By Senator Sobel

	33-01440-14 2014944
1	A bill to be entitled
2	An act relating to mental health treatment; amending
3	s. 916.107, F.S.; authorizing forensic and civil
4	facilities to order the continuation of
5	psychotherapeutics for individuals receiving such
6	medications in the jail before admission; amending s.
7	916.13, F.S.; providing timeframes within which
8	competency hearings must be held; amending s. 916.145,
9	F.S.; revising the time for dismissal of certain
10	charges for defendants that remain incompetent to
11	proceed to trial; providing exceptions; amending s.
12	916.15, F.S.; providing a timeframe within which
13	commitment hearings must be held; amending s. 985.19,
14	F.S.; standardizing the protocols, procedures,
15	diagnostic criteria, and information and findings that
16	must be included in an expert's competency evaluation
17	report; providing an effective date.
18	
19	Be It Enacted by the Legislature of the State of Florida:
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21	Section 1. Paragraph (a) of subsection (3) of section
22	916.107, Florida Statutes, is amended to read:
23	916.107 Rights of forensic clients
24	(3) RIGHT TO EXPRESS AND INFORMED CONSENT
25	(a) A forensic client shall be asked to give express and
26	informed written consent for treatment. If a client refuses such
27	treatment as is deemed necessary and essential by the client's
28	multidisciplinary treatment team for the appropriate care of the
29	client, such treatment may be provided under the following

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30 circumstances:

31 1. In an emergency situation in which there is immediate 32 danger to the safety of the client or others, such treatment may be provided upon the written order of a physician for a period 33 34 not to exceed 48 hours, excluding weekends and legal holidays. If, after the 48-hour period, the client has not given express 35 36 and informed consent to the treatment initially refused, the 37 administrator or designee of the civil or forensic facility shall, within 48 hours, excluding weekends and legal holidays, 38 39 petition the committing court or the circuit court serving the 40 county in which the facility is located, at the option of the facility administrator or designee, for an order authorizing the 41 42 continued treatment of the client. In the interim, the need for treatment shall be reviewed every 48 hours and may be continued 43 44 without the consent of the client upon the continued written order of a physician who has determined that the emergency 45 46 situation continues to present a danger to the safety of the 47 client or others.

48 2. In a situation other than an emergency situation, the 49 administrator or designee of the facility shall petition the 50 court for an order authorizing necessary and essential treatment 51 for the client.

52 <u>a. If the client has been receiving psychotherapeutic</u> 53 <u>medications at the jail at the time of transfer to the forensic</u> 54 <u>or civil facility and lacks the capacity to make an informed</u> 55 <u>decision regarding mental health treatment at the time of</u> 56 <u>admission, the admitting physician may order continued</u> 57 <u>administration of psychotherapeutic medications if, in the</u> 58 <u>clinical judgment of the physician, abrupt cessation of</u>

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71 b. The court order shall allow such treatment for up to a period not to exceed 90 days after following the date of the 72 73 entry of the order. Unless the court is notified in writing that 74 the client has provided express and informed consent in writing 75 or that the client has been discharged by the committing court, 76 the administrator or designee shall, before the expiration of the initial 90-day order, petition the court for an order 77 78 authorizing the continuation of treatment for another 90 days 79 90-day period. This procedure shall be repeated until the client 80 provides consent or is discharged by the committing court.

3. At the hearing on the issue of whether the court should enter an order authorizing treatment for which a client was unable to or refused to give express and informed consent, the court shall determine by clear and convincing evidence that the client has mental illness, intellectual disability, or autism, that the treatment not consented to is essential to the care of the client, and that the treatment not consented to is not

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88	experimental and does not present an unreasonable risk of
89	serious, hazardous, or irreversible side effects. In arriving at
90	the substitute judgment decision, the court must consider at
91	least the following factors:
92	a. The client's expressed preference regarding treatment;
93	b. The probability of adverse side effects;
94	c. The prognosis without treatment; and
95	d. The prognosis with treatment.
96	
97	The hearing shall be as convenient to the client as may be
98	consistent with orderly procedure and shall be conducted in
99	physical settings not likely to be injurious to the client's
100	condition. The court may appoint a general or special magistrate
101	to preside at the hearing. The client or the client's guardian,
102	and the representative, shall be provided with a copy of the
103	petition and the date, time, and location of the hearing. The
104	client has the right to have an attorney represent him or her at
105	the hearing, and, if the client is indigent, the court shall
106	appoint the office of the public defender to represent the
107	client at the hearing. The client may testify or not, as he or
108	she chooses, and has the right to cross-examine witnesses and
109	may present his or her own witnesses.
110	Section 2. Subsection (2) of section 916.13, Florida
111	Statutes, is amended to read:
112	916.13 Involuntary commitment of defendant adjudicated
113	incompetent
114	(2) A defendant who has been charged with a felony and who
115	has been adjudicated incompetent to proceed due to mental
116	illness, and who meets the criteria for involuntary commitment

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117	to the department under the provisions of this chapter, may be
118	committed to the department, and the department shall retain and
119	treat the defendant.
120	<u>(a) Within</u> No later than 6 months after the date of
121	admission and at the end of any period of extended commitment,
122	or at any time the administrator or designee <u>has</u> shall have
123	determined that the defendant has regained competency to proceed
124	or no longer meets the criteria for continued commitment, the
125	administrator or designee shall file a report with the court
126	pursuant to the applicable Florida Rules of Criminal Procedure.
127	(b) A competency hearing must be held within 30 days after
128	the court receives notification that the defendant is competent
129	to proceed or no longer meets the criteria for continued
130	commitment.
131	Section 3. Section 916.145, Florida Statutes, is amended to
132	read:
133	(Substantial rewording of section. See
134	s. 916.145, F.S., for present text.)
135	
136	916.145 Dismissal of charges
137	(1) The charges against a defendant adjudicated incompetent
138	to proceed due to mental illness shall be dismissed without
139	prejudice to the state if the defendant remains incompetent to
140	proceed:
141	(a) Three years after such determination; or
142	(b) Five years after such determination if the charge
143	related to commitment is:
144	1. Arson;
145	2. Sexual battery;
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146	3. Robbery;
147	4. Kidnapping;
148	5. Aggravated child abuse;
149	6. Aggravated abuse of an elderly person or disabled adult;
150	7. Aggravated assault with a deadly weapon;
151	8. Murder;
152	9. Manslaughter;
153	10. Aggravated manslaughter of an elderly person or
154	disabled adult;
155	11. Aggravated manslaughter of a child;
156	12. Unlawful throwing, projecting, placing, or discharging
157	of a destructive device or bomb;
158	13. Armed burglary;
159	14. Aggravated battery; or
160	15. Aggravated stalking,
161	
162	unless the court, in an order, specifies reasons for believing
163	that the defendant will become competent to proceed, and
164	specifies a reasonable time within which the defendant is
165	expected to become competent.
166	(2) This section does not prohibit the state from refiling
167	dismissed charges if the defendant is declared to be competent
168	to proceed in the future.
169	Section 4. Subsection (5) is added to section 916.15,
170	Florida Statutes, to read:
171	916.15 Involuntary commitment of defendant adjudicated not
172	guilty by reason of insanity
173	(5) The commitment hearing must be held within 30 days
174	after the court receives notification that the defendant no
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33-01440-14 2014944 175 longer meets the criteria for continued commitment. 176 Section 5. Subsection (1) of section 985.19, Florida 177 Statutes, is amended to read: 178 985.19 Incompetency in juvenile delinquency cases.-179 (1) If, at any time prior to or during a delinquency case, 180 the court has reason to believe that the child named in the 181 petition may be incompetent to proceed with the hearing, the 182 court on its own motion may, or on the motion of the child's attorney or state attorney must, stay all proceedings and order 183 an evaluation of the child's mental condition. 184 185 (a) Any motion questioning the child's competency to 186 proceed must be served upon the child's attorney, the state 187 attorney, the attorneys representing the Department of Juvenile 188 Justice, and the attorneys representing the Department of 189 Children and Families Family Services. Thereafter, any motion, 190 notice of hearing, order, or other legal pleading relating to 191 the child's competency to proceed with the hearing must be 192 served upon the child's attorney, the state attorney, the 193 attorneys representing the Department of Juvenile Justice, and 194 the attorneys representing the Department of Children and 195 Families Family Services. 196 (b) All determinations of competency must shall be made at 197 a hearing, with findings of fact based on an evaluation of the 198 child's mental condition made by at least not less than two but not nor more than three experts appointed by the court. The 199 200 basis for the determination of incompetency must be specifically 201 stated in the evaluation. In addition, a recommendation as to 202 whether residential or nonresidential treatment or training is

203 required must be included in the evaluation. Experts appointed

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204by the court to determine the mental condition of a child shall205be allowed reasonable fees for services rendered. State206employees may be paid expenses pursuant to s. 112.061. The fees207shall be taxed as costs in the case.208(c) A child is competent to proceed if the child has209sufficient present ability to consult with counsel with a210reasonable degree of rational understanding and the child has a211rational and factual understanding of the present proceedings.212The expert's competency evaluation report must specifically213state the basis for the determination of the child's mental214condition and must include written findings that:2151. Identify the specific matters referred for evaluation.2162. Identify the sources of information used by the expert2173. Describe the procedures, techniques, and diagnostic218tests used in the examination to determine the basis of the219child's mental condition.2204. Address the child's capacity to:221a. Appreciate the charges or allegations against the child222b. Appreciate the range and nature of possible penalties223that may be imposed in the proceedings against the child, if	
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223 that may be imposed in the proceedings against the child, if	
224 <u>applicable.</u>	
225 <u>c. Understand the adversarial nature of the legal process</u>	
226 d. Disclose to counsel facts pertinent to the proceedings	
227 <u>at issue.</u>	
228 <u>e. Display appropriate courtroom behavior.</u>	
229 <u>f. Testify relevantly.</u>	
230 <u>5. Present the factual basis for the expert's clinical</u>	
231 findings and opinions of the child's mental condition. The	
232 expert's factual basis of his or her clinical findings and	

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233	opinions must be supported by the diagnostic criteria found in
234	the most recent edition of the Diagnostic and Statistical Manual
235	of Mental Disorders (DSM) published by the American Psychiatric
236	Association and must be presented in a separate section of the
237	report entitled "summary of findings." This section must
238	include:
239	a. The day, month, year, and length of time of the face-to-
240	face diagnostic clinical interview to determine the child's
241	mental condition.
242	b. A statement that identifies the DSM clinical name and
243	associated diagnostic code for the specific mental disorder that
244	forms the basis of the child's incompetency.
245	c. A statement of how the child would benefit from
246	competency restoration services in the community or in a secure
247	residential treatment facility.
248	d. An assessment of the probable duration of the treatment
249	to restore competence and the probability that the child will
250	attain competence to proceed in the foreseeable future.
251	e. A description of recommended treatment or education
252	appropriate for the mental disorder.
253	6. If the evaluator determines the child to be incompetent
254	to proceed to trial, the evaluator must report on the mental
255	disorder that forms the basis of the incompetency.
256	<u>(d)</u> All court orders determining incompetency must
257	include specific written findings by the court as to the nature
258	of the incompetency and whether the child requires secure or
259	nonsecure treatment or training <u>environment</u> environments.
260	<u>(e)</u> For <u>competency</u> incompetency evaluations related to
261	mental illness, the Department of Children and <u>Families</u> Family
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262	Services shall maintain and annually provide the courts with a
263	list of available mental health professionals who have completed
264	a training program approved by the Department of Children and
265	<u>Families</u> Family Services to perform the evaluations.
266	<u>(f)</u> For competency incompetency evaluations related to
267	intellectual disability or autism, the court shall order the
268	Agency for Persons with Disabilities to examine the child to
269	determine if the child meets the definition of "intellectual
270	disability" or "autism" in s. 393.063 and, provide a clinical
271	<u>opinion as to</u> if so , whether the child is competent to proceed
272	with delinquency proceedings.
273	(f) A child is competent to proceed if the child has
274	sufficient present ability to consult with counsel with a
275	reasonable degree of rational understanding and the child has a
276	rational and factual understanding of the present proceedings.
277	The report must address the child's capacity to:
278	1. Appreciate the charges or allegations against the child.
279	2. Appreciate the range and nature of possible penalties
280	that may be imposed in the proceedings against the child, if
281	applicable.
282	3. Understand the adversarial nature of the legal process.
283	4. Disclose to counsel facts pertinent to the proceedings
284	at-issue.
285	5. Display appropriate courtroom behavior.
286	6. Testify relevantly.
287	(g) Immediately upon the filing of the court order finding
288	a child incompetent to proceed, the clerk of the court shall
289	notify the Department of Children and <u>Families</u> Family Services
290	and the Agency for Persons with Disabilities and fax or hand

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291	deliver to the department and to the agency a referral packet
292	that includes, at a minimum, the court order, the charging
293	documents, the petition, and the court-appointed evaluator's
294	reports.
295	(h) After placement of the child in the appropriate
296	setting, the Department of Children and <u>Families</u> Family Services
297	in consultation with the Agency for Persons with Disabilities,
298	as appropriate, must, within 30 days after placement of the
299	child, prepare and submit to the court a treatment or training
300	plan for the child's restoration of competency. A copy of the
301	plan must be served upon the child's attorney, the state
302	attorney, and the attorneys representing the Department of
303	Juvenile Justice.
304	Section 6. This act shall take effect July 1, 2014.

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