ENROLLED 2019 Legislature

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2	An act relating to mental health; amending s.
3	394.4615, F.S.; requiring service providers to
4	disclose information from a clinical record under
5	certain circumstances relating to threats to cause
6	serious bodily injury or death; requiring a law
7	enforcement agency that receives notification of a
8	specific threat to take appropriate action; providing
9	immunity for service providers for certain actions;
10	amending s. 394.463, F.S.; revising deadlines for
11	submission of documentation regarding involuntary
12	examinations; requiring that additional information be
13	included in reports to the department; requiring the
14	department to report to the Governor and Legislature
15	on data collected from such reports; amending s.
16	394.917, F.S.; revising the purpose of civil
17	commitment of sexually violent predators to the
18	department after completion of their criminal
19	incarceration sentences; amending s. 456.059, F.S.;
20	requiring psychiatrists to disclose certain patient
21	communications for purposes of notifying law
22	enforcement agencies of certain threats; requiring the
23	notified law enforcement agency to take appropriate
24	action to prevent the risk of harm to the victim;
25	providing psychiatrists with immunity from specified
26	liability and actions under certain circumstances;
27	amending s. 490.0147, F.S.; requiring psychologists to
28	disclose certain patient or client communications for
29	purposes of notifying law enforcement agencies of

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30	certain threats; requiring the notified law
31	enforcement agency to take appropriate action to
32	prevent the risk of harm to the victim; providing
33	psychologists with immunity from specified liability
34	and actions under certain circumstances; amending s.
35	491.0147, F.S.; requiring certain license holders and
36	certificate holders to disclose certain patient or
37	client communications for purposes of notifying law
38	enforcement agencies of certain threats; requiring the
39	notified law enforcement agency to take appropriate
40	action to prevent the risk of harm to the victim;
41	providing such persons with immunity from specified
42	liability and actions; amending s. 1012.583, F.S.;
43	revising responsibilities of the Department of
44	Education and the Statewide Office for Suicide
45	Prevention; revising criteria for designation as a
46	Suicide Prevention Certified School; requiring that
47	the department, schools, and school districts post
48	certain information regarding such schools be posted
49	on their respective websites; reenacting ss. 490.009
50	and 491.009, F.S., relating to discipline of
51	psychologists and other licensed therapists, to
52	incorporate amendments made by the act; providing an
53	effective date.
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55	Be It Enacted by the Legislature of the State of Florida:
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57	Section 1. Present subsections (4) through (11) of section
58	394.4615, Florida Statutes, are renumbered as subsections (5)
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20191418er 59 through (12), respectively, paragraph (a) of subsection (3) is 60 amended, and a new subsection (4) is added to that section, to 61 read: 62 394.4615 Clinical records; confidentiality.-(3) Information from the clinical record may be released in 63 64 the following circumstances: 65 (a) When a patient has communicated to a service provider a specific threat to cause serious bodily injury or death to an 66 67 identified or a readily available person, if the service 68 provider reasonably believes, or should reasonably believe according to the standards of his or her profession, that the 69 70 patient has the apparent intent and ability to imminently or 71 immediately carry out such threat declared an intention to harm 72 other persons. When such communication declaration has been 73 made, the administrator may authorize the release of sufficient 74 information to provide adequate warning to the person threatened 75 with harm by the patient. 76 77 For the purpose of determining whether a person meets the 78 criteria for involuntary outpatient placement or for preparing 79 the proposed treatment plan pursuant to s. 394.4655, the clinical record may be released to the state attorney, the 80 81 public defender or the patient's private legal counsel, the 82 court, and to the appropriate mental health professionals, including the service provider identified in s. 83 394.4655(7)(b)2., in accordance with state and federal law. 84 (4) Information from the clinical record must be released 85 86 when a patient has communicated to a service provider a specific 87 threat to cause serious bodily injury or death to an identified

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20191418er 88 or a readily available person, if the service provider 89 reasonably believes, or should reasonably believe according to 90 the standards of his or her profession, that the patient has the 91 apparent intent and ability to imminently or immediately carry 92 out such threat. When such communication has been made, the 93 administrator must authorize the release of sufficient 94 information to communicate the threat to law enforcement. A law 95 enforcement agency that receives notification of a specific 96 threat under this subsection must take appropriate action to 97 prevent the risk of harm, including, but not limited to, 98 notifying the intended victim of such threat or initiating a 99 risk protection order. A service provider's authorization to 100 release information from a clinical record when communicating a 101 threat pursuant to this section may not be the basis of any 102 legal action or criminal or civil liability against the service 103 provider. 104 Section 2. Paragraph (a) of subsection (2) of section 105 394.463, Florida Statutes, is amended, and subsection (4) is 106 added to that section, to read: 107 394.463 Involuntary examination.-(2) INVOLUNTARY EXAMINATION.-108 (a) An involuntary examination may be initiated by any one 109 110 of the following means: 1. A circuit or county court may enter an ex parte order 111 112 stating that a person appears to meet the criteria for 113 involuntary examination and specifying the findings on which 114 that conclusion is based. The ex parte order for involuntary 115 examination must be based on written or oral sworn testimony 116 that includes specific facts that support the findings. If other

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117 less restrictive means are not available, such as voluntary appearance for outpatient evaluation, a law enforcement officer, 118 119 or other designated agent of the court, shall take the person 120 into custody and deliver him or her to an appropriate, or the 121 nearest, facility within the designated receiving system pursuant to s. 394.462 for involuntary examination. The order of 122 123 the court shall be made a part of the patient's clinical record. 124 A fee may not be charged for the filing of an order under this 125 subsection. A facility accepting the patient based on this order 126 must send a copy of the order to the department within 5 the next working days day. The order may be submitted electronically 127 128 through existing data systems, if available. The order shall be 129 valid only until the person is delivered to the facility or for 130 the period specified in the order itself, whichever comes first. 131 If no time limit is specified in the order, the order shall be 132 valid for 7 days after the date that the order was signed.

133 2. A law enforcement officer shall take a person who appears to meet the criteria for involuntary examination into 134 135 custody and deliver the person or have him or her delivered to an appropriate, or the nearest, facility within the designated 136 receiving system pursuant to s. 394.462 for examination. The 137 138 officer shall execute a written report detailing the 139 circumstances under which the person was taken into custody, 140 which must be made a part of the patient's clinical record. Any 141 facility accepting the patient based on this report must send a 142 copy of the report to the department within 5 the next working 143 days day.

144 3. A physician, clinical psychologist, psychiatric nurse,
145 mental health counselor, marriage and family therapist, or

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20191418er 146 clinical social worker may execute a certificate stating that he 147 or she has examined a person within the preceding 48 hours and 148 finds that the person appears to meet the criteria for involuntary examination and stating the observations upon which 149 that conclusion is based. If other less restrictive means, such 150 as voluntary appearance for outpatient evaluation, are not 151 152 available, a law enforcement officer shall take into custody the 153 person named in the certificate and deliver him or her to the 154 appropriate, or nearest, facility within the designated 155 receiving system pursuant to s. 394.462 for involuntary examination. The law enforcement officer shall execute a written 156 157 report detailing the circumstances under which the person was 158 taken into custody. The report and certificate shall be made a 159 part of the patient's clinical record. Any facility accepting the patient based on this certificate must send a copy of the 160 161 certificate to the department within 5 the next working days day. The document may be submitted electronically through 162 163 existing data systems, if applicable. 164 165 When sending the order, report, or certificate to the 166 department, a facility shall at a minimum provide information 167 about which action was taken regarding the patient under 168 paragraph (g), which information shall also be made a part of 169 the patient's clinical record. 170 (4) DATA ANALYSIS.-Using data collected under paragraph 171 (2) (a), the department shall, at a minimum, analyze data on the 172 initiation of involuntary examinations of children, identify any 173 patterns or trends and cases in which involuntary examinations 174 are repeatedly initiated on the same child, study root causes

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20191418er 175 for such patterns, trends, or repeated involuntary examinations, 176 and make recommendations for encouraging alternatives to and 177 eliminating inappropriate initiations of such examinations. The 178 department shall submit a report on its findings and 179 recommendations to the Governor, the President of the Senate, 180 and the Speaker of the House of Representatives by November 1 of 181 each odd numbered year. 182 Section 3. Subsection (2) of section 394.917, Florida 183 Statutes, is amended to read: 184 394.917 Determination; commitment procedure; mistrials; housing; counsel and costs in indigent appellate cases.-185 186 (2) If the court or jury determines that the person is a 187 sexually violent predator, upon the expiration of the incarcerative portion of all criminal sentences and disposition 188 189 of any detainers, the person shall be committed to the custody 190 of the Department of Children and Families for control, care, and treatment, and rehabilitation of criminal offenders, until 191 192 such time as the person's mental abnormality or personality 193 disorder has so changed that it is safe for the person to be at 194 large. At all times, persons who are detained or committed under 195 this part shall be kept in a secure facility segregated from 196 patients of the department who are not detained or committed 197 under this part. Section 4. Section 456.059, Florida Statutes, is amended to 198 199 read: 456.059 Communications confidential; exceptions.-200 201 Communications between a patient and a psychiatrist, as defined 202 in s. 394.455, shall be held confidential and may shall not be 203 disclosed except upon the request of the patient or the

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20191418er 204 patient's legal representative. Provision of psychiatric records 205 and reports are shall be governed by s. 456.057. Notwithstanding 206 any other provision of this section or s. 90.503, when where: 207 (1) A patient is engaged in a treatment relationship with a 208 psychiatrist; 209 (2) Such patient has communicated to the psychiatrist a 210 specific threat to cause serious bodily injury or death to an 211 identified or a readily available person made an actual threat 212 to physically harm an identifiable victim or victims; and 213 (3) The treating psychiatrist makes a clinical judgment 214 that the patient has the apparent intent and ability to 215 imminently or immediately carry out such threat capability to 216 commit such an act and that it is more likely than not that in 217 the near future the patient will carry out that threat, 218 219 the psychiatrist may disclose patient communications to the 220 extent necessary to warn any potential victim or and must 221 disclose patient communications to the extent necessary to 222 communicate the threat to a law enforcement agency. A law 223 enforcement agency that receives notification of a specific 224 threat under this subsection must take appropriate action to prevent the risk of harm, including, but not limited to, 225 226 notifying the intended victim of such threat or initiating a 227 risk protection order. A psychiatrist's disclosure of 228 confidential communications when communicating a threat pursuant 229 to this section may not be the basis of any legal action or 230 criminal or civil liability against the psychiatrist No civil or 231 criminal action shall be instituted, and there shall be no 232 liability on account of disclosure of otherwise confidential

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20191418er 233 communications by a psychiatrist in disclosing a threat pursuant 234 to this section. 235 Section 5. Section 490.0147, Florida Statutes, is amended 2.36 to read: 237 490.0147 Confidentiality and privileged communications.-(1) Any communication between a psychologist any person 238 239 licensed under this chapter and her or his patient or client is 240 shall be confidential. This privilege may be waived under the 241 following conditions: 242 (a) (1) When the psychologist person licensed under this 243 chapter is a party defendant to a civil, criminal, or 244 disciplinary action arising from a complaint filed by the 245 patient or client, in which case the waiver shall be limited to 246 that action-; 247 (b) (2) When the patient or client agrees to the waiver, in 248 writing, or when more than one person in a family is receiving therapy, when each family member agrees to the waiver, in 249 250 writing-; or 251 (c) (3) When a patient or client has communicated to the 252 psychologist a specific threat to cause serious bodily injury or 253 death to an identified or readily available person, and the 254 psychologist makes a clinical judgment that the patient or 255 client has the apparent intent and ability to imminently or 256 immediately carry out such threat and the psychologist there is 257 a clear and immediate probability of physical harm to the patient or client, to other individuals, or to society and the 258 259 person licensed under this chapter communicates the information 260 only to the potential victim, appropriate family member, or law

261 enforcement or other appropriate authorities. A disclosure of

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20191418er 262 confidential communications by a psychologist when communicating 263 a threat pursuant to this subsection may not be the basis of any 264 legal action or criminal or civil liability against the 265 psychologist. 266 (2) Such privilege must be waived, and the psychologist 267 shall disclose patient or client communications to the extent 268 necessary to communicate the threat to a law enforcement agency, 269 if a patient or client has communicated to the psychologist a 270 specific threat to cause serious bodily injury or death to an 271 identified or readily available person, and the psychologist 272 makes a clinical judgment that the patient or client has the 273 apparent intent and ability to imminently or immediately carry 274 out such threat. A law enforcement agency that receives 275 notification of a specific threat under this subsection must 276 take appropriate action to prevent the risk of harm, including, 277 but not limited to, notifying the intended victim of such threat 278 or initiating a risk protection order. A psychologist's 279 disclosure of confidential communications when communicating a 280 threat pursuant to this subsection may not be the basis of any legal action or criminal or civil liability against the 281 282 psychologist. 283 Section 6. Section 491.0147, Florida Statutes, is amended 284 to read: 285 491.0147 Confidentiality and privileged communications.-Any 286 communication between any person licensed or certified under 287 this chapter and her or his patient or client is shall be 288 confidential. 289 (1) This privilege secrecy may be waived under the 290 following conditions:

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291 (a) (1) When the person licensed or certified under this 292 chapter is a party defendant to a civil, criminal, or 293 disciplinary action arising from a complaint filed by the 294 patient or client, in which case the waiver shall be limited to 295 that action. 296 (b) (2) When the patient or client agrees to the waiver, in 297 writing, or, when more than one person in a family is receiving 298 therapy, when each family member agrees to the waiver, in 299 writing. 300 (c) (3) When a patient or client has communicated to the 301 person licensed or certified under this chapter a specific 302 threat to cause serious bodily injury or death to an identified 303 or readily available person, and the person licensed or 304 certified under this chapter makes a clinical judgment that the 305 patient or client has the apparent intent and ability to 306 imminently or immediately carry out such threat, in the clinical 307 judgment of the person licensed or certified under this chapter, 308 there is a clear and immediate probability of physical harm to 309 the patient or client, to other individuals, or to society and 310 the person licensed or certified under this chapter communicates 311 the information only to the potential victim, appropriate family 312 member, or law enforcement or other appropriate authorities. 313 There shall be no liability on the part of, and no cause of action of any nature shall arise against, a person licensed or 314 315 certified under this chapter for the disclosure of otherwise confidential communications under this subsection. A disclosure 316 317 of confidential communications by a person licensed or certified 318 under this chapter when communicating a threat pursuant to this 319 subsection may not be the basis of any legal action or criminal

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320 or civil liability against such person. 321 (2) This privilege must be waived, and the person licensed 322 or certified under this chapter shall disclose patient or client 323 communications to the extent necessary to communicate the threat 324 to a law enforcement agency, if a patient or client has 325 communicated to such person a specific threat to cause serious 326 bodily injury or death to an identified or readily available 327 person, and the person licensed or certified under this chapter 328 makes a clinical judgment that the patient or client has the 329 apparent intent and ability to imminently or immediately carry 330 out such threat. A law enforcement agency that receives 331 notification of a specific threat under this subsection must 332 take appropriate action to prevent the risk of harm, including, 333 but not limited to, notifying the intended victim of such threat 334 or initiating a risk protection order. A disclosure of 335 confidential communications by a person licensed or certified 336 under this chapter when communicating a threat pursuant to this 337 subsection may not be the basis of any legal action or criminal 338 or civil liability against such person. 339 Section 7. Section 1012.583, Florida Statutes, is amended to read: 340 1012.583 Continuing education and inservice training for 341 342 youth suicide awareness and prevention.-(1) By July 1, 2019 Beginning with the 2016-2017 school 343 344 year, the Department of Education, in consultation with the Statewide Office for Suicide Prevention and suicide prevention 345 experts, shall develop a list of approved youth suicide 346 347 awareness and prevention training materials and suicide 348 screening instruments that may be used for training in youth

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20191418er 349 suicide awareness, suicide and prevention, and suicide screening 350 for instructional personnel in elementary school, middle school, 351 and high school. The approved list of materials: 352 (a) Must identify available standardized suicide screening instruments appropriate for use with a school-age population and 353 354 which have validity and reliability and include information 355 about obtaining instruction in the administration and use of 356 such instruments. 357 (b) (a) Must include training on how to identify appropriate 358 mental health services and how to refer youth and their families 359 to those services. 360 (c) (b) May include materials currently being used by a 361 school district if such materials meet any criteria established 362 by the department. 363 (d) (c) May include programs that instructional personnel 364 can complete through a self-review of approved youth suicide awareness and prevention materials. 365 366 (2) A school that chooses to incorporate 2 hours of 367 training offered pursuant to this section shall be considered a "Suicide Prevention Certified School-" if it: 368 369 (a) Incorporates 2 hours of training offered pursuant to 370 this section. The training must be included in the existing 371 continuing education or inservice training requirements for 372 instructional personnel and may not add to the total hours 373 currently required by the department. A school that chooses to 374 participate in the training must require all instructional 375 personnel to participate. 376 (b) Has at least two school-based staff members certified 377 or otherwise deemed competent in the use of a suicide screening

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20191418er 378 instrument approved under subsection (1) and has a policy to use 379 such suicide risk screening instrument to evaluate a student's 380 suicide risk before requesting the initiation of, or initiating, 381 an involuntary examination due to concerns about that student's 382 suicide risk. 383 (3) A school that meets the criteria in subsection (2) participates in the suicide awareness and prevention training 384 385 pursuant to this section must report its compliance 386 participation to the department. The department shall keep an 387 updated record of all Suicide Prevention Certified Schools and 388 shall post the list of these schools on the department's 389 website. Each school shall also post on its own website whether 390 it is a Suicide Prevention Certified School, and each school 391 district shall post on its district website a list of the 392 Suicide Prevention Certified Schools in that district. 393 (4) A person has no cause of action for any loss or damage 394 caused by an act or omission resulting from the implementation 395 of this section or resulting from any training required by this 396 section unless the loss or damage was caused by willful or wanton misconduct. This section does not create any new duty of 397 398 care or basis of liability. 399 (5) The State Board of Education may adopt rules to 400 implement this section. 401 Section 8. For the purpose of incorporating the amendment 402 made by this act to section 490.0147, Florida Statutes, in a 403 reference thereto, paragraph (u) of subsection (1) of section 404 490.009, Florida Statutes, is reenacted to read: 405 490.009 Discipline.-

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(1) The following acts constitute grounds for denial of a

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407	license or disciplinary action, as specified in s. 456.072(2):
408	(u) Failing to maintain in confidence a communication made
409	by a patient or client in the context of such services, except
410	as provided in s. 490.0147.
411	Section 9. For the purpose of incorporating the amendment
412	made by this act to section 491.0147, Florida Statutes, in a
413	reference thereto, paragraph (u) of subsection (1) of section
414	491.009, Florida Statutes, is reenacted to read:
415	491.009 Discipline
416	(1) The following acts constitute grounds for denial of a
417	license or disciplinary action, as specified in s. 456.072(2):
418	(u) Failure of the licensee, registered intern, or
419	certificateholder to maintain in confidence a communication made
420	by a patient or client in the context of such services, except
421	as provided in s. 491.0147.
422	Section 10. This act shall take effect July 1, 2019.

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