Criminal Procedure.

(3) In all proceedings under this subsection, both the patient and the state shall have the right to a hearing before the committing court. Evidence at such hearing may be presented by the hospital administrator or his or her designee as well as by the state and the defendant. The defendant shall have the right to counsel at any such hearing. In the event that a defendant cannot afford counsel, the court shall appoint the public defender to represent the defendant. The parties shall have access to the defendant's records at the treating facilities and may interview or depose personnel who have had contact with the defendant at the treating facilities.

Section 17. Section 916.16, Florida Statutes, is hereby repealed:

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 pursuant to this chapter. No such person may be released except by order of the committing court. The administrative hearing examiner shall have no jurisdiction to determine issues of continuing hospitalization or release of any person admitted pursuant to this chapter.

1 Section 18. Section 916.17, Florida Statutes, is hereby repealed: 2 3 916.17 Conditional release.--(1) The committing court may order a conditional 4 5 release of any defendant who has been committed according to a 6 finding of incompetency to stand trial or an adjudication of 7 not guilty by reason of insanity, based on an approved plan 8 for providing appropriate outpatient care and treatment. At such time as the administrator shall determine outpatient 10 treatment of the defendant to be appropriate, she or he may file with the court, with copies to all parties, a written 11 plan for outpatient treatment, including recommendations from 12 13 qualified professionals. Such a plan may be submitted by the defendant. The plan shall include: 14 15 (a) Special provisions for residential care or adequate supervision of the defendant. 16 17 (b) Provisions for outpatient mental health services. 18 (c) If appropriate, recommendations for auxiliary 19 services such as vocational training, educational services, or special medical care. 20 21 22 In its order of conditional release, the court shall specify 23 the conditions of release based upon the release plan and shall direct the appropriate agencies or persons to submit 24 25 periodic reports to the court regarding the defendant's compliance with the conditions of the release and progress in 26 27 treatment, with copies to all parties. 28 (2) If at any time it appears that the defendant has 29 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 19. Section 916.175, Florida Statutes, reads: 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 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 20. Section 916.178, Florida Statutes, is amended to read:

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:
- Any intoxicating beverage or beverage 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. Other 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 shall be 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 s. 916.106(7)(6).
- (c) Whoever violates any provision of subparagraph (1)(a)2. or subparagraph (1)(a)3. is guilty of a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.

Section 21. Section 916.19, Florida Statutes, reads: 916.19 Duties, functions, and powers of institutional security personnel.—In case of emergency, and when necessary to provide protection and security to any patient, to the personnel, equipment, buildings, or grounds of a department facility, or to citizens in the surrounding community, institutional security personnel may, when authorized by the administrator of the facility or her or his designee when the administrator is not present, use a chemical weapon against a

patient housed in a forensic facility. However, such weapon shall be used only to the extent necessary to provide such protection and security. Under no circumstances shall any such officer carry a chemical weapon on her or his person except during the period of the emergency for which its use was authorized. All chemical weapons shall be placed in secure storage when their use is not authorized as provided in this section.

Section 22. Section 916.20, Florida Statutes, reads: 916.20 Operation and administration; rules.--

- (1) The department is authorized to promulgate rules, enter into contracts, and do such things as may be necessary and incidental to assure compliance with and to carry out the provisions of this chapter in accordance with the stated legislative intent.
- (2) Rules of the department shall be adopted in accordance with the provisions of chapter 120, the Administrative Procedure Act.

Section 23. Rules 3.210, 3.211, 3.212, 3.213, 3.214, 3.215, 3.216, 3.217, 3.218, and 3.219, Florida Rules of Criminal Procedure, are hereby repealed to the extent that they are inconsistent with the provisions of this act.

Section 24. If any provisions of this act or the application thereof to any person or circumstance is held invalid, the invalidity shall not affect other provisions or applications of the act which can be given effect without the invalid provision or application, and to this end the provisions of this act are declared severable.

Section 25. This act shall take effect October 1 of the year in which enacted, except that section 23 shall take

effect only if this act is passed by the affirmative vote of two-thirds of the membership of each house of the Legislature. HOUSE SUMMARY Creates the "Insanity Defense Reform Act." Provides for determination whether a defendant is mentally ill, dangerously mentally ill, or fit to stand trial. Provides for placement of defendants determined to be mentally ill in the custody of the Department of Children and Family Services until they are fit to stand trial. Provides for placement of defendants determined to be dangerously mentally ill with the Department of Corrections until such time as they may be fit to stand trial. Permits dismissal of charges under specified circumstances when a defendant is still not fit to stand trial after a significant period of time. Provides that the defendant's mental state during the commission of a crime may not be considered for certain prosecution purposes, but may be considered in deciding whether to incorporate treatment as part of the sentence. See bill for details for details.