A bill to be entitled

An act relating to forensic mental health policy; providing for the creation of 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; providing for administrative assistance; providing for membership, organization, and meetings; specifying that members serve without compensation, but may be reimbursed for expenses; specifying components of the review; authorizing use of outside research organizations; providing for interim and final reports; providing for future termination of the workgroup and expiration of the provisions creating it; providing an effective date.

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

- 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 Corrections and the Secretary of Health Care Administration shall provide staff and other administrative assistance to the workgroup.
 - (2) The workgroup shall consist of the following members:
- (a) One member from the Substance Abuse and Mental Health Corporation.
 - (b) One member appointed by Florida Legal Services, Inc.
 - (c) One member appointed by the Florida Psychiatric

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29	Society.
30	(d) One member appointed by the Correctional Medical
31	Authority.
32	(e) One member appointed by the Florida Prosecuting
33	Attorneys Association.
34	(f) One member appointed by the Florida Public Defender
35	Association.
36	(g) One member appointed by the Florida Association of
37	Court Clerks.
38	(h) One member appointed by the Florida Assisted Living
39	Affiliation.
40	(i) One member appointed by the Florida Council for
41	Community Mental Health.
42	(j) One member appointed by the Department of Children and
43	Family Services.
44	(k) One member appointed by the Agency for Health Care
45	Administration.
46	(1) One member appointed by the Department of Corrections.
47	(m) One member appointed by the Florida Sheriffs
48	Association.
49	(n) One member appointed by the Florida Police Benevolent
50	Association.
51	(o) One member appointed by the Florida chapter of the
52	National Alliance for the Mentally Ill.
53	(p) One member appointed by the Florida Hospital
54	Association representing private receiving facilities.
55	(q) One member appointed by the Florida Psychological
56	Association.

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

- (s) One member appointed by the Speaker of the House of Representatives.
 - (t) One member appointed by the Governor.

- (3) Members of the workgroup shall serve without compensation for such service. However, each member may request reimbursement from the member's employing entity for per diem and travel expenses as provided in s. 112.061, Florida Statutes.
- (4) Each meeting of the workgroup shall be held in Tallahassee at the offices of the Department of Children and Family Services. The workgroup shall meet four times per year and may use electronic means of communication, which may include, but are not limited to, conference calls, webinars, and video conferencing.
- (5) The workgroup shall organize and conduct its meetings in accordance with Robert's Rules of Order.
- (6) The workgroup may request the Louis de la Parte Florida Mental Health Institute at the University of South Florida to conduct research or analysis of data projects identified by the chair and the members, within existing contractual agreements with the Department of Children and Family Services.
- (7) The review conducted by the workgroup under this section must include:
- (a) The identification of all state funds being expended on the care of adults with mental illnesses who have legal involvement with state and county courts, including funds expended on care in correctional facilities and funds expended

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on medication, courts, attorneys, state institutions, contracts with private institutions, community-based programs, Medicaid services, state-funded substance abuse services, state-funded mental health services, and managed care plans.

- (b) A detailed examination of community-based service delivery systems, including utilization issues, housing issues, psychiatric emergency crisis response outcomes, effective practices, and programs directed toward individuals who are at risk for court or legal involvement.
- (c) A detailed review of data, utilization, and cost analysis for individuals who are involved with the county courts, state courts, state prisons, and state and private institutions, have been charged with misdemeanors or felonies, and have a diagnosis of serious and persistent mental illness.
- (d) A detailed review of utilization data and costs for individuals who have traumatic brain injuries, have involvement with state courts, state prisons, county courts, or county jails, and have involvement with state-funded substance abuse and mental health services.
- (e) A review of the role and costs of early discharge and inappropriate placement on the use of state prisons and county jails from public crisis-stabilization units, community inpatient psychiatric hospitals, and state and private institutions that care for persons with serious and persistent mental illness.
- (f) A review of the criminal code, including penalties and sentencing guidelines, and other laws pertaining to the forensic mentally ill in order to assess where changes could be made that

protect public safety while ensuring that the needs of the mentally ill are met in a cost-effective manner, with a goal to create a plan that will reduce reliance on state prisons and county jails.

- (g) The identification of programs, practices, and innovative solutions emerging in the state which would reduce the need for incarceration, improve cost-effectiveness, and help reduce the impact on the state budget and improve public safety.
- (h) A process for requesting and reviewing innovative proposals that would help the state optimize the use of state funding by examining the use of special pilot projects, mental health courts, changes in emergency psychiatric care, new approaches to law enforcement practices and court diversion programs, and the use of modified sentencing or waivers relative to the criminal code.
- (i) The development, in conjunction with the Agency for Health Care Administration, of a proposal for legislative consideration which would establish an innovative Medicaid waiver that would help support stable housing and services for those individuals defined as at risk of court-related involvement. For the purposes of this subsection, the term "at risk of court-related involvement" means a person who has been charged with a misdemeanor or felony and diagnosed with a serious and persistent mental illness.
- (j) A review of the effect of substance abuse on the system and methods to create integration and the use of Medicaid waivers, such as the Medicaid 1915c Home and Community-Based Waiver, to provide a more integrated approach to treating

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substance abuse in the community.

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

- (1) A review of the current status of the use of electronic medical records, the need for broader use of electronic medical records for individuals at risk of court involvement, and the fiscal impact in terms of the savings that this type of client information system would have on reducing state expenditures and improving access to care for those considered most at risk. The workgroup may request experts in the field to make presentations and respond to questions. The workgroup shall make recommendations as provided in subsection (9).
- (m) A review and comparison of the practices and standards used in correctional facilities to provide mental health care for individuals who are incarcerated in county jails, state prisons, or state or private state mental health forensic institutions.
- (n) The consideration of plans and recommendations

 concerning appropriate methods of diverting mentally ill inmates

 to less restrictive and less expensive alternatives using

 conditional release or probation.
 - (o) A review of probation and parole requirements for

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recommended modifications in order to assist with improving community placement and community control for persons with serious and persistent mental illnesses who are eligible for probation. This shall include a review of rules and policies and recommendations.

- (p) A review of practices associated with the discharge of individuals with a serious mental illness from the Department of Corrections and from state-operated and state-funded forensic mental health institutions for compliance with interagency agreements regarding placement in the community, recidivism to a jail or institutional setting, and utilization of hospital emergency rooms, involuntary commitment services, and crisis stabilization units.
- (8) The Department of Children and Family Services, the Department of Corrections, and the Agency for Health Care Administration may use outside research organizations to help collect information for the workgroup to use in assessing the factors contributing to the rise in the numbers of adults with serious mental illness in the criminal justice system.
- interim and final reports regarding proposed changes to the state penal code, sentencing guidelines, state mental health policy, and related strategies which would improve public safety through better integration of behavioral health care at all levels of the criminal justice system, with a goal of reducing reliance on county jails and state prisons. The workgroup shall submit an interim report with findings and recommendations to the President of the Senate, the Speaker of the House of

L97	Representatives, and the Governor by January 5, 2010, and its
198	final report with recommendations and findings by January 5,
L99	<u>2011.</u>
200	(10) The workgroup terminates and this section expires
201	July 1, 2011.

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

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