1 A bill to be entitled 2 An act relating to integrated children's crisis 3 stabilization unit/juvenile addictions 4 receiving facility services; creating s. 5 394.499, F.S.; authorizing the Department of 6 Children and Family Services, in consultation 7 with the Agency for Health Care Administration, 8 to establish children's behavioral crisis unit demonstration models to provide integrated 9 emergency mental health and substance abuse 10 services to persons under 18 years of age at 11 facilities licensed as children's crisis 12 stabilization units; providing for standards, 13 14 procedures, and requirements for services; 15 providing eligibility criteria; requiring the department to report on the initial 16 demonstration models; providing for expanding 17 18 the demonstration models; providing for 19 independent evaluation and report; providing 20 rulemaking authority; amending s. 394.66, F.S.; 21 providing legislative intent relating to the 22 accreditation and cost-efficiency of substance 23 abuse and mental health service providers; creating s. 394.741, F.S., relating to 24 25 accreditation requirements for providers of 26 behavioral health care services; defining the term "behavioral health care services"; 27 28 requiring the accreditation of certain entities 29 to be accepted in lieu of licensure, 30 administrative, and program monitoring requirements; authorizing the adoption of 31

1 rules; requiring that the Department of 2 Children and Family Services and the Agency for 3 Health Care Administration be allowed access to 4 all accreditation reports, corrective action 5 plans, and performance data submitted to 6 accrediting organizations; authorizing followup 7 monitoring by the department and the agency if major deficiencies are identified through the 8 9 accreditation process; preserving the right of the department and agency to perform 10 inspections, including contract monitoring; 11 12 requiring the department and the agency to report to the Legislature on the viability of 13 14 mandating accreditation and privatizing 15 licensure and monitoring functions; specifying that the accreditation requirements of s. 16 17 394.741, F.S., apply to contracted 18 organizations that are already accredited; 19 amending s. 394.90, F.S., relating to substance abuse and mental health services; revising 20 21 provisions relating to licensure, accreditation, and inspection of facilities, to 22 23 conform; providing a cross reference; amending s. 397.411, F.S., relating to substance abuse 24 service providers; revising provisions relating 25 26 to licensure, accreditation, and inspection of 27 facilities, to conform; providing a cross reference; amending ss. 397.403; revising the 28 29 name of the Commission on Accreditation of Rehabilitation Facilities; providing an 30 effective date. 31

Be It Enacted by the Legislature of the State of Florida: 2 3 Section 1. Section 394.499, Florida Statutes, is 4 created to read: 5 394.499 Integrated children's crisis stabilization 6 unit/juvenile addictions receiving facility services.--7 (1) Beginning July 1, 2001, the Department of Children 8 and Family Services, in consultation with the Agency for Health Care Administration, is authorized to establish 9 children's behavioral crisis unit demonstration models in 10 Collier, Lee, and Sarasota Counties. By December 31, 2003, the 11 12 department shall submit to the President of the Senate, the 13 Speaker of the House of Representatives, and the chairs of the 14 Senate and House committees that oversee departmental 15 activities a report that evaluates the number of clients served, quality of services, performance outcomes, and 16 17 feasibility of continuing or expanding the demonstration models. Beginning July 1, 2004, subject to approval by the 18 19 Legislature, the department, in cooperation with the agency, 20 may expand the demonstration models to other areas in the 21 state. The children's behavioral crisis unit demonstration models will integrate children's mental health crisis 22 stabilization units with substance abuse juvenile addictions 23 receiving facility services, to provide emergency mental 24 25 health and substance abuse services that are integrated within facilities licensed and designated by the agency for children 26 under 18 years of age who meet criteria for admission or 27 28 examination under this section. The services shall be 29 designated as "integrated children's crisis stabilization unit/juvenile addictions receiving facility services, " shall 30 be licensed by the agency as children's crisis stabilization 31

units, and shall meet all licensure requirements for crisis stabilization units. The department, in cooperation with the agency, shall develop standards that address eligibility criteria, clinical procedures, staffing requirements, operational, administrative, and financing requirements, and investigation of complaints for such integrated facility services. Standards that are implemented specific to substance abuse services shall meet or exceed existing standards for addictions receiving facilities.

- (2) Children eligible to receive integrated children's crisis stabilization unit/juvenile addictions receiving facility services include:
- (a) A person under 18 years of age for whom voluntary application is made by his or her guardian, if such person is found to show evidence of mental illness and to be suitable for treatment pursuant to s. 394.4625. A person under 18 years of age may be admitted for integrated facility services only after a hearing to verify that the consent to admission is voluntary.
- (b) A person under 18 years of age who may be taken to a receiving facility for involuntary examination, if there is reason to believe that he or she is mentally ill and because of his or her mental illness, pursuant to s. 394.463:
- 1. Has refused voluntary examination after conscientious explanation and disclosure of the purpose of the examination; or
- 2. Is unable to determine for himself or herself whether examination is necessary; and
- a. Without care or treatment is likely to suffer from neglect or refuse to care for himself or herself; such neglect or refusal poses a real and present threat of substantial harm

to his or her well-being; and it is not apparent that such
harm may be avoided through the help of willing family members
or friends or the provision of other services; or
b. There is a substantial likelihood that without care

- b. There is a substantial likelihood that without care or treatment he or she will cause serious bodily harm to himself or herself or others in the near future, as evidenced by recent behavior.
- (c) A person under 18 years of age who wishes to enter treatment for substance abuse and applies to a service provider for voluntary admission, pursuant to s. 397.601.
- (d) A person under 18 years of age who meets the criteria for involuntary admission because there is good faith reason to believe the person is substance abuse impaired pursuant to s. 397.675 and, because of such impairment:
- 1. Has lost the power of self-control with respect to substance use; and
- 2.a. Has inflicted, or threatened or attempted to inflict, or unless admitted is likely to inflict, physical harm on himself or herself or another; or
- b. Is in need of substance abuse services and, by reason of substance abuse impairment, his or her judgment has been so impaired that the person is incapable of appreciating his or her need for such services and of making a rational decision in regard thereto; however, mere refusal to receive such services does not constitute evidence of lack of judgment with respect to his or her need for such services.
- (e) A person under 18 years of age who meets the criteria for examination or admission under paragraph (b) or paragraph (d) and has a coexisting mental health and substance abuse disorder.

| 1 | (3) The department shall contract for an independent |
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| 2 | evaluation of the children's behavioral crisis unit |
| 3 | demonstration models to identify the most effective ways to |
| 4 | provide integrated crisis stabilization unit/juvenile |
| 5 | addiction receiving facility services to children. The |
| 6 | evaluation shall be reported to the Legislature by December |
| 7 | <u>31, 2003.</u> |
| 8 | (4) The department, in cooperation with the agency, is |
| 9 | authorized to adopt rules regarding standards and procedures |
| LO | for integrated children's crisis stabilization unit/juvenile |
| L1 | addictions receiving facility services. |
| L2 | Section 2. Nothing in this act shall be construed to |
| L3 | require an existing crisis stabilization unit or juvenile |
| L4 | addictions receiving facility to convert to a children's |
| L5 | behavioral crisis unit. |
| L6 | Section 3. Subsections (13) and (14) are added to |
| L7 | section 394.66, Florida Statutes, to read: |
| L8 | 394.66 Legislative intent with respect to substance |
| L9 | abuse and mental health servicesIt is the intent of the |
| 20 | Legislature to: |
| 21 | (13) Promote best practices and the highest quality of |
| 22 | care in contracted alcohol, drug abuse, and mental health |
| 23 | services through achievement of national accreditation. |
| 24 | (14) Ensure that the state agencies licensing and |
| 25 | monitoring contracted providers perform in the most |
| 26 | cost-efficient and effective manner with limited duplication |
| 27 | and disruption to organizations providing services. |
| 28 | Section 4. Section 394.741, Florida Statutes, is |
| 29 | created to read: |
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behavioral health care services.--

- (1) As used in this section, the term "behavioral health care services" means mental health and substance abuse treatment services.
- (2) Notwithstanding any provision of law to the contrary, accreditation shall be accepted by the agency and department in lieu of the agency's and department's facility licensure on-site review requirements and shall be accepted as a substitute for the department's administrative and program monitoring requirements, except as required by subsections (3) and (4):
- (a) Any organization from which the department purchases behavioral health care services that is accredited by the Joint Commission on Accreditation of Healthcare Organizations or the Council on Accreditation for Children and Family Services, or have those services that are being purchased by the department accredited by CARF--the Rehabilitation Accreditation Commission.
- (b) Any mental health facility licensed by the agency or any substance abuse component licensed by the department that is accredited by the Joint Commission on Accreditation of Healthcare Organizations, CARF--the Rehabilitation

 Accreditation Commission or the Council on Accreditation of Children and Family Services.
- or the agency purchase behavioral health care services
 accredited by the Joint Commission on Accreditation of
 Healthcare Organizations, CARF--the Rehabilitation
 Accreditation Commission, the Council on Accreditation of
 Children and Family Services, or the National Committee for
 Quality Assurance. A provider organization, which is part of

an accredited network, is afforded the same rights under this part.

- (3) For mental health services, the department and the agency may adopt rules that establish:
- (a) Additional standards for monitoring and licensing accredited programs and facilities that the department and the agency have determined are not specifically and distinctly covered by the accreditation standards and processes. These standards and the associated monitoring must not duplicate the standards and processes already covered by the accrediting bodies.
- (b) An on-site monitoring process between 24 months and 36 months after accreditation for non-residential facilities to assure that accredited organizations exempt from licensing and monitoring activities under this part continue to comply with critical standards.
- (c) An on-site monitoring process between 12 months and 24 months after accreditation for residential facilities to assure that accredited organizations exempt from licensing and monitoring activities under this part continue to comply with critical standards.
- (4) For substance abuse services, the department shall conduct full licensure inspections every three years and shall develop in rule criteria which would justify more frequent inspections.
- (5) The department and the agency shall be given access to all accreditation reports, corrective action plans, and performance data submitted to the accrediting organizations. When major deficiencies, as defined by the accrediting organization, are identified through the accreditation process, the department and the agency may

perform followup monitoring to assure that such deficiencies are corrected and that the corrections are sustained over time. Proof of compliance with fire and health safety standards will be submitted as required by rule.

- (6) The department or agency, by accepting the survey or inspection of an accrediting organization, does not forfeit its rights to perform inspections at any time, including contract monitoring to ensure that deliverables are provided in accordance with the contract.
- (7) The department and the agency shall report to the Legislature by January 1, 2003 on the viability of mandating all organizations under contract with the department for the provision of behavioral healthcare services, or licensed by the agency or department to be accredited. The department and the agency shall also report to the Legislature by January 1, 2003 on the viability of privatizing all licensure and monitoring functions through an accrediting organization.
- (8) The accreditation requirements of this section shall apply to contracted organizations that are already accredited immediately upon becoming law.

Section 5. Subsection (5) of section 394.90, Florida Statutes, is amended to read:

394.90 Inspection; right of entry; records.--

(5)(a) The agency shall may accept, in lieu of its own inspections for licensure, the survey or inspection of an accrediting organization, if the provider is accredited according to the provisions of s. 394.741 and the agency receives the report of the accrediting organization. The department, in consultation with the agency, shall develop, and adopt by rule, specific criteria for assuring that the accrediting organization has specific standards and experience

related to the program area being licensed, specific criteria for accepting the standards and survey methodologies of an accrediting organization, delineations of the obligations of accrediting organizations to assure adherence to those standards, criteria for receiving, accepting and maintaining the confidentiality of the survey and corrective action reports, and allowance for the agency's participation in surveys.

(b) The agency shall conduct compliance investigations and sample validation inspections to evaluate the inspection process of accrediting organizations to ensure minimum standards are maintained as provided in Florida statute and rule. The agency may conduct a lifesafety inspection in calendar years in which an accrediting organization survey is not conducted and shall conduct a full state inspection, including a lifesafety inspection, if an accrediting organization survey has not been conducted within the previous 36 months. The agency, by accepting the survey or inspection of an accrediting organization, does not forfeit its right to perform inspections.

Section 6. Subsection (3) of section 397.403, Florida Statutes, is amended to read:

397.403 License application. --

(3) The department shall accept proof of accreditation by <u>CARF--</u>the <u>Rehabilitation Accreditation</u> Commission on Accreditation of Rehabilitation Facilities (CARF) or the Joint Commission on Accreditation of Health Care Organizations (JCAHCO), or through any other nationally recognized certification process that is acceptable to the department and meets the minimum licensure requirements under this chapter,

in lieu of requiring the applicant to submit the information required by paragraphs (1)(a)-(c).

Section 7. Subsection (2) of section 397.411, Florida Statutes, is amended to read:

397.411 Inspection; right of entry; records.--

(2)(a) The department shall may accept, in lieu of its own inspections for licensure, the survey or inspection of an accrediting organization, if the provider is accredited according to the provisions of s. 394.741 and the department receives the report of the accrediting organization. The department shall develop, and adopt by rule, specific criteria for assuring that the accrediting organization has specific standards and experience related to the program area being licensed; specific criteria for accepting the standards and survey methodologies of an accrediting organization; delineations of the obligations of accrediting organizations to assure adherence to those standards; criteria for receiving, accepting, and maintaining the confidentiality of the survey and corrective action reports; and allowance for the department's participation in surveys.

(b) The department shall conduct compliance investigations and sample validation inspections to evaluate the inspection process of accrediting organizations to ensure minimum standards are maintained as provided in Florida statute and rule. The department may conduct a fire, safety, and health inspection in calendar years in which an accrediting organization survey is not conducted and shall conduct a full state inspection, including a lifesafety inspection, if an accrediting organization survey has not been conducted within the previous 36 months. The department, by accepting the survey or inspection of an accrediting

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organization, does not forfeit its right to perform
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    inspections.
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           Section 8. This act shall take effect upon becoming a
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    law.
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CODING: Words stricken are deletions; words underlined are additions.