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LEGISLATIVE ACTION

Senate	.	House
Comm: RCS	.	
03/25/2009	.	
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The Committee on Children, Families, and Elder Affairs (Wise) recommended the following:

Senate Amendment (with title amendment)

Delete everything after the enacting clause and insert:

Section 1. (1) There is created a workgroup to review state policy and budgeting issues affecting adults with serious mental illness who also have involvement with the state criminal justice system. The Secretary of Children and Family Services, in conjunction with the Secretary of Corrections and the Secretary of Health Care Administration ,shall oversee and



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12 provide staff and other administrative assistance to the
13 workgroup using funds appropriated under the American Recovery
14 and Reinvestment Act of 2009.

15 (2) The workgroup shall consist of the following
16 members:(a) One member from the Substance Abuse and Mental
17 Health Corporation.

18 (b) One member appointed by Florida Legal Services, Inc.

19 (c) One member appointed by the Florida Psychiatric
20 Society.

21 (d) One member appointed by the Correctional Medical
22 Authority.

23 (e) One member appointed by the Florida Prosecuting
24 Attorneys Association.

25 (f) One member appointed by the Florida Public Defender
26 Association.

27 (g) One member appointed by the Florida Association of
28 Court Clerks.

29 (h) One member appointed by the Florida Assisted Living
30 Affiliation.

31 (i) One member appointed by the Florida Council for
32 Community Mental Health.

33 (j) One member appointed by the Department of Children and
34 Family Services.

35 (k) One member appointed by the Agency for Health Care
36 Administration.

37 (l) One member appointed by the Department of Corrections.

38 (m) One member appointed by the Florida Sheriffs
39 Association.

40 (n) One member appointed by the Florida Police Benevolent



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41 Association.

42 (o) One member appointed by the Florida chapter of the
43 National Alliance for the Mentally Ill.

44 (p) One member appointed by the Florida Hospital
45 Association representing private receiving facilities.

46 (q) One member appointed by the Florida Psychological
47 Association.

48 (r) One member appointed by the President of the Senate.

49 (s) One member appointed by the Speaker of the House of
50 Representatives.

51 (t) One member appointed by the Governor.

52 (3) (a) Members of the workgroup shall serve without
53 compensation for such service. However, each member is entitled
54 to reimbursement for per diem and travel expenses as provided in
55 s. 112.061, Florida Statutes.

56 (b) Expenses of the workgroup, other than member travel
57 expenses, shall be paid from funds appropriated to the
58 Department of Children and Family Services, the Department of
59 Corrections, and the Agency for Health Care Administration.

60 (c) Each meeting of the workgroup shall be held in
61 Tallahassee at the offices of the Department of Children and
62 Family Services. The workgroup shall meet four times per year
63 and may use electronic means of communication, which may
64 include, but are not limited to, conference calls, webinars, and
65 video conferencing.

66 (4) (a) The workgroup shall organize and conduct its
67 meetings in accordance with Robert's Rules of Order.

68 (b) The workgroup is authorized to request the Louis de la
69 Parte Florida Mental Health Institute at the University of South



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70 Florida to conduct research or analysis of data projects
71 identified by the chair and the members, within existing
72 contractual agreements with the department of Children and
73 Family Services.

74 (5) The review conducted by the workgroup under this
75 section shall include:

76 (a) The identification of all state funds being expended on
77 the care of adults with mental illnesses who have legal
78 involvement with state and county courts, including funds
79 expended on care in any correctional facility and funds expended
80 on medication, courts, attorneys, state institutions, contracts
81 with private institutions, community-based programs, Medicaid
82 services, state-funded substance abuse services, state-funded
83 mental health services, and managed care plans.

84 (b) A detailed examination of community-based service
85 delivery systems, including utilization issues, housing issues,
86 psychiatric emergency crisis response outcomes, effective
87 practices, and programs targeting individuals at risk for court
88 or legal involvement.

89 (c) A detailed review of data, utilization, and cost
90 analysis for individuals involved with the county courts, state
91 courts, state prisons, and state and private institutions who
92 have been charged with misdemeanors or felonies and who have a
93 diagnosis of serious and persistent mental illness.

94 (d) A detailed review of utilization data and costs for
95 individuals with traumatic brain injuries who have involvement
96 with state courts, state prisons, county courts, or county jails
97 and who have involvement with state-funded substance abuse and
98 mental health services.



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99 (e) A review of the role and costs of early discharge and
100 inappropriate placement on the use of state prisons and county
101 jails from public crisis stabilization units, community
102 inpatient psychiatric hospitals, and state and private
103 institutions that care for persons with serious and persistent
104 mental illness.

105 (f) A review of the criminal code, including penalties and
106 sentencing guidelines, and other laws pertaining to the forensic
107 mentally ill to assess where changes could be made to protect
108 public safety while ensuring that the needs of the mentally ill
109 are met in a cost-effective manner, with a goal to create a plan
110 that will reduce reliance on state prisons and county jails.

111 (g) The identification of programs, practices, and
112 innovative solutions emerging in the state that would reduce the
113 need for incarceration, improve cost-effectiveness, and help
114 reduce the impact on the state budget and improve public safety.

115 (h) A process for requesting and reviewing innovative
116 proposals that would help the state optimize the use of state
117 funding by examining the use of special pilot projects, mental
118 health courts, changes in emergency psychiatric care, new
119 approaches to law enforcement practices and court diversion
120 programs, and the use of modified sentencing or waivers relative
121 to the criminal code.

122 (i) The development, in conjunction with the Agency for
123 Health Care Administration, of a proposal for legislative
124 consideration that would establish an innovative Medicaid waiver
125 that would help support stable housing and services for those
126 individuals defined as at risk of court-related involvement. For
127 the purposes of this subsection, the term "at risk of court-



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128 related involvement” means a person who has been charged with a
129 misdemeanor or felony and diagnosed with a serious and
130 persistent mental illness.

131 (j) A review of the impact of substance abuse on the system
132 and methods to create integration and the use of Medicaid
133 waivers like the Medicaid 1915c Home and Community-Based Waiver
134 to provide a more integrated approach to treating substance
135 abuse in the community.

136 (k) The use of the involuntary outpatient commitment
137 requirements under the Baker Act and the need for changes to
138 those requirements that would help reduce or mitigate the
139 potential for court involvement in this process. This review
140 shall include the use of the Florida Medication Algorithm
141 Project and its implications for improved outcomes relative to
142 individuals at risk of court-related involvement.

143 (l) A review of the current status of the use of electronic
144 medical records, the need for broader use of electronic medical
145 records for individuals at risk of court involvement, and the
146 fiscal impact in terms of the savings this type of client
147 information system would have on reducing state expenditures and
148 improving access to care for those considered most at risk. The
149 workgroup may request experts in the field to make presentation
150 and respond to questions. The workgroup shall make
151 recommendations in response as provided in subsection (7).

152 (m) A review and comparison of the practices and standards
153 used in correctional facilities in providing mental health care
154 for individuals who are incarcerated in county jails, state
155 prisons, or state or private state mental health forensic
156 institutions.



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157 (n) The consideration of plans and recommendations
158 concerning appropriate methods of diverting mentally ill inmates
159 to less restrictive and less expensive alternatives using
160 conditional release or probation.

161 (o) A review of probation and parole requirements for
162 recommended modifications to assist with improving community
163 placement and community control for persons with serious and
164 persistent mental illnesses who are eligible for probation. This
165 shall include a review of rules and policies and
166 recommendations.

167 (p) A review of practices associated with the discharge of
168 individuals with a serious mental illness from the Department of
169 Corrections and from state-operated and state-funded forensic
170 mental health institutions for compliance with interagency
171 agreements regarding placement in the community, recidivism to a
172 jail or institutional setting, and utilization of hospital
173 emergency rooms, involuntary commitment services, and crisis
174 stabilization units.

175 (6) The Department of Children and Family Services, the
176 Department of Corrections, and the Agency for Health Care
177 Administration may use outside research organizations, to help
178 collect information for the workgroup to use in assessing the
179 factors contributing to the rise in the numbers of adults with
180 serious mental illness in the criminal justice system.

181 (7) The workgroup shall make recommendations in its interim
182 and final reports regarding proposed changes to the state penal
183 code, sentencing guidelines, state mental health policy, and
184 related strategies that would improve public safety through
185 better integration of behavioral health care at all levels of



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186 the criminal justice system, with a goal of reducing reliance on
187 county jails and state prisons. The workgroup shall submit an
188 interim report with findings and recommendations to the
189 President of the Senate, the Speaker of the House of
190 Representatives, and the Governor no later than January 5, 2010,
191 and its final report with recommendations and findings by
192 January 5, 2011.

193 (8) The workgroup terminates and this section expires July
194 1, 2011.

195 Section 2. This act shall take effect July 1, 2009.

196
197 ===== T I T L E A M E N D M E N T =====

198 And the title is amended as follows:

199 Delete everything before the enacting clause
200 and insert:

201 A bill to be entitled
202 An act relating to forensic mental health policy;
203 providing for creation of a workgroup to review state
204 policy and budgeting issues affecting adults with
205 serious mental illness who also have involvement with
206 the state criminal justice system; providing for
207 administrative oversight and assistance; providing for
208 membership, organization, and meetings; specifying
209 that members serve at their own expense; providing for
210 certain workgroup expenses; specifying components of
211 the review; authorizing use of outside research
212 organizations; providing for interim and final
213 reports; providing for future termination of the
214 workgroup and repeal of the provisions creating it;



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providing an effective date.