By Senator Storms

	10-01329B-12 20121712
1	A bill to be entitled
2	An act relating to mental health; amending s. 916.107,
3	F.S.; authorizing, in certain circumstances,
4	continuation of psychotherapeutic medication for
5	individuals receiving such medication in a jail before
6	admission to a psychiatric or forensic facility;
7	amending s. 916.111, F.S.; requiring forensic
8	evaluator training for mental health experts appointed
9	to evaluate defendants for competency to proceed or
10	for sanity at the time of the commission of the
11	offense; amending s. 916.115, F.S.; requiring the
12	Department of Children and Family Services to maintain
13	and annually provide the courts with a forensic
14	evaluator registry; amending s. 916.13, F.S.;
15	providing timeframes for competency hearings to be
16	held; amending s. 916.15, F.S.; providing timeframes
17	for commitment hearings to be held; amending s.
18	985.19, F.S.; standardizing the protocols, procedures,
19	and criteria used in reporting expert findings in
20	determining competency in juvenile cases; revising
21	requirements related to the forensic evaluator
22	training program that appointed experts must complete;
23	requiring experts after a specified date to have
24	completed such training; providing an effective date.
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26	Be It Enacted by the Legislature of the State of Florida:
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28	Section 1. Paragraph (a) of subsection (3) of section
29	916.107, Florida Statutes, is amended to read:

Page 1 of 12

10-01329B-12

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         916.107 Rights of forensic clients.-
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         (3) RIGHT TO EXPRESS AND INFORMED CONSENT.-
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          (a) A forensic client shall be asked to give express and
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    informed written consent for treatment. If a client refuses such
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    treatment as is deemed necessary and essential by the client's
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    multidisciplinary treatment team for the appropriate care of the
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    client, such treatment may be provided under the following
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    circumstances:
         1. In an emergency situation in which there is immediate
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    danger to the safety of the client or others, such treatment may
    be provided upon the written order of a physician for a period
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    not to exceed 48 hours, excluding weekends and legal holidays.
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    If, after the 48-hour period, the client has not given express
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    and informed consent to the treatment initially refused, the
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    administrator or designee of the civil or forensic facility
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    shall, within 48 hours, excluding weekends and legal holidays,
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    petition the committing court or the circuit court serving the
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    county in which the facility is located, at the option of the
    facility administrator or designee, for an order authorizing the
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    continued treatment of the client. In the interim, the need for
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    treatment shall be reviewed every 48 hours and may be continued
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    without the consent of the client upon the continued written
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    order of a physician who has determined that the emergency
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54 client or others.

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55 2. In a situation other than an emergency situation, the 56 administrator or designee of the facility shall petition the 57 court for an order authorizing necessary and essential treatment 58 for the client.

situation continues to present a danger to the safety of the

Page 2 of 12

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20121712

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10-01329B-12
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         a. If the client has been receiving psychotherapeutic
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    medication at the jail at the time of transfer to the forensic
    or civil facility and lacks the capacity to make an informed
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    decision regarding mental health treatment at the time of
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    admission, the admitting physician may order continued
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    administration of the psychotherapeutic medication if, in the
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    clinical judgment of the physician, abrupt cessation of the
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    psychotherapeutic medication could cause a risk to the health
    and safety of the client during the time a court order to
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    medicate is pursued. The jail physician shall provide a current
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    psychotherapeutic medication order at the time of transfer to
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    the forensic or civil facility.
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         b. The court order shall allow such treatment for up to a
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    period not to exceed 90 days after following the date of the
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    entry of the order. Unless the court is notified in writing that
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    the client has provided express and informed consent in writing
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    or that the client has been discharged by the committing court,
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    the administrator or designee shall, before prior to the
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80 the client provides consent or is discharged by the committing 81 court.
82 3. At the hearing on the issue of whether the court should 83 enter an order authorizing treatment for which a client was 84 unable to or refused to give express and informed consent, the 85 court shall determine by clear and convincing evidence that the 86 client has mental illness, retardation, or autism, that the 87 treatment not consented to is essential to the care of the

expiration of the initial 90-day order, petition the court for

an order authorizing the continuation of treatment for another 90 days 90-day period. This procedure shall be repeated until

Page 3 of 12

	10-01329B-12 20121712
88	client, and that the treatment not consented to is not
89	experimental and does not present an unreasonable risk of
90	serious, hazardous, or irreversible side effects. In arriving at
91	the substitute judgment decision, the court must consider at
92	least the following factors:
93	a. The client's expressed preference regarding treatment;
94	b. The probability of adverse side effects;
95	c. The prognosis without treatment; and
96	d. The prognosis with treatment.
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98	The hearing shall be as convenient to the client as may be
99	consistent with orderly procedure and shall be conducted in
100	physical settings not likely to be injurious to the client's
101	condition. The court may appoint a general or special magistrate
102	to preside at the hearing. The client or the client's guardian,
103	and the representative, shall be provided with a copy of the
104	petition and the date, time, and location of the hearing. The
105	client has the right to have an attorney represent him or her at
106	the hearing, and, if the client is indigent, the court shall
107	appoint the office of the public defender to represent the
108	client at the hearing. The client may testify or not, as he or
109	she chooses, and has the right to cross-examine witnesses and
110	may present his or her own witnesses.
111	Section 2. Section 916.111, Florida Statutes, is amended to
112	read:
113	916.111 Training of mental health experts
114	(1) The evaluation of defendants for competency to proceed
115	or for sanity at the time of the commission of the offense shall
116	be conducted in such a way as to ensure uniform application of

Page 4 of 12

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SB 1712

	10-01329B-12 20121712
117	the criteria enumerated in Rules 3.210 and 3.216, Florida Rules
118	of Criminal Procedure.
119	(2) Appointed experts shall have completed forensic
120	evaluator training as specified in this section.
121	(3) A forensic evaluator training course approved by the
122	department must be provided at least annually to ensure that
123	mental health professionals have the opportunity to be placed on
124	the department's forensic evaluator registry.
125	(a) Beginning July 1, 2013, if an expert chooses to remain
126	on the registry, he or she must have completed or retaken the
127	required training course within the previous 5 years. Those who
128	have not completed the training course must be removed from the
129	registry and may not conduct evaluations for the courts.
130	(b) A mental health professional who has completed the
131	training course within the previous 5 years must maintain
132	documentation of completion of the required training course and
133	provide current contact information to the department.
134	(4) The department shall develop, and may contract with
135	accredited institutions:
136	<u>(a)</u> To provide:
137	1.(a) A plan for training mental health professionals to
138	perform forensic evaluations and to standardize the criteria and
139	procedures to be used in these evaluations;
140	2.(b) Clinical protocols and procedures based upon the
141	criteria of Rules 3.210 and 3.216, Florida Rules of Criminal
142	Procedure; and
143	3.(c) Training for mental health professionals in the
144	application of these protocols and procedures in performing
145	forensic evaluations and providing reports to the courts; and

Page 5 of 12

	10-01329B-12 20121712
146	(b) (2) To compile and maintain the necessary information
147	for evaluating the success of this program, including the number
148	of persons trained, the cost of operating the program, and the
149	effect on the quality of forensic evaluations as measured by
150	appropriateness of admissions to state forensic facilities and
151	to community-based care programs.
152	Section 3. Paragraph (b) of subsection (1) of section
153	916.115, Florida Statutes, is amended to read:
154	916.115 Appointment of experts
155	(1) The court shall appoint no more than three experts to
156	determine the mental condition of a defendant in a criminal
157	case, including competency to proceed, insanity, involuntary
158	placement, and treatment. The experts may evaluate the defendant
159	in jail or in another appropriate local facility or in a
160	facility of the Department of Corrections.
161	(b) The department shall maintain and annually provide the
162	courts with a <u>forensic evaluator registry</u> list of available
163	mental health professionals who have completed the approved
164	training as experts.
165	Section 4. Subsection (2) of section 916.13, Florida
166	Statutes, is amended to read:
167	916.13 Involuntary commitment of defendant adjudicated
168	incompetent
169	(2) A defendant who has been charged with a felony and who
170	has been adjudicated incompetent to proceed due to mental
171	illness, and who meets the criteria for involuntary commitment
172	to the department under the provisions of this chapter, may be
173	committed to the department, and the department shall retain and
174	treat the defendant.

Page 6 of 12

	10-01329B-12 20121712
175	<u>(a) Within</u> No later than 6 months after the date of
176	admission and at the end of any period of extended commitment,
177	or at any time the administrator or designee <u>has</u> shall have
178	determined that the defendant has regained competency to proceed
179	or no longer meets the criteria for continued commitment, the
180	administrator or designee shall file a report with the court
181	pursuant to the applicable Florida Rules of Criminal Procedure.
182	(b) A competency hearing must be held within 30 days after
183	a court receives notification that the defendant is competent to
184	proceed or no longer meets the criteria for continued
185	commitment.
186	Section 5. Subsection (5) is added to section 916.15,
187	Florida Statutes, to read:
188	916.15 Involuntary commitment of defendant adjudicated not
189	guilty by reason of insanity
190	(5) The commitment hearing must be held within 30 days
191	after the court receives notification that the defendant no
192	longer meets the criteria for continued commitment.
193	Section 6. Subsection (1) of section 985.19, Florida
194	Statutes, is amended, subsection (7) is renumbered as subsection
195	(8), and a new subsection (7) is added to that section, to read:
196	985.19 Incompetency in juvenile delinquency cases
197	(1) If, at any time prior to or during a delinquency case,
198	the court has reason to believe that the child named in the
199	petition may be incompetent to proceed with the hearing, the
200	court on its own motion may, or on the motion of the child's
201	attorney or state attorney must, stay all proceedings and order
202	an evaluation of the child's mental condition.
203	(a) Any motion questioning the child's competency to

Page 7 of 12

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SB 1712

10-01329B-12 20121712 204 proceed must be served upon the child's attorney, the state 205 attorney, the attorneys representing the Department of Juvenile 206 Justice, and the attorneys representing the Department of 207 Children and Family Services. Thereafter, any motion, notice of 208 hearing, order, or other legal pleading relating to the child's 209 competency to proceed with the hearing must be served upon the 210 child's attorney, the state attorney, the attorneys representing 211 the Department of Juvenile Justice, and the attorneys 212 representing the Department of Children and Family Services. 213 (b) All determinations of competency must shall be made at 214 a hearing, with findings of fact based on an evaluation of the child's mental condition made by at least not less than two but 215 216 not nor more than three experts appointed by the court. The 217 basis for the determination of incompetency must be specifically 218 stated in the evaluation. In addition, a recommendation as to 219 whether residential or nonresidential treatment or training is 220 required must be included in the evaluation. Experts appointed 221 by the court to determine the mental condition of a child shall 222 be allowed reasonable fees for services rendered. State 223 employees may be paid expenses pursuant to s. 112.061. The fees 224 shall be taxed as costs in the case. 225 (c) A child is competent to proceed if the child has 226 sufficient present ability to consult with counsel with a 227 reasonable degree of rational understanding and the child has a 228 rational and factual understanding of the present proceedings. 229 (d) The basis for the determination of a child's mental 230 condition must be specifically stated in the expert's competency 231 evaluation report and must include written findings that:

1. Identify the specific matters referred for evaluation.

Page 8 of 12

	10-01329B-12 20121712
233	2. Identify the sources of information used by the expert.
234	3. Describe the procedures, techniques, and diagnostic
235	tests used in the examination to determine the basis of the
236	child's mental condition.
237	4. Address the child's capacity to:
238	a. Appreciate the charges or allegations against the child.
239	b. Appreciate the range and nature of possible penalties
240	that may be imposed in the proceedings against the child, if
241	applicable.
242	c. Understand the adversarial nature of the legal process.
243	d. Disclose to counsel facts pertinent to the proceedings
244	at issue.
245	e. Display appropriate courtroom behavior.
246	f. Testify relevantly.
247	5. Present the factual basis for the expert's clinical
248	findings and opinions of the child's mental condition.
249	(e) If the evaluator determines the child to be incompetent
250	to proceed to trial, the evaluator must report on the mental
251	disorder that forms the basis of the incompetency.
252	(f) The expert's factual basis of his or her clinical
253	findings and opinions must be supported by the diagnostic
254	criteria found in the most recent edition of the Diagnostic and
255	Statistical Manual of the American Psychiatric Association (DSM-
256	IV) and must be presented in a section of his or her competency
257	evaluation report that shall be identified as a summary of
258	findings. This section must include:
259	1. The day, month, year, and length of time of the face-to-
260	face diagnostic clinical interview to determine the child's
261	mental condition.

Page 9 of 12

	10-01329B-12 20121712
262	2. A statement that identifies the DSM-IV clinical name and
263	associated diagnostic code for the specific mental disorder that
264	forms the basis of the child's incompetency.
265	3. A statement of how the child would benefit from
266	competency restoration services in the community or in a secure
267	residential treatment facility.
268	4. An assessment of the probable duration of the treatment
269	to restore competence, and the probability that the child will
270	attain competence to proceed in the foreseeable future.
271	5. A description of recommended treatment or education
272	appropriate for the mental disorder.
273	(g) (c) All court orders determining incompetency must
274	include specific written findings by the court as to the nature
275	of the incompetency and whether the child requires \underline{a} secure or
276	nonsecure treatment or training <u>environment</u> environments.
277	<u>(h)</u> For <u>competency</u> incompetency evaluations related to
278	mental illness, the Department of Children and Family Services
279	shall maintain and annually provide the courts with a forensic
280	<u>evaluator registry</u> list of available mental health professionals
281	who have completed the approved a training as experts pursuant
282	to this section program approved by the Department of Children
283	and Family Services to perform the evaluations.
284	<u>(i)</u> For <u>competency</u> incompetency evaluations related to
285	mental retardation or autism, the court shall order the Agency
286	for Persons with Disabilities to examine the child to determine
287	if the child meets the definition of "retardation" or "autism"
288	in s. 393.063 and provide a clinical opinion as to, if so,
289	whether the child is competent to proceed with delinquency
290	proceedings.

Page 10 of 12

	10-01329B-12 20121712
291	(f) A child is competent to proceed if the child has
292	sufficient present ability to consult with counsel with a
293	reasonable degree of rational understanding and the child has a
294	rational and factual understanding of the present proceedings.
295	The report must address the child's capacity to:
296	1. Appreciate the charges or allegations against the child.
297	2. Appreciate the range and nature of possible penalties
298	that may be imposed in the proceedings against the child, if
299	applicable.
300	3. Understand the adversarial nature of the legal process.
301	4. Disclose to counsel facts pertinent to the proceedings
302	at issue.
303	5. Display appropriate courtroom behavior.
304	6. Testify relevantly.
305	<u>(j)</u> Immediately upon the filing of the court order
306	finding a child incompetent to proceed, the clerk of the court
307	shall notify the Department of Children and Family Services and
308	the Agency for Persons with Disabilities and fax or hand deliver
309	to the department and to the agency a referral packet that
310	includes, at a minimum, the court order, the charging documents,
311	the petition, and the court-appointed evaluator's reports.
312	<u>(k) (h)</u> After placement of the child in the appropriate
313	setting, the Department of Children and Family Services in
314	consultation with the Agency for Persons with Disabilities, as
315	appropriate, must, within 30 days after placement of the child,
316	prepare and submit to the court a treatment or training plan for
317	the child's restoration of competency. A copy of the plan must
318	be served upon the child's attorney, the state attorney, and the
319	attorneys representing the Department of Juvenile Justice.

Page 11 of 12

	10-01329B-12 20121712_
320	(7) Effective July 1, 2013, court-appointed experts must
321	have completed forensic evaluator training approved by the
322	Department of Children and Family Services and comply with these
323	additional requirements:
324	(a) If an expert chooses to remain on the registry, the
325	expert must have completed or retaken the required training
326	course within the previous 5 years. An expert who has not
327	completed the required training within the previous 5 years must
328	be removed from the registry and may not conduct competency
329	evaluations for the courts.
330	(b) A mental health professional who has completed the
331	training course within the previous 5 years must maintain
332	documentation of having completed the required training and
333	provide current contact information to the Department of
334	Children and Family Services.
335	Section 7. This act shall take effect July 1, 2012.