Florida Senate - 2008

(Reformatted) SB 1104

By Senator Bennett

21-02930-08

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1	A bill to be entitled
2	An act relating to alcohol abuse by an expectant mother;
3	providing a short title; creating the "Fetal Alcohol
4	Syndrome Prevention Act"; providing legislative findings;
5	providing a definition; directing the Department of Health
6	to develop a public education program, including a
7	telephone information hotline, to provide information
8	regarding fetal alcohol spectrum disorders; directing the
9	Department of Health in conjunction with the Department of
10	Children and Family Services to develop and maintain a
11	Fetal Alcohol Spectrum Disorders Prevention Network
12	consisting of service providers and Fetal Alcohol Spectrum
13	Disorders Diagnostic and Intervention Centers; requiring
14	establishment of a system for assessing charges for
15	certain services; requiring the Department of Health, the
16	Department of Children and Family Services, and the
17	Division of Alcoholic Beverages and Tobacco of the
18	Department of Business and Professional Regulation to
19	provide access to certain information on their respective
20	Internet websites; creating s. 397.602, F.S.; providing
21	for the voluntary admission of an expectant mother for
22	alcohol abuse treatment services; providing evaluation
23	procedures; removing disability of minority solely for
24	voluntary admission; providing an exception; amending s.
25	397.675, F.S.; providing criteria for involuntary
26	admission of an expectant mother under certain
27	circumstances; amending s. 397.6772, F.S.; providing that
28	an expectant mother may not be detained in protective
29	custody at any municipal or county jail for purposes of

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30	fetal alcohol spectrum disorders prevention; amending s.
31	397.6791, F.S.; specifying who may request emergency
32	admission; amending s. 397.6793, F.S.; providing criteria
33	for a physician's certificate for emergency admission;
34	amending s. 397.681, F.S.; providing for jurisdiction over
35	petitions for involuntary assessment, stabilization, and
36	treatment; specifying the respondent's right to counsel;
37	amending s. 397.6811, F.S.; specifying who may petition
38	the court for involuntary assessment and stabilization;
39	amending s. 397.6814, F.S.; providing for content of a
40	petition for involuntary assessment and stabilization;
41	amending s. 397.6815, F.S.; providing procedures for
42	disposition of a petition for involuntary assessment and
43	stabilization; amending s. 397.695, F.S.; specifying who
44	may petition the court for involuntary treatment; amending
45	s. 397.6951, F.S.; providing for content of a petition for
46	involuntary treatment; amending s. 397.6955, F.S.;
47	providing procedures for disposition of a petition for
48	involuntary treatment; amending s. 397.6957, F.S.;
49	providing for a hearing on a petition for involuntary
50	treatment of an expectant mother under certain
51	circumstances; assigning the burden of proof in cases of
52	involuntary treatment; amending s. 397.697, F.S.;
53	providing for effect of court order for involuntary
54	treatment; creating s. 562.063, F.S.; requiring described
55	health warning signs to be displayed on the premises of
56	alcoholic beverage vendors; providing penalties; requiring
57	the Division of Alcoholic Beverages and Tobacco of the
58	Department of Business and Professional Regulation to

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59 produce and distribute the signs; providing for a fee and 60 collection of the fee for costs of the signs; reenacting s. 397.6773(1), F.S., relating to dispositional 61 alternatives after protective custody, to incorporate the 62 63 amendment to s. 397.675, F.S., in a reference thereto; 64 directing the Department of Health to establish Fetal 65 Alcohol Spectrum Disorders Diagnostic and Intervention 66 Centers and develop and provide professional training; 67 specifying center locations; providing appropriations; 68 providing effective dates.

WHEREAS, the Centers for Disease Control and Prevention has reported a rise of nearly 27 times in the rate of Fetal Alcohol Syndrome and other fetal alcohol spectrum disorders, resulting in a current rate of 26.8 infants with Fetal Alcohol Syndrome for every 10,000 births, and each of these infants represents a cost to society of more than \$4 million over the course of the infant's lifetime, and

WHEREAS, the estimated annual cost to the state as a result of fetal alcohol spectrum disorders, including the costs to the juvenile justice system and the costs related to special education, is \$432,045,575, and

81 WHEREAS, fetal alcohol spectrum disorders are the leading 82 cause of mental retardation in the United States, and

WHEREAS, the full spectrum of birth defects caused by alcohol, referred to as fetal alcohol spectrum disorders, results in as many as 270 infants with fetal alcohol spectrum disorders for every 10,000 births, and

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WHEREAS, according to the National Institute of Health, only
39 percent of women of childbearing age know about fetal alcohol
spectrum disorders, and

90 WHEREAS, according to the 1996 Report to Congress of the 91 Institute of Medicine, of all the substances of abuse, including 92 heroin, cocaine, and marijuana, alcohol produces by far the most 93 serious neurobehavioral effects in the fetus, resulting in 94 permanent disorders of memory function, impulse control, and 95 judgment, and

96 WHEREAS, there are no health warnings about fetal alcohol 97 spectrum disorders in television commercials and other alcohol 98 advertising that impact the majority of young people and their 99 parents, and

WHEREAS, the Legislature, in recognition of these facts, finds it necessary to require the immediate treatment of pregnant women found to be under the influence of alcohol and to further require the posting of health warning signs about fetal alcohol spectrum disorders on the premises of package alcoholic beverage outlets in the state, NOW, THEREFORE,

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

109Section 1. This act may be cited as the "Fetal Alcohol110Syndrome Prevention Act."

111Section 2. Fetal Alcohol Syndrome and other fetal alcohol112spectrum disorders; legislative findings; definition.--

(1) The Legislature finds that Fetal Alcohol Syndrome and other fetal alcohol spectrum disorders are serious, permanent, and life-altering conditions that substantially and adversely

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116	impact persons born with fetal alcohol spectrum disorders as well
117	as their parents, siblings, and children.
118	(2) The Legislature also finds that Fetal Alcohol Syndrome
119	and other fetal alcohol spectrum disorders are extremely costly
120	conditions when the total amount of medical, psychiatric,
121	respite, and other care is calculated over the course of an
122	affected person's lifetime.
123	(3) The Legislature further finds that fetal alcohol
124	spectrum disorders can be prevented or reduced by taking steps
125	necessary to protect to the greatest extent possible a developing
126	fetus from the detrimental effects of alcohol consumption by an
127	expectant mother.
128	(4) The term "fetal alcohol spectrum disorder" means a
129	continuum of permanent birth defects caused by maternal
130	consumption of alcohol during pregnancy and includes Fetal
131	Alcohol Syndrome.
132	Section 3. Public information on fetal alcohol spectrum
133	disorders; Fetal Alcohol Spectrum Disorders Network
134	(1) The Department of Health is directed to develop a
135	public education program to provide information to the public
136	regarding the detrimental effects of fetal alcohol spectrum
137	disorders. The program shall include the following information:
138	(a) That fetal alcohol spectrum disorders are the leading
139	cause of mental retardation in the United States and Florida.
140	(b) The neurological damage caused by and the symptoms of
141	fetal alcohol spectrum disorders.
142	(c) The permanency of the damage to the brain from fetal
143	alcohol spectrum disorders.

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21-02930-08 20081104 144 (d) The physiological characteristics and defects of fetal 145 alcohol spectrum disorders. 146 (e) The developmental delays resulting from fetal alcohol 147 spectrum disorders. 148 The psychological impact of fetal alcohol spectrum (f) 149 disorders. 150 (a) The lasting effects of fetal alcohol spectrum 151 disorders, which include difficulty maintaining successful 152 independence, sustaining healthy relationships, and maintaining 153 employment and the need for long-term support. 154 The economic impact of fetal alcohol spectrum disorders (h) 155 on the affected person, his or her family, and the citizens of 156 the state. 157 (2) The Department of Health, in conjunction with the 158 Department of Children and Family Services, shall develop, 159 establish, and maintain a Fetal Alcohol Spectrum Disorders 160 Prevention Network, which shall consist of licensed service 161 providers as defined in s. 397.311, Florida Statutes, and Fetal 162 Alcohol Spectrum Disorders Diagnostic and Intervention Centers that have agreed to participate in providing counseling, 163 164 education, and support to pregnant women regarding the effects of 165 prenatal exposure to alcohol. The Department of Health shall also 166 establish a telephone information hotline for persons to call to 167 obtain information regarding fetal alcohol spectrum disorders, 168 local licensed service providers participating in the network, or 169 the nearest Fetal Alcohol Spectrum Disorders Diagnostic and 170 Intervention Center participating in the network. 171 (3) Licensed service providers and Fetal Alcohol Spectrum 172 Disorders Diagnostic and Intervention Centers participating in

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173 the Fetal Alcohol Spectrum Disorders Prevention Network shall 174 establish a system, to be used by providers that receive state 175 funds, for assessing charges for services rendered pursuant to 176 statutorily authorized involuntary or court-ordered services in 177 accordance with a client's ability to pay. 178 (4) The Department of Health, the Department of Children 179 and Family Services, and the Division of Alcoholic Beverages and 180 Tobacco of the Department of Business and Professional Regulation 181 shall provide access to the public information developed pursuant 182 to subsection (1) on their respective Internet websites. Section 4. Section 397.602, Florida Statutes, is created to 183 184 read: 185 397.602 Voluntary admission for fetal alcohol spectrum 186 disorders prevention .--187 (1) An expectant mother who requests an evaluation for the 188 necessity of counseling or treatment services to minimize the 189 risk for alcohol exposure to her unborn child may obtain that 190 evaluation at any licensed service provider or Fetal Alcohol 191 Spectrum Disorders Diagnostic and Intervention Center 192 participating in the Fetal Alcohol Spectrum Disorders Prevention 193 Network. The evaluation of the service provider must recommend 194 the least restrictive course of action, plan, or service 195 reasonably necessary to remove or minimize the risk for alcohol 196 exposure to the unborn child that is appropriate to meet the 197 needs of the expectant mother. 198 (2) (a) The disability of minority for expectant mothers who 199 have not attained 18 years of age is removed solely for the 200 purpose of obtaining voluntary alcohol or substance abuse

201 treatment services from a licensed service provider, and consent

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202 to such services by a minor has the same force and effect as if 203 executed by a client who has reached the age of majority. Such 204 consent is not subject to later disaffirmance based on minority.

(b) Except for purposes of law enforcement activities in
 connection with protective custody, the disability of minority is
 not removed if there is an involuntary admission for alcohol or
 substance abuse treatment services, in which case parental
 participation may be required as the court finds appropriate.

210 Section 5. Section 397.675, Florida Statutes, is amended to 211 read:

212 397.675 Criteria for involuntary admissions, including 213 protective custody, emergency admission, and other involuntary 214 assessment, involuntary treatment, and alternative involuntary 215 assessment for minors, for purposes of assessment and 216 stabilization, and for involuntary treatment.--

217 (1) A person meets the criteria for involuntary admission
 218 if there is good faith reason to believe the person is substance
 219 abuse impaired and, because of such impairment:

220 <u>(a)(1)</u> Has lost the power of self-control with respect to 221 substance use; and either

(b)1.(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

225 <u>2.(b)</u> Is in need of substance abuse services and, by reason 226 of substance abuse impairment, his or her judgment has been so 227 impaired that the person is incapable of appreciating his or her 228 need for such services and of making a rational decision in 229 regard thereto; however, mere refusal to receive such services

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230 does not constitute evidence of lack of judgment with respect to 231 his or her need for such services.

232 (2) (a) A person may also meet the criteria for involuntary 233 admission if the court finds that the person is an expectant 234 mother who, while knowing she is pregnant, has continued to 235 consume alcoholic beverages to such a degree that there is a 236 reasonable possibility that the unborn child, when born, may be 237 diagnosed with a fetal alcohol spectrum disorder unless the 238 expectant mother ceases the consumption of alcoholic beverages 239 and that there is good cause to believe she will continue to 240 consume alcoholic beverages if not involuntarily admitted to a 241 treatment facility. Sections 397.501 and 397.581 apply to persons 242 meeting the criteria for involuntary admission under this 243 subsection. Only licensed service providers, as defined in s. 244 397.311, that have agreed to participate in providing counseling, 245 detoxification, residential treatment, or any other licensable 246 service component listed in s. 397.311(18) to expectant mothers 247 shall be used for purposes of involuntary admission under this 248 subsection.

(b) In determining whether an expectant mother meets the criteria for involuntary admission under paragraph (a), a court may consider the following facts in support of its findings:

252 <u>1. Whether the expectant mother was notified of the effects</u> 253 <u>of fetal alcohol spectrum disorders and was counseled against the</u> 254 <u>consumption of alcoholic beverages.</u>

255 <u>2. Whether, after being warned against the consumption of</u> 256 <u>alcoholic beverages, the expectant mother continued to consume</u> 257 <u>alcoholic beverages.</u>

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21-02930-08 20081104 258 3. Whether the expectant mother has been offered and 259 refused alcohol or substance abuse treatment or, if enrolled in 260 alcohol or substance abuse treatment, failed to make a good faith 261 effort to participate in the treatment program. 262 4. Whether the expectant mother exhibits a lack of self-263 control in the consumption of alcoholic beverages. 264 5. The quantity and frequency of alcoholic beverage 265 consumption by the expectant mother. 266 6. Whether the expectant mother was recommended for alcohol 267 or substance abuse treatment prior to or during her pregnancy by 268 her physician, her spouse, or any relative or friend. 269 7. Expert medical testimony concerning the estimated 270 alcohol-related risk to the health of the unborn child based on 271 the continued consumption of alcoholic beverages by the expectant 272 mother. 273 8. Any other evidence the court considers relevant to 274 determining whether the involuntary admission of the expectant 275 mother is necessary to prevent her from continuing to consume 276 alcoholic beverages and whether, absent such intervention, there 277 exists a reasonable possibility that the unborn child, when born, 278 may be diagnosed with a fetal alcohol spectrum disorder. 279 Section 6. Subsection (1) of section 397.6772, Florida 280 Statutes, is amended to read: 281 397.6772 Protective custody without consent .--2.82 If a person in circumstances which justify protective (1)custody as described in s. 397.677 fails or refuses to consent to 283 assistance and a law enforcement officer has determined that a 284 285 hospital or a licensed detoxification or addictions receiving 286 facility is the most appropriate place for the person, the

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287 officer may, after giving due consideration to the expressed 288 wishes of the person:

(a) Take the person to a hospital or to a licensed
detoxification or addictions receiving facility against the
person's will but without using unreasonable force; or

(b) In the case of an adult, detain the person for his or
her own protection in any municipal or county jail or other
appropriate detention facility, except that an expectant mother
<u>may not be detained at any municipal or county jail for purposes</u>
of fetal alcohol spectrum disorders prevention.

298 Such detention is not to be considered an arrest for any purpose, 299 and no entry or other record may be made to indicate that the 300 person has been detained or charged with any crime. The officer 301 in charge of the detention facility must notify the nearest 302 appropriate licensed service provider within the first 8 hours 303 after detention that the person has been detained. It is the duty 304 of the detention facility to arrange, as necessary, for 305 transportation of the person to an appropriate licensed service 306 provider with an available bed. Persons taken into protective 307 custody must be assessed by the attending physician within the 308 72-hour period and without unnecessary delay, to determine the 309 need for further services.

310 Section 7. Section 397.6791, Florida Statutes, is amended 311 to read:

312 397.6791 Emergency admission; persons who may 313 initiate.--The following persons may request an emergency 314 admission:

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(1) In the case of an adult, the certifying physician, the person's spouse or guardian, any relative of the person, or any other responsible adult who has personal knowledge of the person's substance abuse impairment.

319 In the case of an adult expectant mother consuming (2) 320 alcoholic beverages so as to place her unborn child at risk for a 321 fetal alcohol spectrum disorder, the certifying physician joined 322 by the expectant mother's spouse, parent or guardian, or sibling, 323 provided that the certifying physician and any other person 324 joining in the request sign an affidavit stating that such 325 emergency admission is necessary to avert a substantial alcoholrelated risk to the health of the unborn child and that the 326 327 expectant mother has been offered and has refused alcohol or 328 other substance abuse treatment services.

329 <u>(3)(2)</u> In the case of a minor, <u>including any unemancipated</u> 330 <u>minor who is an expectant mother</u>, the minor's parent, legal 331 guardian, or legal custodian.

332 Section 8. Section 397.6793, Florida Statutes, is amended 333 to read:

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397.6793 Physician's certificate for emergency admission.--

335 (1)The physician's certificate must include the name of 336 the person to be admitted, the relationship between the person 337 and the physician, the relationship between the applicant and the 338 physician, any relationship between the physician and the 339 licensed service provider, and a statement that the person has 340 been examined and assessed within 5 days before of the 341 application date, and must include factual allegations with 342 respect to the need for emergency admission, including:

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343 (a) The reason for the physician's belief that the person344 is substance abuse impaired; and

(b) The reason for the physician's belief that because of such impairment the person has lost the power of self-control with respect to substance abuse; and either

348 (c)1. The reason the physician believes that the person has 349 inflicted or is likely to inflict physical harm on himself or 350 herself or others unless admitted; or

2. The reason the physician believes that the person's refusal to voluntarily receive care is based on judgment so impaired by reason of substance abuse that the person is incapable of appreciating his or her need for care and of making a rational decision regarding his or her need for care.

356 (2) When the emergency admission is for an expectant mother 357 consuming alcoholic beverages so as to place her unborn child at 358 risk for a fetal alcohol spectrum disorder, the physician's 359 certificate must include the name of the person to be admitted, 360 the relationship between the person and the physician, the 361 relationship between the applicant and the physician, any 362 relationship between the physician and the licensed service 363 provider, a statement that the person has been examined and 364 assessed within 5 days before the application date, and a 365 statement of facts based on the expectant mother's consumption of 366 alcoholic beverages that indicates the need for emergency 367 admission to avert or reduce a substantial alcohol-related risk 368 to the health of the unborn child, that the expectant mother has 369 been counseled against the consumption of alcoholic beverages 370 during pregnancy, and that she has been offered and has refused 371 alcohol or other substance abuse treatment services.

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372 <u>(3)(2)</u> The physician's certificate must recommend the least 373 restrictive type of service that is appropriate for the person. 374 The certificate must be signed by the physician.

375 <u>(4)(3)</u> A signed copy of the physician's certificate shall 376 accompany the person, and shall be made a part of the person's 377 clinical record, together with a signed copy of the application. 378 The application and physician's certificate authorize the 379 involuntary admission of the person pursuant to, and subject to 380 the provisions of ss. 397.679-397.6797.

381 <u>(5)(4)</u> The physician's certificate must indicate whether 382 the person requires transportation assistance for delivery for 383 emergency admission and specify, pursuant to s. 397.6795, the 384 type of transportation assistance necessary.

385 Section 9. Section 397.681, Florida Statutes, is amended to 386 read:

387 397.681 Involuntary petitions; general provisions; court 388 jurisdiction and right to counsel.--

389 JURISDICTION. -- The courts have jurisdiction of (1)390 involuntary assessment and stabilization petitions and 391 involuntary treatment petitions for substance abuse impaired 392 persons_{τ} and for expectant mothers consuming alcoholic beverages 393 so as to place their unborn children at risk for fetal alcohol 394 spectrum disorders. such Petitions must be filed with the clerk 395 of the court in the county where the person is located. The chief 396 judge may appoint a general or special magistrate to preside over 397 all or part of the proceedings. The alleged impaired person is 398 named as the respondent.

399 (2) RIGHT TO COUNSEL.--A respondent has the right to400 counsel at every stage of a proceeding relating to a petition for

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401 his or her involuntary assessment and a petition for his or her 402 involuntary treatment authorized in this chapter for substance 403 abuse impairment. A respondent who desires counsel and is unable 404 to afford private counsel has the right to court-appointed counsel and to the benefits of s. 57.081. If the court believes 405 406 that the respondent needs the assistance of counsel, the court 407 shall appoint such counsel for the respondent without regard to 408 the respondent's wishes. If the respondent is a minor not 409 otherwise represented in the proceeding, the court shall 410 immediately appoint a guardian ad litem to act on the minor's 411 behalf.

412 Section 10. Section 397.6811, Florida Statutes, is amended 413 to read:

414 397.6811 Involuntary assessment and stabilization.--A 415 person determined by the court to appear to meet the criteria for 416 involuntary admission under s. 397.675 may be admitted for a 417 period of 5 days to a hospital or to a licensed detoxification 418 facility or addictions receiving facility, for involuntary 419 assessment and stabilization or to a less restrictive component 420 of a licensed service provider for assessment only upon entry of 421 a court order or upon receipt by the licensed service provider of 422 a petition. Involuntary assessment and stabilization may be 423 initiated by the submission of a petition to the court.

(1) If the person upon whose behalf the petition is being filed is an adult, a petition for involuntary assessment and stabilization may be filed by the respondent's spouse or guardian, any relative, a private practitioner, the director of a licensed service provider or the director's designee, or any three adults who have personal knowledge of the respondent's

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substance abuse impairment. <u>If the person upon whose behalf the</u>
<u>petition is being filed is an adult expectant mother consuming</u>
<u>alcoholic beverages so as to place her unborn child at risk for a</u>
<u>fetal alcohol spectrum disorder, a petition for involuntary</u>
<u>assessment and stabilization may be filed by the respondent's</u>
<u>spouse, parent or guardian, or sibling and joined by a physician.</u>

(2) If the person upon whose behalf the petition is being
filed is a minor, <u>including any unemancipated minor who is an</u>
<u>expectant mother</u>, a petition for involuntary assessment and
stabilization may be filed by a parent, legal guardian, legal
custodian, or licensed service provider.

441 Section 11. Section 397.6814, Florida Statutes, is amended 442 to read:

443 397.6814 Involuntary assessment and stabilization; contents 444 of petition.--

(1) A petition for involuntary assessment and stabilization must contain the name of the respondent; the name of the applicant or applicants; the relationship between the respondent and the applicant; the name of the respondent's attorney, if known, and a statement of the respondent's ability to afford an attorney; and must state facts to support the need for involuntary assessment and stabilization, including:

452 <u>(a)(1)</u> The reason for the petitioner's belief that the 453 respondent is substance abuse impaired; and

454 <u>(b)(2)</u> The reason for the petitioner's belief that because 455 of such impairment the respondent has lost the power of self-456 control with respect to substance abuse; and either

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457 (c)1.(3)(a) The reason the petitioner believes that the 458 respondent has inflicted or is likely to inflict physical harm on 459 himself or herself or others unless admitted; or

460 <u>2.(b)</u> The reason the petitioner believes that the 461 respondent's refusal to voluntarily receive care is based on 462 judgment so impaired by reason of substance abuse that the 463 respondent is incapable of appreciating his or her need for care 464 and of making a rational decision regarding that need for care. 465 If the respondent has refused to submit to an assessment, such 466 refusal must be alleged in the petition.

467 (2) When a petition for involuntary assessment and 468 stabilization is for an expectant mother consuming alcoholic 469 beverages so as to place her unborn child at risk for a fetal 470 alcohol spectrum disorder, the petition must contain the name of the person to be assessed, the relationship between the person 471 472 and the physician, the relationship between the applicant and the 473 physician, any relationship between the physician and the 474 licensed service provider, and a statement of facts based on the 475 expectant mother's consumption of alcoholic beverages that 476 indicates the need for involuntary assessment and stabilization 477 to avert or reduce a substantial alcohol-related risk to the 478 health of her unborn child, that the expectant mother has been 479 counseled against the consumption of alcoholic beverages during 480 pregnancy, and that she has been offered and has refused alcohol 481 or other substance abuse treatment services.

482 Section 12. Section 397.6815, Florida Statutes, is amended 483 to read:

397.6815 Involuntary assessment and stabilization;
procedure.--Upon receipt and filing by the clerk of the court of

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the petition for the involuntary assessment and stabilization of a substance abuse impaired person <u>or an expectant mother</u> consuming alcoholic beverages so as to place her unborn child at risk for a fetal alcohol spectrum disorder by the clerk of the court, the court shall ascertain whether the respondent is represented by an attorney, and if not, whether, on the basis of the petition, an attorney should be appointed; and shall:

493 (1)Provide a copy of the petition and notice of hearing to 494 the respondent; the respondent's parent, guardian, or legal 495 custodian, in the case of a minor; the respondent's attorney, if 496 known; the petitioner; the respondent's spouse or quardian, if 497 applicable; and such other persons as the court may direct, and 498 have such petition and notice personally delivered to the 499 respondent if he or she is a minor. The court shall also issue a 500 summons to the person whose admission is sought and conduct a 501 hearing within 10 days; or

(2) Without the appointment of an attorney and, relying solely on the contents of the petition, enter an ex parte order authorizing the involuntary assessment and stabilization of the respondent. The court may order a law enforcement officer or other designated agent of the court to take the respondent into custody and deliver him or her to the nearest appropriate licensed service provider.

509 Section 13. Section 397.695, Florida Statutes, is amended 510 to read:

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397.695 Involuntary treatment; persons who may petition .--

(1) If the respondent is an adult, a petition for
involuntary treatment may be filed by the respondent's spouse or
guardian, any relative, a service provider, or any three adults

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515 who have personal knowledge of the respondent's substance abuse 516 impairment and his or her prior course of assessment and 517 treatment. If the respondent on whose behalf the petition is being filed is an adult expectant mother consuming alcoholic 518 519 beverages so as to place her unborn child at risk for a fetal 520 alcohol spectrum disorder, a petition for involuntary treatment 521 may be filed by the respondent's spouse, parent or guardian, or 522 sibling and joined by a physician. 523 If the respondent is a minor, including any (2) 524 unemancipated minor who is an expectant mother, a petition for 525 involuntary treatment may be filed by a parent, legal guardian, 526 or service provider. 527 Section 14. Section 397.6951, Florida Statutes, is amended to read: 528 529 397.6951 Contents of petition for involuntary treatment.--530 (1) A petition for involuntary treatment must contain the 531 name of the respondent to be admitted; the name of the petitioner 532 or petitioners; the relationship between the respondent and the petitioner; the name of the respondent's attorney, if known, and 533 534 a statement of the petitioner's knowledge of the respondent's 535 ability to afford an attorney; the findings and recommendations 536 of the assessment performed by the qualified professional; and 537 the factual allegations presented by the petitioner establishing 538 the need for involuntary treatment, including: 539 (a) (1) The reason for the petitioner's belief that the

540 respondent is substance abuse impaired; and

541 <u>(b)(2)</u> The reason for the petitioner's belief that because 542 of such impairment the respondent has lost the power of self-543 control with respect to substance abuse; and either

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544 <u>(c)1.(3)(a)</u> The reason the petitioner believes that the 545 respondent has inflicted or is likely to inflict physical harm on 546 himself or herself or others unless admitted; or

547 <u>2.(b)</u> The reason the petitioner believes that the 548 respondent's refusal to voluntarily receive care is based on 549 judgment so impaired by reason of substance abuse that the 550 respondent is incapable of appreciating his or her need for care 551 and of making a rational decision regarding that need for care.

552 (2) When a petition for involuntary treatment is for an 553 expectant mother consuming alcoholic beverages so as to place her 554 unborn child at risk for a fetal alcohol spectrum disorder, the 555 petition must contain the name of the person to be assessed, the 556 relationship between the person and the physician, the 557 relationship between the applicant and the physician, any 558 relationship between the physician and the licensed service 559 provider, and a statement of facts based on the expectant 560 mother's consumption of alcoholic beverages that indicate the 561 need for involuntary treatment to avert or reduce a substantial 562 alcohol-related risk to the health of her unborn child, that the expectant mother has been counseled against the consumption of 563 564 alcoholic beverages during pregnancy, and that she has been 565 offered and has refused alcohol or other substance abuse 566 treatment services.

567 Section 15. Section 397.6955, Florida Statutes, is amended 568 to read:

569 397.6955 Duties of court upon filing of petition for 570 involuntary treatment.--Upon the filing with the clerk of the 571 <u>court</u> of a petition for the involuntary treatment of a substance 572 abuse impaired person or an expectant mother consuming alcoholic

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573 beverages so as to place her unborn child at risk for a fetal 574 alcohol spectrum disorder with the clerk of the court, the court 575 shall immediately determine whether the respondent is represented by an attorney or whether the appointment of counsel for the 576 577 respondent is appropriate. The court shall schedule a hearing to 578 be held on the petition within 10 days. A copy of the petition 579 and notice of the hearing must be provided to the respondent; the 580 respondent's parent, guardian, or legal custodian, in the case of 581 a minor; the respondent's attorney, if known; the petitioner; the respondent's spouse or guardian, if applicable; and such other 582 583 persons as the court may direct, and have such petition and order 584 personally delivered to the respondent if he or she is a minor. 585 The court shall also issue a summons to the person whose 586 admission is sought.

587 Section 16. Section 397.6957, Florida Statutes, is amended 588 to read:

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397.6957 Hearing on petition for involuntary treatment.--

590 (1) At a hearing on a petition for involuntary treatment, 591 the court shall hear and review all relevant evidence, including 592 the review of results of the assessment completed by the 593 qualified professional in connection with the respondent's 594 protective custody, emergency admission, involuntary assessment, 595 or alternative involuntary admission. The respondent must be 596 present unless the court finds that his or her presence is likely 597 to be injurious to himself or herself or others, in which event 598 the court must appoint a guardian advocate to act in behalf of 599 the respondent throughout the proceedings.

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600 (2) For a petition seeking treatment based on substance
 601 abuse impairment, the petitioner has the burden of proving by
 602 clear and convincing evidence:

603

(a) The respondent is substance abuse impaired; - and

Because of such impairment, the respondent has lost the 604 (b) 605 power of self-control with respect to substance abuse; and either 606 The respondent has inflicted or is likely to inflict (c)1. 607 physical harm on himself or herself or others unless admitted; or 608 The respondent's refusal to voluntarily receive care is 2. 609 based on judgment so impaired by reason of substance abuse that the respondent is incapable of appreciating his or her need for 610 611 care and of making a rational decision regarding that need for 612 care.

613 (3) For a petition seeking treatment of an expectant mother 614 consuming alcoholic beverages so as to place her unborn child at 615 risk for a fetal alcohol spectrum disorder, the petitioner has 616 the burden of proving by clear and convincing evidence that the 617 expectant mother, while knowing she is pregnant, has continued to 618 consume alcoholic beverages to such a degree that there is a 619 reasonable possibility that the unborn child, when born, may be 620 diagnosed with a fetal alcohol spectrum disorder unless the 621 expectant mother ceases the consumption of alcoholic beverages 622 and there is good cause to believe she will continue to consume 623 alcoholic beverages if not involuntarily admitted to a treatment 624 facility.

625 (4)(3) At the conclusion of the hearing the court shall 626 either dismiss the petition or order the respondent to undergo 627 involuntary substance abuse treatment, with the respondent's

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628 chosen licensed service provider to deliver the involuntary629 substance abuse treatment where possible and appropriate.

630 Section 17. Section 397.697, Florida Statutes, is amended 631 to read:

632 397.697 Court determination; effect of court order for
633 involuntary substance abuse treatment.--

634 When the court finds that the conditions for (1)635 involuntary substance abuse treatment have been proved by clear 636 and convincing evidence, it may order the respondent to undergo 637 involuntary treatment by a licensed service provider for a period 638 not to exceed 60 days. If the court finds it necessary, it may 639 direct the sheriff to take the respondent into custody and 640 deliver him or her to the licensed service provider specified in 641 the court order, or to the nearest appropriate licensed service 642 provider, for involuntary treatment. When the conditions 643 justifying involuntary treatment no longer exist, the client must be released as provided in s. 397.6971. When the conditions 644 645 justifying involuntary treatment are expected to exist after 60 646 days of treatment, a renewal of the involuntary treatment order 647 may be requested pursuant to s. 397.6975 prior to the end of the 648 60-day period.

649 (2) In all cases resulting in an order for involuntary 550 substance abuse treatment, the court shall retain jurisdiction 651 over the case and the parties for the entry of such further 652 orders as the circumstances may require. The court's requirements 653 for notification of proposed release must be included in the 654 original treatment order.

655 (3) An involuntary treatment order authorizes the licensed656 service provider to require the client to undergo such treatment

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657	as will benefit him or her, including treatment at any licensable
658	service component of a licensed service provider.
659	Section 18. Effective October 1, 2008, section 562.063,
660	Florida Statutes, is created to read:
661	562.063 Health warning signs; posting requirement;
662	penalty
663	(1)(a) Each vendor licensed to sell alcoholic beverages for
664	consumption on or off the vendor's premises shall cause a health
665	warning sign that complies with the provisions of paragraph (b)
666	to be posted on the licensed premises where alcoholic beverages
667	are sold, at a location in each room where alcoholic beverages
668	are available for sale, and in such a fashion as to be clearly
669	visible to the patrons of the licensed vendor.
670	(b) Each sign required to be posted pursuant to paragraph
671	(a) must be posted in English, Spanish, and other languages, as
672	appropriate to the area; must be at least 12 inches by 18 inches
673	in size; must be laminated for durability and neatness; and must
674	read as follows:
675	
676	HEALTH WARNING
677	ALCOHOL IN BEER, COOLERS, WINE, AND LIQUOR CAN CAUSE:
678	1. FETAL ALCOHOL SYNDROME AND BIRTH DEFECTS. DO NOT DRINK
679	DURING PREGNANCY.
680	2. DRUNK DRIVING. DO NOT DRINK BEFORE DRIVING A CAR,
681	OPERATING A BOAT, OR OPERATING MACHINERY.
682	3. ADDICTION.
683	4. DEATH. DO NOT MIX ALCOHOL WITH OTHER DRUGS, INCLUDING
684	PRESCRIPTION OR ILLEGAL DRUGS. THE COMBINATION CAN BE FATAL.
685	

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686	(c) The division shall produce health warning signs that
687	comply with paragraph (b) and distribute the signs to the
688	licensed vendors operating establishments that sell alcoholic
689	beverages for consumption on or off the premises. The division
690	shall impose a fee and collect from each vendor an amount
691	sufficient to cover the costs of printing and delivering the
692	signs.
693	(2) A vendor of alcoholic beverages may not sell any
694	alcoholic beverage unless the vendor has properly posted the
695	health warning signs required under subsection (1). Any vendor
696	who violates this subsection commits a misdemeanor of the second
697	degree, punishable as provided in s. 775.082 or s. 775.083.
698	Section 19. The Division of Alcoholic Beverages and Tobacco
699	of the Department of Business and Professional Regulation shall
700	produce and distribute health warning signs in compliance with s.
701	562.063, Florida Statutes, as created by this act.
702	Section 20. For the purpose of incorporating the amendment
703	made by this act to section 397.675, Florida Statutes, in a
704	reference thereto, subsection (1) of section 397.6773, Florida
705	Statutes, is reenacted to read:
706	397.6773 Dispositional alternatives after protective
707	custody
708	(1) A client who is in protective custody must be released
709	by a qualified professional when:
710	(a) The client no longer meets the involuntary admission
711	criteria in s. 397.675(1);
712	(b) The 72-hour period has elapsed; or
713	(c) The client has consented to remain voluntarily at the
714	licensed service provider.

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715	Section 21. Establishment of Fetal Alcohol Spectrum
716	Disorders Diagnostic and Intervention Centers; professional
717	trainingThe Department of Health shall establish Fetal Alcohol
718	Spectrum Disorders Diagnostic and Intervention Centers and
719	develop and provide professional training for Healthy Families,
720	Healthy Start, child protection, child care, domestic violence
721	prevention, behavioral health care, education, and physical
722	health care professionals as well as any other groups working
723	with children or pregnant women. The Fetal Alcohol Spectrum
724	Disorders Diagnostic and Intervention Centers shall be located in
725	Sarasota, Hillsborough, Duval, and Miami-Dade Counties and in
726	other counties as the need arises and there are sufficient funds
727	to provide staff for the centers.
728	Section 22. For the purpose of implementing this act for
729	the 2008-2009 fiscal year:
730	(1) The sum of \$15,558,000 is appropriated from the General
731	Revenue Fund to the Department of Children and Family Services.
732	(2) The sum of \$2,105,000 is appropriated from the General
733	Revenue Fund to the Department of Health.
734	Section 23. Except as otherwise expressly provided in this
735	act, this act shall take effect July 1, 2008.