

By Senator Lynn

7-80-06

1 A bill to be entitled
2 An act relating to drug court programs;
3 amending s. 39.001, F.S.; providing additional
4 legislative purposes and intent with respect to
5 the treatment of substance abuse, including the
6 use of the drug court program model;
7 authorizing the court to require certain
8 persons to undergo treatment following
9 adjudication; providing that the court is not
10 precluded from ordering drug testing; amending
11 s. 39.407, F.S.; authorizing the court to order
12 specified persons to submit to a substance
13 abuse assessment upon a showing of good cause
14 in connection with a shelter petition or
15 petition for dependency; amending ss. 39.507
16 and 39.521, F.S.; authorizing the court to
17 order specified persons to submit to a
18 substance abuse assessment as part of an
19 adjudicatory order or under a disposition
20 hearing; requiring a showing of good cause;
21 authorizing the court to require participation
22 in a treatment-based drug court program;
23 authorizing the court to impose sanctions for
24 noncompliance; amending s. 39.5085, F.S.,
25 relating to the Relative Caregiver Program;
26 conforming a cross-reference; amending s.
27 39.701, F.S.; authorizing the court to extend
28 the time for completing a case plan during
29 judicial review, based upon participation in a
30 treatment-based drug court program; amending s.
31 397.334, F.S.; revising legislative intent with

1 respect to treatment-based drug court programs
2 to reflect participation by community support
3 agencies, the Department of Education, and
4 other individuals; including postadjudicatory
5 programs as part of treatment-based drug court
6 programs; providing requirements and sanctions,
7 including clinical placement or incarceration,
8 for the coordinated strategy developed by the
9 drug court team to encourage participant
10 compliance; requiring each judicial circuit to
11 establish a position for a coordinator of the
12 treatment-based drug court program, subject to
13 annual appropriation by the Legislature;
14 authorizing the chief judge of each judicial
15 circuit to appoint an advisory committee for
16 the treatment-based drug court program;
17 providing for membership of the committee;
18 revising provisions with respect to an annual
19 report; amending s. 910.035, F.S.; revising
20 provisions with respect to conditions for the
21 transfer of a case in the drug court treatment
22 program to a county other than that in which
23 the charge arose; amending ss. 948.08, 948.16,
24 and 985.306, F.S., relating to felony,
25 misdemeanor, and delinquency pretrial substance
26 abuse education and treatment intervention
27 programs; providing requirements and sanctions,
28 including clinical placement or incarceration,
29 for the coordinated strategy developed by the
30 drug court team to encourage participant
31 compliance and removing provisions authorizing

1 the appointment of an advisory committee, to
2 conform to changes made by the act; providing
3 an effective date.
4

5 Be It Enacted by the Legislature of the State of Florida:
6

7 Section 1. Subsection (4) of section 39.001, Florida
8 Statutes, is amended to read:

9 39.001 Purposes and intent; personnel standards and
10 screening.--

11 (4) SUBSTANCE ABUSE SERVICES.--

12 (a) The Legislature recognizes that early referral and
13 comprehensive treatment can help combat substance abuse in
14 families and that treatment is cost-effective.

15 (b) The Legislature establishes the following goals
16 for the state relating to substance abuse treatment services
17 in the dependency system:

18 1. To ensure the safety of children.

19 2. To prevent and remediate the consequences of
20 substance abuse on families involved in protective supervision
21 or foster care and reduce substance abuse, including alcohol
22 abuse, for families who are at risk of being involved in
23 protective supervision or foster care.

24 3. To expedite permanency for children and reunify
25 healthy, intact families, when appropriate.

26 4. To support families in recovery.

27 (c) The Legislature finds that children in the care of
28 the state's dependency system need appropriate health care
29 services, that the impact of substance abuse on health
30 indicates the need for health care services to include
31 substance abuse services to children and parents where

1 appropriate, and that it is in the state's best interest that
2 ~~the such~~ children be provided the services they need to enable
3 them to become and remain independent of state care. In order
4 to provide these services, the state's dependency system must
5 have the ability to identify and provide appropriate
6 intervention and treatment for children with personal or
7 family-related substance abuse problems.

8 (d) It is the intent of the Legislature to encourage
9 the use of the drug court program model established by s.
10 397.334, and authorize courts to assess parents and children
11 where good cause is shown to identify and address substance
12 abuse problems as the court considers appropriate at every
13 stage of the dependency process. Participation in treatment,
14 including a treatment-based drug court program, may be
15 required by the court following adjudication. Participation in
16 assessment and treatment before adjudication is voluntary,
17 except as provided in s. 39.407(16).

18 (e) It is therefore the purpose of the Legislature to
19 provide authority for the state to contract with community
20 substance abuse treatment providers for the development and
21 operation of specialized support and overlay services for the
22 dependency system, which will be fully implemented and used
23 ~~utilized~~ as resources permit.

24 (f) Participation in the treatment-based drug court
25 program does not divest any public or private agency of its
26 responsibility for a child or adult but is intended to enable
27 these agencies to better meet their needs through shared
28 responsibility and resources.

29 Section 2. Section 39.407, Florida Statutes, is
30 amended to read:
31

1 39.407 Medical, psychiatric, and psychological
2 examination and treatment of child; physical, ~~or~~ mental, or
3 substance-abuse examination of a ~~parent or~~ person having or
4 requesting custody of child.--

5 (1) When any child is removed from the home and
6 maintained in an out-of-home placement, the department is
7 authorized to have a medical screening performed on the child
8 without authorization from the court and without consent from
9 a parent or legal custodian. ~~The~~ Such medical screening shall
10 be performed by a licensed health care professional and shall
11 be to examine the child for injury, illness, and communicable
12 diseases and to determine the need for immunization. The
13 department shall by rule establish the invasiveness of the
14 medical procedures authorized to be performed under this
15 subsection. ~~In no case does~~ This subsection does not authorize
16 the department to consent to medical treatment for these ~~such~~
17 children.

18 (2) When the department has performed the medical
19 screening authorized by subsection (1), or when it is
20 otherwise determined by a licensed health care professional
21 that a child who is in an out-of-home placement, but who has
22 not been committed to the department, is in need of medical
23 treatment, including the need for immunization, consent for
24 medical treatment shall be obtained in the following manner:

25 (a)1. Consent to medical treatment shall be obtained
26 from a parent or legal custodian of the child; or

27 2. A court order for ~~such~~ treatment shall be obtained.

28 (b) If a parent or legal custodian of the child is
29 unavailable and his or her whereabouts cannot be reasonably
30 ascertained, and it is after normal working hours so that a
31 court order cannot reasonably be obtained, an authorized agent

1 of the department ~~may shall have the authority to~~ consent to
2 necessary medical treatment, including immunization, for the
3 child. The authority of the department to consent to medical
4 treatment in this circumstance ~~is shall~~ be limited to the time
5 reasonably necessary to obtain court authorization.

6 (c) If a parent or legal custodian of the child is
7 available but refuses to consent to the necessary treatment,
8 including immunization, a court order ~~is shall be~~ required
9 unless the situation meets the definition of an emergency in
10 s. 743.064 or the treatment needed is related to suspected
11 abuse, abandonment, or neglect of the child by a parent,
12 caregiver, or legal custodian. In such case, the department
13 ~~may shall have the authority to~~ consent to necessary medical
14 treatment. This authority is limited to the time reasonably
15 necessary to obtain court authorization.

16
17 In no case shall the department consent to sterilization,
18 abortion, or termination of life support.

19 (3)(a)1. Except as otherwise provided in subparagraph
20 (b)1. or paragraph (e), before the department provides
21 psychotropic medications to a child in its custody, the
22 prescribing physician shall attempt to obtain express and
23 informed consent, as defined in s. 394.455(9) and as described
24 in s. 394.459(3)(a), from the child's parent or legal
25 guardian. The department must take steps necessary to
26 facilitate the inclusion of the parent in the child's
27 consultation with the physician. However, if the parental
28 rights of the parent have been terminated, the parent's
29 location or identity is unknown or cannot reasonably be
30 ascertained, or the parent declines to give express and
31 informed consent, the department may, after consultation with

1 | the prescribing physician, seek court authorization to provide
2 | the psychotropic medications to the child. Unless parental
3 | rights have been terminated and if it is possible to do so,
4 | the department shall continue to involve the parent in the
5 | decisionmaking process regarding the provision of psychotropic
6 | medications. If, at any time, a parent whose parental rights
7 | have not been terminated provides express and informed consent
8 | to the provision of a psychotropic medication, the
9 | requirements of this section that the department seek court
10 | authorization do not apply to that medication until such time
11 | as the parent no longer consents.

12 | 2. Any time the department seeks a medical evaluation
13 | to determine the need to initiate or continue a psychotropic
14 | medication for a child, the department must provide to the
15 | evaluating physician all pertinent medical information known
16 | to the department concerning that child.

17 | (b)1. If a child who is removed from the home under s.
18 | 39.401 is receiving prescribed psychotropic medication at the
19 | time of removal and parental authorization to continue
20 | providing the medication cannot be obtained, the department
21 | may take possession of the remaining medication and may
22 | continue to provide the medication as prescribed until the
23 | shelter hearing, if it is determined that the medication is a
24 | current prescription for that child and the medication is in
25 | its original container.

26 | 2. If the department continues to provide the
27 | psychotropic medication to a child when parental authorization
28 | cannot be obtained, the department shall notify the parent or
29 | legal guardian as soon as possible that the medication is
30 | being provided to the child as provided in subparagraph 1. The
31 | child's official departmental record must include the reason

1 | parental authorization was not initially obtained and an
2 | explanation of why the medication is necessary for the child's
3 | well-being.

4 | 3. If the department is advised by a physician
5 | licensed under chapter 458 or chapter 459 that the child
6 | should continue the psychotropic medication and parental
7 | authorization has not been obtained, the department shall
8 | request court authorization at the shelter hearing to continue
9 | to provide the psychotropic medication and shall provide to
10 | the court any information in its possession in support of the
11 | request. Any authorization granted at the shelter hearing may
12 | extend only until the arraignment hearing on the petition for
13 | adjudication of dependency or 28 days following the date of
14 | removal, whichever occurs sooner.

15 | 4. Before filing the dependency petition, the
16 | department shall ensure that the child is evaluated by a
17 | physician licensed under chapter 458 or chapter 459 to
18 | determine whether it is appropriate to continue the
19 | psychotropic medication. If, as a result of the evaluation,
20 | the department seeks court authorization to continue the
21 | psychotropic medication, a motion for ~~such~~ continued
22 | authorization shall be filed at the same time as the
23 | dependency petition, within 21 days after the shelter hearing.

24 | (c) Except as provided in paragraphs (b) and (e), the
25 | department must file a motion seeking the court's
26 | authorization to initially provide or continue to provide
27 | psychotropic medication to a child in its legal custody. The
28 | motion must be supported by a written report prepared by the
29 | department which describes the efforts made to enable the
30 | prescribing physician to obtain express and informed consent
31 | for providing the medication to the child and other treatments

1 | considered or recommended for the child. In addition, the
2 | motion must be supported by the prescribing physician's signed
3 | medical report providing:

4 | 1. The name of the child, the name and range of the
5 | dosage of the psychotropic medication, and that there is a
6 | need to prescribe psychotropic medication to the child based
7 | upon a diagnosed condition for which the ~~such~~ medication is
8 | being prescribed.

9 | 2. A statement indicating that the physician has
10 | reviewed all medical information concerning the child which
11 | has been provided.

12 | 3. A statement indicating that the psychotropic
13 | medication, at its prescribed dosage, is appropriate for
14 | treating the child's diagnosed medical condition, as well as
15 | the behaviors and symptoms the medication, at its prescribed
16 | dosage, is expected to address.

17 | 4. An explanation of the nature and purpose of the
18 | treatment; the recognized side effects, risks, and
19 | contraindications of the medication; drug-interaction
20 | precautions; the possible effects of stopping the medication;
21 | and how the treatment will be monitored, followed by a
22 | statement indicating that this explanation was provided to the
23 | child if age appropriate and to the child's caregiver.

24 | 5. Documentation addressing whether the psychotropic
25 | medication will replace or supplement any other currently
26 | prescribed medications or treatments; the length of time the
27 | child is expected to be taking the medication; and any
28 | additional medical, mental health, behavioral, counseling, or
29 | other services that the prescribing physician recommends.

30 | (d)1. The department must notify all parties of the
31 | proposed action taken under paragraph (c) in writing or by

1 | whatever other method best ensures that all parties receive
2 | notification of the proposed action within 48 hours after the
3 | motion is filed. If any party objects to the department's
4 | motion, that party shall file the objection within 2 working
5 | days after being notified of the department's motion. If any
6 | party files an objection to the authorization of the proposed
7 | psychotropic medication, the court shall hold a hearing as
8 | soon as possible before authorizing the department to
9 | initially provide or to continue providing psychotropic
10 | medication to a child in the legal custody of the department.
11 | At the ~~such~~ hearing and notwithstanding s. 90.803, the medical
12 | report described in paragraph (c) is admissible in evidence.
13 | The prescribing physician need not attend the hearing or
14 | testify unless the court specifically orders such attendance
15 | or testimony, or a party subpoenas the physician to attend the
16 | hearing or provide testimony. If, after considering any
17 | testimony received, the court finds that the department's
18 | motion and the physician's medical report meet the
19 | requirements of this subsection and that it is in the child's
20 | best interests, the court may order that the department
21 | provide or continue to provide the psychotropic medication to
22 | the child without additional testimony or evidence. At any
23 | hearing held under this paragraph, the court shall further
24 | inquire of the department as to whether additional medical,
25 | mental health, behavioral, counseling, or other services are
26 | being provided to the child by the department which the
27 | prescribing physician considers to be necessary or beneficial
28 | in treating the child's medical condition and which the
29 | physician recommends or expects to provide to the child in
30 | concert with the medication. The court may order additional
31 | medical consultation, including consultation with the

1 MedConsult line at the University of Florida, if available, or
2 require the department to obtain a second opinion within a
3 reasonable timeframe as established by the court, not to
4 exceed 21 calendar days, after the ~~such~~ order based upon
5 consideration of the best interests of the child. The
6 department must make a referral for an appointment for a
7 second opinion with a physician within 1 working day. The
8 court may not order the discontinuation of prescribed
9 psychotropic medication if the ~~such~~ order is contrary to the
10 decision of the prescribing physician unless the court first
11 obtains an opinion from a licensed psychiatrist, if available,
12 or, if not available, a physician licensed under chapter 458
13 or chapter 459, stating that more likely than not,
14 discontinuing the medication would not cause significant harm
15 to the child. If, however, the prescribing psychiatrist
16 specializes in mental health care for children and
17 adolescents, the court may not order the discontinuation of
18 prescribed psychotropic medication unless the required opinion
19 is also from a psychiatrist who specializes in mental health
20 care for children and adolescents. The court may also order
21 the discontinuation of prescribed psychotropic medication if a
22 child's treating physician, licensed under chapter 458 or
23 chapter 459, states that continuing the prescribed
24 psychotropic medication would cause significant harm to the
25 child due to a diagnosed nonpsychiatric medical condition.

26 2. The burden of proof at any hearing held under this
27 paragraph shall be by a preponderance of the evidence.

28 (e)1. If the child's prescribing physician certifies
29 in the signed medical report required in paragraph (c) that
30 delay in providing a prescribed psychotropic medication would
31 more likely than not cause significant harm to the child, the

1 medication may be provided in advance of the issuance of a
2 court order. In this ~~such~~ event, the medical report must
3 provide the specific reasons why the child may experience
4 significant harm and the nature and the extent of the
5 potential harm. The department must submit a motion seeking
6 continuation of the medication and the physician's medical
7 report to the court, the child's guardian ad litem, and all
8 other parties within 3 working days after the department
9 commences providing the medication to the child. The
10 department shall seek the order at the next regularly
11 scheduled court hearing required under this chapter, or within
12 30 days after the date of the prescription, whichever occurs
13 sooner. If any party objects to the department's motion, the
14 court shall hold a hearing within 7 days.

15 2. Psychotropic medications may be administered in
16 advance of a court order in hospitals, crisis stabilization
17 units, and in statewide inpatient psychiatric programs. Within
18 3 working days after the medication is begun, the department
19 must seek court authorization as described in paragraph (c).

20 (f)1. The department shall fully inform the court of
21 the child's medical and behavioral status as part of the
22 social services report prepared for each judicial review
23 hearing held for a child for whom psychotropic medication has
24 been prescribed or provided under this subsection. As a part
25 of the information provided to the court, the department shall
26 furnish copies of all pertinent medical records concerning the
27 child which have been generated since the previous hearing. On
28 its own motion or on good cause shown by any party, including
29 any guardian ad litem, attorney, or attorney ad litem who has
30 been appointed to represent the child or the child's
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1 interests, the court may review the status more frequently
2 than required in this subsection.

3 2. The court may, in the best interests of the child,
4 order the department to obtain a medical opinion addressing
5 whether the continued use of the medication under the
6 circumstances is safe and medically appropriate.

7 (g) The department shall adopt rules to ensure that
8 children receive timely access to clinically appropriate
9 psychotropic medications. These rules must include, but need
10 not be limited to, the process for determining which
11 adjunctive services are needed, the uniform process for
12 facilitating the prescribing physician's ability to obtain the
13 express and informed consent of a child's parent or guardian,
14 the procedures for obtaining court authorization for the
15 provision of a psychotropic medication, the frequency of
16 medical monitoring and reporting on the status of the child to
17 the court, how the child's parents will be involved in the
18 treatment-planning process if their parental rights have not
19 been terminated, and how caretakers are to be provided
20 information contained in the physician's signed medical
21 report. The rules must also include uniform forms to be used
22 in requesting court authorization for the use of a
23 psychotropic medication and provide for the integration of
24 each child's treatment plan and case plan. The department must
25 begin the formal rulemaking process within 90 days after the
26 effective date of this act.

27 (4)(a) A judge may order a child in an out-of-home
28 placement to be examined by a licensed health care
29 professional.

30 (b) The judge may also order the ~~such~~ child to be
31 evaluated by a psychiatrist or a psychologist or, if a

1 developmental disability is suspected or alleged, by the
2 developmental disability diagnostic and evaluation team of the
3 department. If it is necessary to place a child in a
4 residential facility for ~~such~~ evaluation, the criteria and
5 procedure established in s. 394.463(2) or chapter 393 shall be
6 used, whichever is applicable.

7 (c) The judge may also order a ~~such~~ child to be
8 evaluated by a district school board educational needs
9 assessment team. The educational needs assessment provided by
10 the district school board educational needs assessment team
11 shall include, but not be limited to, reports of intelligence
12 and achievement tests, screening for learning disabilities and
13 other handicaps, and screening for the need for alternative
14 education as defined in s. 1001.42.

15 (5) A judge may order a child in an out-of-home
16 placement to be treated by a licensed health care professional
17 based on evidence that the child should receive treatment.
18 The judge may also order the ~~such~~ child to receive mental
19 health or developmental disabilities services from a
20 psychiatrist, psychologist, or other appropriate service
21 provider. Except as provided in subsection (6), if it is
22 necessary to place the child in a residential facility for
23 ~~such~~ services, the procedures and criteria established in s.
24 394.467 or chapter 393 shall be used, whichever is applicable.
25 A child may be provided developmental disabilities or mental
26 health services in emergency situations, pursuant to the
27 procedures and criteria contained in s. 394.463(1) or chapter
28 393, whichever is applicable.

29 (6) Children who are in the legal custody of the
30 department may be placed by the department, without prior
31 approval of the court, in a residential treatment center

1 licensed under s. 394.875 or a hospital licensed under chapter
2 395 for residential mental health treatment only pursuant to
3 this section or may be placed by the court in accordance with
4 an order of involuntary examination or involuntary placement
5 entered under ~~pursuant to~~ s. 394.463 or s. 394.467. All
6 children placed in a residential treatment program under this
7 subsection must have a guardian ad litem appointed.

8 (a) As used in this subsection, the term:

9 1. "Residential treatment" means placement for
10 observation, diagnosis, or treatment of an emotional
11 disturbance in a residential treatment center licensed under
12 s. 394.875 or a hospital licensed under chapter 395.

13 2. "Least restrictive alternative" means the treatment
14 and conditions of treatment that, separately and in
15 combination, are no more intrusive or restrictive of freedom
16 than reasonably necessary to achieve a substantial therapeutic
17 benefit or to protect the child or adolescent or others from
18 physical injury.

19 3. "Suitable for residential treatment" or
20 "suitability" means a determination concerning a child or
21 adolescent with an emotional disturbance as defined in s.
22 394.492(5) or a serious emotional disturbance as defined in s.
23 394.492(6) that each of the following criteria is met:

24 a. The child requires residential treatment.

25 b. The child is in need of a residential treatment
26 program and is expected to benefit from mental health
27 treatment.

28 c. An appropriate, less restrictive alternative to
29 residential treatment is unavailable.

30 (b) Whenever the department believes that a child in
31 its legal custody is emotionally disturbed and may need

1 residential treatment, an examination and suitability
2 assessment must be conducted by a qualified evaluator who is
3 appointed by the Agency for Health Care Administration. This
4 suitability assessment must be completed before the placement
5 of the child in a residential treatment center for emotionally
6 disturbed children and adolescents or a hospital. The
7 qualified evaluator must be a psychiatrist or a psychologist
8 licensed in Florida who has at least 3 years of experience in
9 the diagnosis and treatment of serious emotional disturbances
10 in children and adolescents and who has no actual or perceived
11 conflict of interest with any inpatient facility or
12 residential treatment center or program.

13 (c) Before a child is admitted under this subsection,
14 the child shall be assessed for suitability for residential
15 treatment by a qualified evaluator who has conducted a
16 personal examination and assessment of the child and has made
17 written findings that:

18 1. The child appears to have an emotional disturbance
19 serious enough to require residential treatment and is
20 reasonably likely to benefit from the treatment.

21 2. The child has been provided with a clinically
22 appropriate explanation of the nature and purpose of the
23 treatment.

24 3. All available modalities of treatment less
25 restrictive than residential treatment have been considered,
26 and a less restrictive alternative that would offer comparable
27 benefits to the child is unavailable.

28
29 A copy of the written findings of the evaluation and
30 suitability assessment must be provided to the department and
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1 to the guardian ad litem, who shall have the opportunity to
2 discuss the findings with the evaluator.

3 (d) Immediately upon placing a child in a residential
4 treatment program under this section, the department must
5 notify the guardian ad litem and the court having jurisdiction
6 over the child and must provide the guardian ad litem and the
7 court with a copy of the assessment by the qualified
8 evaluator.

9 (e) Within 10 days after the admission of a child to a
10 residential treatment program, the director of the residential
11 treatment program or the director's designee must ensure that
12 an individualized plan of treatment has been prepared by the
13 program and has been explained to the child, to the
14 department, and to the guardian ad litem, and submitted to the
15 department. The child must be involved in the preparation of
16 the plan to the maximum feasible extent consistent with his or
17 her ability to understand and participate, and the guardian ad
18 litem and the child's foster parents must be involved to the
19 maximum extent consistent with the child's treatment needs.
20 The plan must include a preliminary plan for residential
21 treatment and aftercare upon completion of residential
22 treatment. The plan must include specific behavioral and
23 emotional goals against which the success of the residential
24 treatment may be measured. A copy of the plan must be provided
25 to the child, to the guardian ad litem, and to the department.

26 (f) Within 30 days after admission, the residential
27 treatment program must review the appropriateness and
28 suitability of the child's placement in the program. The
29 residential treatment program must determine whether the child
30 is receiving benefit toward the treatment goals and whether
31 the child could be treated in a less restrictive treatment

1 program. The residential treatment program shall prepare a
2 written report of its findings and submit the report to the
3 guardian ad litem and to the department. The department must
4 submit the report to the court. The report must include a
5 discharge plan for the child. The residential treatment
6 program must continue to evaluate the child's treatment
7 progress every 30 days thereafter and must include its
8 findings in a written report submitted to the department. The
9 department may not reimburse a facility until the facility has
10 submitted every written report that is due.

11 (g)1. The department must submit, at the beginning of
12 each month, to the court having jurisdiction over the child, a
13 written report regarding the child's progress toward achieving
14 the goals specified in the individualized plan of treatment.

15 2. The court must conduct a hearing to review the
16 status of the child's residential treatment plan no later than
17 3 months after the child's admission to the residential
18 treatment program. An independent review of the child's
19 progress toward achieving the goals and objectives of the
20 treatment plan must be completed by a qualified evaluator and
21 submitted to the court before its 3-month review.

22 3. For any child in residential treatment at the time
23 a judicial review is held under ~~pursuant to~~ s. 39.701, the
24 child's continued placement in residential treatment must be a
25 subject of the judicial review.

26 4. If at any time the court determines that the child
27 is not suitable for continued residential treatment, the court
28 shall order the department to place the child in the least
29 restrictive setting that is best suited to meet his or her
30 needs.

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1 (h) After the initial 3-month review, the court must
2 conduct a review of the child's residential treatment plan
3 every 90 days.

4 (i) The department must adopt rules for implementing
5 timeframes for the completion of suitability assessments by
6 qualified evaluators and a procedure that includes timeframes
7 for completing the 3-month independent review by the qualified
8 evaluators of the child's progress toward achieving the goals
9 and objectives of the treatment plan which review must be
10 submitted to the court. The Agency for Health Care
11 Administration must adopt rules for the registration of
12 qualified evaluators, the procedure for selecting the
13 evaluators to conduct the reviews required under this section,
14 and a reasonable, cost-efficient fee schedule for qualified
15 evaluators.

16 (7) When a child is in an out-of-home placement, a
17 licensed health care professional shall be immediately called
18 if there are indications of physical injury or illness, or the
19 child shall be taken to the nearest available hospital for
20 emergency care.

21 (8) Except as otherwise provided in this section
22 ~~herein, nothing in this section does not shall be deemed to~~
23 eliminate the right of a parent, legal custodian, or the child
24 to consent to examination or treatment for the child.

25 (9) Except as otherwise provided in this section
26 ~~herein, nothing in this section does not shall be deemed to~~
27 alter the provisions of s. 743.064.

28 (10) A court ~~is shall~~ not ~~be~~ precluded from ordering
29 services or treatment to be provided to the child by a duly
30 accredited practitioner who relies solely on spiritual means
31 for healing in accordance with the tenets and practices of a

1 church or religious organization, when required by the child's
2 health and when requested by the child.

3 (11) ~~Nothing in~~ This section does not ~~shall be~~
4 ~~construed to~~ authorize the permanent sterilization of the
5 child unless the ~~such~~ sterilization is the result of or
6 incidental to medically necessary treatment to protect or
7 preserve the life of the child.

8 (12) For the purpose of obtaining an evaluation or
9 examination, or receiving treatment as authorized under
10 ~~pursuant to~~ this section, a ~~no~~ child alleged to be or found to
11 be dependent may not ~~shall~~ be placed in a detention home or
12 other program used primarily for the care and custody of
13 children alleged or found to have committed delinquent acts.

14 (13) The parents or legal custodian of a child in an
15 out-of-home placement remain financially responsible for the
16 cost of medical treatment provided to the child even if either
17 one or both of the parents or if the legal custodian did not
18 consent to the medical treatment. After a hearing, the court
19 may order the parents or legal custodian, if found able to do
20 so, to reimburse the department or other provider of medical
21 services for treatment provided.

22 (14) ~~Nothing in~~ This section does not alter ~~alters~~ the
23 authority of the department to consent to medical treatment
24 for a dependent child when the child has been committed to the
25 department and the department has become the legal custodian
26 of the child.

27 (15) At any time after the filing of a shelter
28 petition or petition for dependency, when the mental or
29 physical condition, including the blood group, of a parent,
30 caregiver, legal custodian, or other person requesting custody
31 of a child is in controversy, the court may order the person

1 to submit to a physical or mental examination by a qualified
2 professional. The order may be made only upon good cause
3 shown and pursuant to notice and procedures as set forth by
4 the Florida Rules of Juvenile Procedure.

5 (16) At any time after a shelter petition or petition
6 for dependency is filed, the court may order a child or a
7 person who has custody or is requesting custody of the child
8 to submit to a substance abuse assessment and evaluation. The
9 assessment or evaluation must be administered by a qualified
10 professional, as defined in s. 397.311. The order may be made
11 only upon good cause shown. This section does not authorize
12 placing the child with a person seeking custody, other than
13 the parent or legal custodian, who requires substance abuse
14 treatment.

15 Section 3. Subsection (9) is added to section 39.507,
16 Florida Statutes, to read:

17 39.507 Adjudicatory hearings; orders of
18 adjudication.--

19 (9) After an adjudication of dependency, or a finding
20 of dependency when adjudication is withheld, the court may
21 order a child or a person who has custody or is requesting
22 custody of the child to submit to a substance abuse assessment
23 or evaluation. The assessment or evaluation must be
24 administered by a qualified professional, as defined in s.
25 397.311. The court may also require the person to participate
26 in and comply with treatment and services identified as
27 necessary, including, when appropriate and available,
28 participation in and compliance with a treatment-based drug
29 court program established under s. 397.334. In addition to
30 supervision by the department, the court, including the
31 treatment-based drug court program, may oversee the progress

1 and compliance with treatment by the child or a person who has
2 custody or is requesting custody of the child. The court may
3 impose appropriate available sanctions for noncompliance upon
4 the child or a person who has custody or is requesting custody
5 of the child or make a finding of noncompliance for
6 consideration when determining whether an alternative
7 placement of the child is in the child's best interests. Any
8 order entered under this subsection may be made only upon good
9 cause shown. This section does not authorize placing the child
10 with a person seeking custody, other than the parent or legal
11 custodian, who requires substance abuse treatment.

12 Section 4. Paragraph (b) of subsection (1) of section
13 39.521, Florida Statutes, is amended to read:

14 39.521 Disposition hearings; powers of disposition.--

15 (1) A disposition hearing shall be conducted by the
16 court, if the court finds that the facts alleged in the
17 petition for dependency were proven in the adjudicatory
18 hearing, or if the parents or legal custodians have consented
19 to the finding of dependency or admitted the allegations in
20 the petition, have failed to appear for the arraignment
21 hearing after proper notice, or have not been located despite
22 a diligent search having been conducted.

23 (b) When any child is adjudicated by a court to be
24 dependent, the court having jurisdiction of the child has the
25 power by order to:

26 1. Require the parent and, when appropriate, the legal
27 custodian and the child, to participate in treatment and
28 services identified as necessary.

29 2. Require, if the court deems necessary, the parties
30 to participate in dependency mediation.

31

1 3. Require the child or person who has custody or who
2 is requesting custody of the child to submit to a substance
3 abuse assessment or evaluation. The assessment or evaluation
4 must be administered by a qualified professional, as defined
5 in s. 397.311. The court may also require the person to
6 participate in and comply with treatment and services
7 identified as necessary, including, when appropriate and
8 available, participation in and compliance with a
9 treatment-based drug court program established under s.
10 397.334. In addition to supervision by the department, the
11 court, including the treatment-based drug court program, may
12 oversee the progress and compliance with treatment by the
13 child or a person who has custody or is requesting custody of
14 the child. The court may impose appropriate available
15 sanctions for noncompliance upon the child or a person who has
16 custody or is requesting custody of the child, or may make a
17 finding of noncompliance for consideration when determining
18 whether an alternative placement of the child is in the best
19 interests of the child. Any order entered under this
20 subsection may be made only upon good cause shown. This
21 section does not authorize placing the child with a person
22 seeking custody, other than the parent or legal custodian, who
23 requires substance abuse treatment.

24 ~~4.3-~~ Require placement of the child either under the
25 protective supervision of an authorized agent of the
26 department in the home of one or both of the child's parents
27 or in the home of a relative of the child or another adult
28 approved by the court, or in the custody of the department.
29 Protective supervision continues until the court terminates it
30 or until the child reaches the age of 18, whichever date is
31 first. Protective supervision shall be terminated by the court

1 whenever the court determines that permanency has been
2 achieved for the child, whether with a parent, another
3 relative, or a legal custodian, and that protective
4 supervision is no longer needed. The termination of
5 supervision may be with or without retaining jurisdiction, at
6 the court's discretion, and shall in either case be considered
7 a permanency option for the child. The order terminating
8 supervision by the department shall set forth the powers of
9 the custodian of the child and shall include the powers
10 ordinarily granted to a guardian of the person of a minor
11 unless otherwise specified. Upon the court's termination of
12 supervision by the department, no further judicial reviews are
13 required, so long as permanency has been established for the
14 child.

15 Section 5. Paragraph (a) of subsection (2) of section
16 39.5085, Florida Statutes, is amended to read:

17 39.5085 Relative Caregiver Program.--

18 (2)(a) The Department of Children and Family Services
19 shall establish and operate the Relative Caregiver Program
20 pursuant to eligibility guidelines established in this section
21 as further implemented by rule of the department. The Relative
22 Caregiver Program shall, within the limits of available
23 funding, provide financial assistance to:

24 1. Relatives who are within the fifth degree by blood
25 or marriage to the parent or stepparent of a child and who are
26 caring full-time for that dependent child in the role of
27 substitute parent as a result of a court's determination of
28 child abuse, neglect, or abandonment and subsequent placement
29 with the relative pursuant to this chapter.

30 2. Relatives who are within the fifth degree by blood
31 or marriage to the parent or stepparent of a child and who are

1 caring full-time for that dependent child, and a dependent
2 half-brother or half-sister of that dependent child, in the
3 role of substitute parent as a result of a court's
4 determination of child abuse, neglect, or abandonment and
5 subsequent placement with the relative pursuant to this
6 chapter.

7
8 Such placement may be either court-ordered temporary legal
9 custody to the relative under protective supervision of the
10 department pursuant to s. 39.521(1)(b)4. ~~s. 39.521(1)(b)3.~~, or
11 court-ordered placement in the home of a relative as a
12 permanency option pursuant to s. 39.622. The Relative
13 Caregiver Program shall offer financial assistance to
14 caregivers who are relatives and who would be unable to serve
15 in that capacity without the relative caregiver payment
16 because of financial burden, thus exposing the child to the
17 trauma of placement in a shelter or in foster care.

18 Section 6. Paragraph (d) of subsection (9) of section
19 39.701, Florida Statutes, is amended to read:

20 39.701 Judicial review.--

21 (9)

22 (d) The court may extend the time limitation of the
23 case plan, or may modify the terms of the plan, which, in
24 addition to other modifications, may include a requirement
25 that the parent, or legal custodian participate in a
26 treatment-based drug court program established under s.
27 397.334 based upon information provided by the social service
28 agency, and the guardian ad litem, if one has been appointed,
29 the parent or parents, and the foster parents or legal
30 custodian, and any other competent information on record
31 demonstrating the need for the amendment. If the court extends

1 | the time limitation of the case plan, the court must make
2 | specific findings concerning the frequency of past
3 | parent-child visitation, if any, and the court may authorize
4 | the expansion or restriction of future visitation.
5 | Modifications to the plan must be handled as prescribed in s.
6 | 39.601. Any extension of a case plan must comply with the time
7 | requirements and other requirements specified by this chapter.

8 | Section 7. Section 397.334, Florida Statutes, is
9 | amended to read:

10 | 397.334 Treatment-based drug court programs.--

11 | (1) Each county may fund a treatment-based drug court
12 | program under which persons in the justice system assessed
13 | with a substance abuse problem will be processed in such a
14 | manner as to appropriately address the severity of the
15 | identified substance abuse problem through treatment services
16 | ~~plans~~ tailored to the individual needs of the participant. It
17 | is the intent of the Legislature to encourage the Department
18 | of Corrections, the Department of Children and Family
19 | Services, the Department of Juvenile Justice, the Department
20 | of Health, the Department of Law Enforcement, the Department
21 | of Education, and such other agencies, local governments, law
22 | enforcement agencies, ~~and~~ other interested public or private
23 | sources, and individuals to support the creation and
24 | establishment of these problem-solving court programs.
25 | Participation in the treatment-based drug court programs does
26 | not divest any public or private agency of its responsibility
27 | for a child or adult, but enables ~~allows~~ these agencies to
28 | better meet their needs through shared responsibility and
29 | resources.

30 | (2) Entry into a pretrial treatment-based drug court
31 | program is voluntary. The court may order an individual to

1 enter into a pretrial treatment-based drug court program only
2 upon written agreement by the individual, which must include
3 an acknowledgement that the individual understands the
4 requirements of the program and the potential sanctions for
5 failing to comply with them.

6 ~~(3)~~(2) The treatment-based drug court programs shall
7 include therapeutic jurisprudence principles and adhere to the
8 following 10 key components, recognized by the Drug Courts
9 Program Office of the Office of Justice Programs of the United
10 States Department of Justice and adopted by the Florida
11 Supreme Court Treatment-Based Drug Court Steering Committee:

12 (a) Drug court programs integrate alcohol and other
13 drug treatment services with justice system case processing.

14 (b) Using a nonadversarial approach, prosecution and
15 defense counsel promote public safety while protecting
16 participants' due process rights.

17 (c) Eligible participants are identified early and
18 promptly placed in the drug court program.

19 (d) Drug court programs provide access to a continuum
20 of alcohol, drug, and other related treatment and
21 rehabilitation services.

22 (e) Abstinence is monitored by frequent testing for
23 alcohol and other drugs.

24 (f) A coordinated strategy governs drug court program
25 responses to participants' compliance.

26 (g) Ongoing judicial interaction with each drug court
27 program participant is essential.

28 (h) Monitoring and evaluation measure the achievement
29 of program goals and gauge program effectiveness.

30
31

1 (i) Continuing interdisciplinary education promotes
2 effective drug court program planning, implementation, and
3 operations.

4 (j) Forging partnerships among drug court programs,
5 public agencies, and community-based organizations generates
6 local support and enhances drug court program effectiveness.

7 ~~(4)(3)~~ Treatment-based drug court programs may include
8 pretrial intervention programs as provided in ss. 948.08,
9 948.16, and 985.306, treatment-based drug court programs
10 authorized in chapter 39, postadjudicatory programs, and the
11 monitoring of sentenced offenders through a treatment-based
12 drug court program. While enrolled in a treatment-based drug
13 court program, the participant is subject to a coordinated
14 strategy developed by the drug court team under paragraph
15 (3)(f). Each coordinated strategy must include a protocol of
16 sanctions that may be imposed on the participant. The protocol
17 of sanctions must include as available options placement in a
18 secure licensed clinical or jail-based treatment program or
19 -serving a period of incarceration for noncompliance with the
20 program rules within the time limits established for contempt
21 of court. The coordinated strategy must be given to the
22 participant, in writing, before the participant agrees to
23 enter into a pretrial treatment-based drug court program.

24 (5) Contingent upon an annual appropriation by the
25 Legislature, each judicial circuit shall establish, at a
26 minimum, one coordinator position for the treatment-based drug
27 court program within the state courts system to coordinate the
28 responsibilities of the participating agencies and service
29 providers. Each coordinator shall provide direct support to
30 the treatment-based drug court program by providing
31 coordination between the multidisciplinary team and the

1 judiciary, providing case management, monitoring compliance of
2 the participants in the treatment-based drug court program
3 with court requirements, and providing program evaluation and
4 accountability.

5 ~~(6)(4)~~(a) The Florida Association of Drug Court
6 ~~Program~~ Professionals is created. The membership of the
7 association may consist of treatment-based drug court program
8 practitioners who comprise the multidisciplinary
9 treatment-based drug court ~~program~~ team, including, but not
10 limited to, judges, state attorneys, defense counsel, drug
11 court ~~program~~ coordinators, probation officers, law
12 enforcement officers, community representatives members of the
13 academic community, and treatment professionals. Membership in
14 the association shall be voluntary.

15 (b) The association shall annually elect a chair whose
16 duty is to solicit recommendations from members on issues
17 relating to the expansion, operation, and institutionalization
18 of treatment-based drug court programs. The chair is
19 responsible for providing on or before October 1 of each year
20 the association's recommendations and an annual report to the
21 appropriate Supreme Court ~~Treatment Based Drug Court Steering~~
22 committee or to the appropriate personnel of the Office of the
23 State Courts Administrator, ~~and shall submit a report each~~
24 ~~year, on or before October 1, to the steering committee.~~

25 ~~(7)(5)~~ If a county chooses to fund a treatment-based
26 drug court program, the county must secure funding from
27 sources other than the state for those costs not otherwise
28 assumed by the state under ~~pursuant to~~ s. 29.004. However,
29 this does not preclude counties from using treatment and other
30 service dollars provided through state executive branch
31

1 agencies. Counties may provide, by interlocal agreement, for
2 the collective funding of these programs.

3 (8) The chief judge of each judicial circuit may
4 appoint an advisory committee for the treatment-based drug
5 court program. The committee shall include the chief judge, or
6 his or her designee, who shall serve as chair of the
7 committee, the judge of the treatment-based drug court
8 program, if not otherwise designated by the chief judge as his
9 or her designee, the state attorney, or his or her designee,
10 the public defender, or his or her designee, the
11 treatment-based drug court program coordinator, community
12 representatives, treatment representatives, and any other
13 persons the chair finds are appropriate.

14 Section 8. Paragraphs (b) and (e) of subsection (5) of
15 section 910.035, Florida Statutes, are amended to read:

16 910.035 Transfer from county for plea and sentence.--

17 (5) Any person eligible for participation in a drug
18 court treatment program pursuant to s. 948.08(6) may be
19 eligible to have the case transferred to a county other than
20 that in which the charge arose if the drug court program
21 agrees and if the following conditions are met:

22 (b) If approval for transfer is received from all
23 parties, the trial court shall accept a plea of nolo
24 contendere and enter a transfer order directing the clerk to
25 transfer the case to the county which has accepted the
26 defendant into its drug court program.

27 (e) Upon successful completion of the drug court
28 program, the jurisdiction to which the case has been
29 transferred shall dispose of the case under ~~pursuant to~~ s.
30 948.08(6). If the defendant does not complete the drug court
31 program successfully, the jurisdiction to which the case has

1 been transferred shall dispose of the case within the
2 guidelines of the Criminal Punishment Code ~~case shall be~~
3 ~~prosecuted as determined by the state attorneys of the sending~~
4 ~~and receiving counties.~~

5 Section 9. Subsections (6), (7), and (8) of section
6 948.08, Florida Statutes, are amended to read:

7 948.08 Pretrial intervention program.--

8 (6)(a) Notwithstanding any provision of this section,
9 a person who is charged with a felony of the second or third
10 degree for purchase or possession of a controlled substance
11 under chapter 893, prostitution, tampering with evidence,
12 solicitation for purchase of a controlled substance, or
13 obtaining a prescription by fraud; who has not been charged
14 with a crime involving violence, including, but not limited
15 to, murder, sexual battery, robbery, carjacking, home-invasion
16 robbery, or any other crime involving violence; and who has
17 not previously been convicted of a felony nor been admitted to
18 a felony pretrial program referred to in this section is
19 eligible for voluntary admission into a pretrial substance
20 abuse education and treatment intervention program, including
21 a treatment-based drug court program established under s.

22 397.334, approved by the chief judge of the circuit, for a
23 period of not less than 1 year in duration, upon motion of
24 either party or the court's own motion, except:

25 1. If a defendant was previously offered admission to
26 a pretrial substance abuse education and treatment
27 intervention program at any time before ~~prior to~~ trial and the
28 defendant rejected that offer on the record, then the court or
29 the state attorney may deny the defendant's admission to the
30 ~~such a~~ program.

1 2. If the state attorney believes that the facts and
2 circumstances of the case suggest the defendant's involvement
3 in the dealing and selling of controlled substances, the court
4 shall hold a preadmission hearing. If the state attorney
5 establishes, by a preponderance of the evidence at the such
6 hearing, that the defendant was involved in the dealing or
7 selling of controlled substances, the court shall deny the
8 defendant's admission into a pretrial intervention program.

9 **(b)** While enrolled in a pretrial intervention program
10 authorized by this section, the participant is subject to a
11 coordinated strategy developed by a drug court team under s.
12 397.334(3). The coordinated strategy must include a protocol
13 of sanctions that may be imposed upon the participant. The
14 protocol of sanctions must include as available options
15 placement in a secure licensed clinical or jail-based
16 treatment program or serving a period of incarceration for
17 noncompliance with program rules within the time limits
18 established for contempt of court. The coordinated strategy
19 must be given to the participant, in writing, before the
20 participant agrees to enter a pretrial treatment-based drug
21 court program, or other pretrial intervention program.

22 **(c)**~~(b)~~ At the end of the pretrial intervention period,
23 the court shall consider the recommendation of the
24 administrator under ~~pursuant to~~ subsection (5) and the
25 recommendation of the state attorney as to disposition of the
26 pending charges. The court shall determine, by written
27 finding, whether the defendant has successfully completed the
28 pretrial intervention program.

29 **(e)**~~1.~~ If the court finds that the defendant has not
30 successfully completed the pretrial intervention program, the
31 court may order the person to continue in education and

1 treatment or order that the charges revert to normal channels
2 for prosecution.

3 ~~2.~~ The court shall dismiss the charges upon a finding
4 that the defendant has successfully completed the pretrial
5 intervention program.

6 (d) Any entity, whether public or private, providing a
7 pretrial substance abuse education and treatment intervention
8 program under this subsection must contract with the county or
9 appropriate governmental entity, and the terms of the contract
10 must include, but need not be limited to, the requirements
11 established for private entities under s. 948.15(3).

12 ~~(7) The chief judge in each circuit may appoint an~~
13 ~~advisory committee for the pretrial intervention program~~
14 ~~composed of the chief judge or his or her designee, who shall~~
15 ~~serve as chair; the state attorney, the public defender, and~~
16 ~~the program administrator, or their designees; and such other~~
17 ~~persons as the chair deems appropriate. The advisory committee~~
18 ~~may not designate any defendant eligible for a pretrial~~
19 ~~intervention program for any offense that is not listed under~~
20 ~~paragraph (6)(a) without the state attorney's recommendation~~
21 ~~and approval. The committee may also include persons~~
22 ~~representing any other agencies to which persons released to~~
23 ~~the pretrial intervention program may be referred.~~

24 ~~(7)(8)~~ The department may contract for the services
25 and facilities necessary to operate pretrial intervention
26 programs.

27 Section 10. Section 948.16, Florida Statutes, is
28 amended to read:

29 948.16 Misdemeanor pretrial substance abuse education
30 and treatment intervention program.--

31

1 (1)(a) A person who is charged with a misdemeanor for
2 possession of a controlled substance or drug paraphernalia
3 under chapter 893, and who has not previously been convicted
4 of a felony nor been admitted to a pretrial program, is
5 eligible for voluntary admission into a misdemeanor pretrial
6 substance abuse education and treatment intervention program,
7 including a treatment-based drug court program established
8 under s. 397.334, approved by the chief judge of the circuit,
9 for a period based on the program requirements and the
10 treatment plan for the offender, upon motion of either party
11 or the court's own motion, except, if the state attorney
12 believes the facts and circumstances of the case suggest the
13 defendant is involved in dealing and selling controlled
14 substances, the court shall hold a preadmission hearing. If
15 the state attorney establishes, by a preponderance of the
16 evidence at the ~~such~~ hearing, that the defendant was involved
17 in dealing or selling controlled substances, the court shall
18 deny the defendant's admission into the pretrial intervention
19 program.

20 (b) While enrolled in a pretrial intervention program
21 authorized by this section, the participant is subject to a
22 coordinated strategy developed by a drug court team under s.
23 397.334(3). The coordinated strategy must include a protocol
24 of sanctions which may be imposed upon the participant. The
25 protocol of sanctions must include as available options
26 placement in a secure licensed clinical or jail-based
27 treatment program or serving a period of incarceration for
28 noncompliance with program rules within the time limits
29 established for contempt of court. The coordinated strategy
30 must be given to the participant, in writing, before the
31

1 participant agrees to enter a pretrial treatment-based drug
2 court program, or other pretrial intervention program.

3 (2) At the end of the pretrial intervention period,
4 the court shall consider the recommendation of the treatment
5 program and the recommendation of the state attorney as to
6 disposition of the pending charges. The court shall determine,
7 by written finding, whether the defendant successfully
8 completed the pretrial intervention program.

9 ~~(a)~~ If the court finds that the defendant has not
10 successfully completed the pretrial intervention program, the
11 court may order the person to continue in education and
12 treatment or return the charges to the criminal docket for
13 prosecution.

14 ~~(b)~~ The court shall dismiss the charges upon finding
15 that the defendant has successfully completed the pretrial
16 intervention program.

17 (3) Any public or private entity providing a pretrial
18 substance abuse education and treatment program under this
19 section shall contract with the county or appropriate
20 governmental entity. The terms of the contract shall include,
21 but not be limited to, the requirements established for
22 private entities under s. 948.15(3).

23 Section 11. Section 985.306, Florida Statutes, is
24 amended to read:

25 985.306 Delinquency pretrial intervention program.--

26 (1)~~(a)~~ Notwithstanding any ~~provision of~~ law to the
27 contrary, a child who is charged ~~under chapter 893~~ with a
28 felony of the second or third degree for purchase or
29 possession of a controlled substance, under chapter 893,
30 tampering with evidence, solicitation for purchase of a
31 controlled substance, or obtaining a prescription by fraud,

1 and who has not previously been adjudicated for a felony ~~nor~~
2 ~~been admitted to a delinquency pretrial intervention program~~
3 ~~under this section~~, is eligible for voluntary admission into a
4 delinquency pretrial substance abuse education and treatment
5 intervention program, including a treatment-based drug court
6 program established under s. 397.334 approved by the chief
7 judge or alternative sanctions coordinator of the circuit to
8 the extent that funded programs are available, for a period
9 based on the program requirements and the treatment services
10 that are suitable for the child ~~of not less than 1 year in~~
11 ~~duration~~, upon motion of either party or the court's own
12 motion. If the state attorney believes that the facts and
13 circumstances of the case suggest the child's involvement in
14 the dealing and selling of controlled substances, the court
15 shall hold a preadmission hearing. If the state attorney
16 establishes by a preponderance of the evidence at such hearing
17 that the child was involved in the dealing and selling of
18 controlled substances, the court shall deny the child's
19 admission into a delinquency pretrial intervention program.

20 (2) A child is subject to a coordinated strategy
21 developed by a drug court team under s. 397.334(3) while
22 enrolled in a delinquency pretrial intervention program
23 authorized by this section. The coordinated strategy must
24 include a protocol of sanctions which may be imposed upon the
25 child. The protocol of sanctions must include as available
26 options placement in a secure licensed clinical facility or
27 placement in a secure detention facility under s. 985.216 for
28 noncompliance with program rules. The coordinated strategy
29 must be provided to the child in writing before the child
30 agrees to enter the pretrial treatment-based drug court
31 program or other pretrial intervention program.

1 (3)(b) At the end of the delinquency pretrial
2 intervention period, the court shall consider the
3 recommendation of the state attorney and the program
4 administrator as to disposition of the pending charges. The
5 court shall determine, by written finding, whether the child
6 has successfully completed the delinquency pretrial
7 intervention program.

8 ~~(c)1.~~ If the court finds that the child has not
9 successfully completed the delinquency pretrial intervention
10 program, the court may order the child to continue in an
11 education, treatment, or urine monitoring program if resources
12 and funding are available or order that the charges revert to
13 normal channels for prosecution.

14 ~~2.~~ The court may dismiss the charges upon a finding
15 that the child has successfully completed the delinquency
16 pretrial intervention program.

17 (4)(d) Any entity, whether public or private,
18 providing pretrial substance abuse education, treatment
19 intervention, and a urine monitoring program under this
20 section must contract with the county or appropriate
21 governmental entity, and the terms of the contract must
22 include, but need not be limited to, the requirements
23 established for private entities under s. 948.15(3). It is the
24 intent of the Legislature that public or private entities
25 providing substance abuse education and treatment intervention
26 programs involve the active participation of parents, schools,
27 churches, businesses, law enforcement agencies, and the
28 department or its contract providers.

29 ~~(2) The chief judge in each circuit may appoint an~~
30 ~~advisory committee for the delinquency pretrial intervention~~
31 ~~program composed of the chief judge or designee, who shall~~

1 ~~serve as chair; the state attorney, the public defender, and~~
2 ~~the program administrator, or their designees; and such other~~
3 ~~persons as the chair deems appropriate. The committee may~~
4 ~~also include persons representing any other agencies to which~~
5 ~~children released to the delinquency pretrial intervention~~
6 ~~program may be referred.~~

7 Section 12. This act shall take effect upon becoming a
8 law.

9
10 *****

11 SENATE SUMMARY

12 Revises various provisions of the drug court program.
13 Authorizes a court to require certain persons to undergo
14 substance abuse treatment following adjudication.
15 Authorizes a court to order specified persons to submit
16 to a substance abuse assessment upon a showing of good
17 cause in connection with a shelter hearing, a petition
18 for dependency, an adjudicatory order, or a disposition
19 hearing. Authorizes a court to extend the time for
20 completing a case plan during judicial review, based upon
21 participation in a treatment-based drug court program.
22 Requires each judicial circuit to establish a position
23 for a coordinator of the treatment-based drug court
24 program. Directs the chief judge of each judicial circuit
25 to appoint an advisory committee for the treatment-based
26 drug court program. Revises requirements for transferring
27 a case to a county other than the county in which the
28 charge arose. (See bill for details.)
29
30
31