

Bill No. SB's 114 & 444

Barcode 475964

586-837A-06

Proposed Committee Substitute by the Committee on Children and Families

1 A bill to be entitled

2 An act relating to drug court programs;

3 providing a short title; amending s. 39.001,

4 F.S.; providing additional legislative purposes

5 and intent with respect to the treatment of

6 substance abuse, including the use of the drug

7 court program model; authorizing the court to

8 require certain persons to undergo treatment

9 following adjudication; amending s. 39.407,

10 F.S.; authorizing the court to order specified

11 persons to submit to a substance abuse

12 assessment upon a showing of good cause in

13 connection with a shelter petition or petition

14 for dependency; amending ss. 39.507 and 39.521,

15 F.S.; authorizing the court to order specified

16 persons to submit to a substance abuse

17 assessment as part of an adjudicatory order or

18 pursuant to a disposition hearing; requiring a

19 showing of good cause; authorizing the court to

20 require participation in a treatment-based drug

21 court program; authorizing the court to impose

22 sanctions for noncompliance; amending s.

23 39.701, F.S.; authorizing the court to extend

24 the time for completing a case plan during

25 judicial review, based upon participation in a

26 treatment-based drug court program; amending s.

27 397.334, F.S.; revising legislative intent with

28 respect to treatment-based drug court programs

29 to reflect participation by community support

30 agencies, the Department of Education, and

31 other individuals; including postadjudicatory

586-837A-06

1 programs as part of treatment-based drug court
2 programs; providing requirements and sanctions,
3 including clinical placement or incarceration,
4 for the coordinated strategy developed by the
5 drug court team to encourage participant
6 compliance; requiring each judicial circuit to
7 establish a position for a coordinator of the
8 treatment-based drug court program, subject to
9 annual appropriation by the Legislature;
10 authorizing the chief judge of each judicial
11 circuit to appoint an advisory committee for
12 the treatment-based drug court program;
13 providing for membership of the committee;
14 revising language with respect to an annual
15 report; amending s. 910.035, F.S.; revising
16 language with respect to conditions for the
17 transfer of a case in the drug court treatment
18 program to a county other than that in which
19 the charge arose; amending ss. 948.08, 948.16,
20 and 985.306, F.S., relating to felony,
21 misdemeanor, and delinquency pretrial substance
22 abuse education and treatment intervention
23 programs; deleting a provision authorizing the
24 court or state attorney to deny a defendant's
25 admission to a treatment program; providing
26 requirements and sanctions, including clinical
27 placement or incarceration, for the coordinated
28 strategy developed by the drug court team to
29 encourage participant compliance and removing
30 provisions authorizing appointment of an
31 advisory committee, to conform to changes made

586-837A-06

1 by the act; providing an effective date.

2

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

4

5 Section 1. This act may be cited as the "Robert J.
6 Koch Drug Court Intervention Act."

7 Section 2. Subsection (4) of section 39.001, Florida
8 Statutes, is amended to read:

9 39.001 Purposes and intent; personnel standards and
10 screening.--

11 (4) SUBSTANCE ABUSE SERVICES.--

12 (a) The Legislature recognizes that early referral and
13 comprehensive treatment can help combat substance abuse in
14 families and that treatment is cost-effective.

15 (b) The Legislature establishes the following goals
16 for the state related to substance abuse treatment services in
17 the dependency process:

18 1. To ensure the safety of children.

19 2. To prevent and remediate the consequences of
20 substance abuse on families involved in protective supervision
21 or foster care and reduce substance abuse, including alcohol
22 abuse, for families who are at risk of being involved in
23 protective supervision or foster care.

24 3. To expedite permanency for children and reunify
25 healthy, intact families, when appropriate.

26 4. To support families in recovery.

27 (c) The Legislature finds that children in the care of
28 the state's dependency system need appropriate health care
29 services, that the impact of substance abuse on health
30 indicates the need for health care services to include
31 substance abuse services to children and parents where

586-837A-06

1 appropriate, and that it is in the state's best interest that
 2 such children be provided the services they need to enable
 3 them to become and remain independent of state care. In order
 4 to provide these services, the state's dependency system must
 5 have the ability to identify and provide appropriate
 6 intervention and treatment for children with personal or
 7 family-related substance abuse problems.

8 (d) It is the intent of the Legislature to encourage
 9 the use of the drug court program model established by s.
 10 397.334 and authorize courts to assess parents and children
 11 where good cause is shown to identify and address substance
 12 abuse problems as the court deems appropriate at every stage
 13 of the dependency process. Participation in treatment,
 14 including a treatment-based drug court program, may be
 15 required by the court following adjudication. Participation in
 16 assessment and treatment prior to adjudication shall be
 17 voluntary, except as provided in s. 39.407(16).

18 (e) It is therefore the purpose of the Legislature to
 19 provide authority for the state to contract with community
 20 substance abuse treatment providers for the development and
 21 operation of specialized support and overlay services for the
 22 dependency system, which will be fully implemented and used
 23 ~~utilized~~ as resources permit.

24 (f) Participation in the treatment-based drug court
 25 program does not divest any public or private agency of its
 26 responsibility for a child or adult, but is intended to enable
 27 these agencies to better meet their needs through shared
 28 responsibility and resources.

29 Section 3. Section 39.407, Florida Statutes, is
 30 amended to read:

31 39.407 Medical, psychiatric, and psychological

586-837A-06

1 examination and treatment of child; physical, ~~or~~ mental, or
2 substance abuse examination of ~~parent or~~ person with or
3 requesting child custody ~~of child~~.--

4 (1) When any child is removed from the home and
5 maintained in an out-of-home placement, the department is
6 authorized to have a medical screening performed on the child
7 without authorization from the court and without consent from
8 a parent or legal custodian. Such medical screening shall be
9 performed by a licensed health care professional and shall be
10 to examine the child for injury, illness, and communicable
11 diseases and to determine the need for immunization. The
12 department shall by rule establish the invasiveness of the
13 medical procedures authorized to be performed under this
14 subsection. In no case does this subsection authorize the
15 department to consent to medical treatment for such children.

16 (2) When the department has performed the medical
17 screening authorized by subsection (1), or when it is
18 otherwise determined by a licensed health care professional
19 that a child who is in an out-of-home placement, but who has
20 not been committed to the department, is in need of medical
21 treatment, including the need for immunization, consent for
22 medical treatment shall be obtained in the following manner:

23 (a)1. Consent to medical treatment shall be obtained
24 from a parent or legal custodian of the child; or

25 2. A court order for such treatment shall be obtained.

26 (b) If a parent or legal custodian of the child is
27 unavailable and his or her whereabouts cannot be reasonably
28 ascertained, and it is after normal working hours so that a
29 court order cannot reasonably be obtained, an authorized agent
30 of the department shall have the authority to consent to

31 necessary medical treatment, including immunization, for the

586-837A-06

1 child. The authority of the department to consent to medical
2 treatment in this circumstance shall be limited to the time
3 reasonably necessary to obtain court authorization.

4 (c) If a parent or legal custodian of the child is
5 available but refuses to consent to the necessary treatment,
6 including immunization, a court order shall be required unless
7 the situation meets the definition of an emergency in s.
8 743.064 or the treatment needed is related to suspected abuse,
9 abandonment, or neglect of the child by a parent, caregiver,
10 or legal custodian. In such case, the department shall have
11 the authority to consent to necessary medical treatment. This
12 authority is limited to the time reasonably necessary to
13 obtain court authorization.

14
15 In no case shall the department consent to sterilization,
16 abortion, or termination of life support.

17 (3)(a)1. Except as otherwise provided in subparagraph
18 (b)1. or paragraph (e), before the department provides
19 psychotropic medications to a child in its custody, the
20 prescribing physician shall attempt to obtain express and
21 informed consent, as defined in s. 394.455(9) and as described
22 in s. 394.459(3)(a), from the child's parent or legal
23 guardian. The department must take steps necessary to
24 facilitate the inclusion of the parent in the child's
25 consultation with the physician. However, if the parental
26 rights of the parent have been terminated, the parent's
27 location or identity is unknown or cannot reasonably be
28 ascertained, or the parent declines to give express and
29 informed consent, the department may, after consultation with
30 the prescribing physician, seek court authorization to provide
31 the psychotropic medications to the child. Unless parental

586-837A-06

1 rights have been terminated and if it is possible to do so,
2 the department shall continue to involve the parent in the
3 decisionmaking process regarding the provision of psychotropic
4 medications. If, at any time, a parent whose parental rights
5 have not been terminated provides express and informed consent
6 to the provision of a psychotropic medication, the
7 requirements of this section that the department seek court
8 authorization do not apply to that medication until such time
9 as the parent no longer consents.

10 2. Any time the department seeks a medical evaluation
11 to determine the need to initiate or continue a psychotropic
12 medication for a child, the department must provide to the
13 evaluating physician all pertinent medical information known
14 to the department concerning that child.

15 (b)1. If a child who is removed from the home under s.
16 39.401 is receiving prescribed psychotropic medication at the
17 time of removal and parental authorization to continue
18 providing the medication cannot be obtained, the department
19 may take possession of the remaining medication and may
20 continue to provide the medication as prescribed until the
21 shelter hearing, if it is determined that the medication is a
22 current prescription for that child and the medication is in
23 its original container.

24 2. If the department continues to provide the
25 psychotropic medication to a child when parental authorization
26 cannot be obtained, the department shall notify the parent or
27 legal guardian as soon as possible that the medication is
28 being provided to the child as provided in subparagraph 1. The
29 child's official departmental record must include the reason
30 parental authorization was not initially obtained and an
31 explanation of why the medication is necessary for the child's

586-837A-06

1 well-being.

2 3. If the department is advised by a physician
3 licensed under chapter 458 or chapter 459 that the child
4 should continue the psychotropic medication and parental
5 authorization has not been obtained, the department shall
6 request court authorization at the shelter hearing to continue
7 to provide the psychotropic medication and shall provide to
8 the court any information in its possession in support of the
9 request. Any authorization granted at the shelter hearing may
10 extend only until the arraignment hearing on the petition for
11 adjudication of dependency or 28 days following the date of
12 removal, whichever occurs sooner.

13 4. Before filing the dependency petition, the
14 department shall ensure that the child is evaluated by a
15 physician licensed under chapter 458 or chapter 459 to
16 determine whether it is appropriate to continue the
17 psychotropic medication. If, as a result of the evaluation,
18 the department seeks court authorization to continue the
19 psychotropic medication, a motion for such continued
20 authorization shall be filed at the same time as the
21 dependency petition, within 21 days after the shelter hearing.

22 (c) Except as provided in paragraphs (b) and (e), the
23 department must file a motion seeking the court's
24 authorization to initially provide or continue to provide
25 psychotropic medication to a child in its legal custody. The
26 motion must be supported by a written report prepared by the
27 department which describes the efforts made to enable the
28 prescribing physician to obtain express and informed consent
29 for providing the medication to the child and other treatments
30 considered or recommended for the child. In addition, the
31 motion must be supported by the prescribing physician's signed

586-837A-06

1 medical report providing:

2 1. The name of the child, the name and range of the
3 dosage of the psychotropic medication, and that there is a
4 need to prescribe psychotropic medication to the child based
5 upon a diagnosed condition for which such medication is being
6 prescribed.

7 2. A statement indicating that the physician has
8 reviewed all medical information concerning the child which
9 has been provided.

10 3. A statement indicating that the psychotropic
11 medication, at its prescribed dosage, is appropriate for
12 treating the child's diagnosed medical condition, as well as
13 the behaviors and symptoms the medication, at its prescribed
14 dosage, is expected to address.

15 4. An explanation of the nature and purpose of the
16 treatment; the recognized side effects, risks, and
17 contraindications of the medication; drug-interaction
18 precautions; the possible effects of stopping the medication;
19 and how the treatment will be monitored, followed by a
20 statement indicating that this explanation was provided to the
21 child if age appropriate and to the child's caregiver.

22 5. Documentation addressing whether the psychotropic
23 medication will replace or supplement any other currently
24 prescribed medications or treatments; the length of time the
25 child is expected to be taking the medication; and any
26 additional medical, mental health, behavioral, counseling, or
27 other services that the prescribing physician recommends.

28 (d)1. The department must notify all parties of the
29 proposed action taken under paragraph (c) in writing or by
30 whatever other method best ensures that all parties receive
31 notification of the proposed action within 48 hours after the

586-837A-06

1 motion is filed. If any party objects to the department's
2 motion, that party shall file the objection within 2 working
3 days after being notified of the department's motion. If any
4 party files an objection to the authorization of the proposed
5 psychotropic medication, the court shall hold a hearing as
6 soon as possible before authorizing the department to
7 initially provide or to continue providing psychotropic
8 medication to a child in the legal custody of the department.
9 At such hearing and notwithstanding s. 90.803, the medical
10 report described in paragraph (c) is admissible in evidence.
11 The prescribing physician need not attend the hearing or
12 testify unless the court specifically orders such attendance
13 or testimony, or a party subpoenas the physician to attend the
14 hearing or provide testimony. If, after considering any
15 testimony received, the court finds that the department's
16 motion and the physician's medical report meet the
17 requirements of this subsection and that it is in the child's
18 best interests, the court may order that the department
19 provide or continue to provide the psychotropic medication to
20 the child without additional testimony or evidence. At any
21 hearing held under this paragraph, the court shall further
22 inquire of the department as to whether additional medical,
23 mental health, behavioral, counseling, or other services are
24 being provided to the child by the department which the
25 prescribing physician considers to be necessary or beneficial
26 in treating the child's medical condition and which the
27 physician recommends or expects to provide to the child in
28 concert with the medication. The court may order additional
29 medical consultation, including consultation with the
30 MedConsult line at the University of Florida, if available, or
31 require the department to obtain a second opinion within a

586-837A-06

1 reasonable timeframe as established by the court, not to
 2 exceed 21 calendar days, after such order based upon
 3 consideration of the best interests of the child. The
 4 department must make a referral for an appointment for a
 5 second opinion with a physician within 1 working day. The
 6 court may not order the discontinuation of prescribed
 7 psychotropic medication if such order is contrary to the
 8 decision of the prescribing physician unless the court first
 9 obtains an opinion from a licensed psychiatrist, if available,
 10 or, if not available, a physician licensed under chapter 458
 11 or chapter 459, stating that more likely than not,
 12 discontinuing the medication would not cause significant harm
 13 to the child. If, however, the prescribing psychiatrist
 14 specializes in mental health care for children and
 15 adolescents, the court may not order the discontinuation of
 16 prescribed psychotropic medication unless the required opinion
 17 is also from a psychiatrist who specializes in mental health
 18 care for children and adolescents. The court may also order
 19 the discontinuation of prescribed psychotropic medication if a
 20 child's treating physician, licensed under chapter 458 or
 21 chapter 459, states that continuing the prescribed
 22 psychotropic medication would cause significant harm to the
 23 child due to a diagnosed nonpsychiatric medical condition.

24 2. The burden of proof at any hearing held under this
 25 paragraph shall be by a preponderance of the evidence.

26 (e)1. If the child's prescribing physician certifies
 27 in the signed medical report required in paragraph (c) that
 28 delay in providing a prescribed psychotropic medication would
 29 more likely than not cause significant harm to the child, the
 30 medication may be provided in advance of the issuance of a
 31 court order. In such event, the medical report must provide

586-837A-06

1 the specific reasons why the child may experience significant
 2 harm and the nature and the extent of the potential harm. The
 3 department must submit a motion seeking continuation of the
 4 medication and the physician's medical report to the court,
 5 the child's guardian ad litem, and all other parties within 3
 6 working days after the department commences providing the
 7 medication to the child. The department shall seek the order
 8 at the next regularly scheduled court hearing required under
 9 this chapter, or within 30 days after the date of the
 10 prescription, whichever occurs sooner. If any party objects to
 11 the department's motion, the court shall hold a hearing within
 12 7 days.

13 2. Psychotropic medications may be administered in
 14 advance of a court order in hospitals, crisis stabilization
 15 units, and in statewide inpatient psychiatric programs. Within
 16 3 working days after the medication is begun, the department
 17 must seek court authorization as described in paragraph (c).

18 (f)1. The department shall fully inform the court of
 19 the child's medical and behavioral status as part of the
 20 social services report prepared for each judicial review
 21 hearing held for a child for whom psychotropic medication has
 22 been prescribed or provided under this subsection. As a part
 23 of the information provided to the court, the department shall
 24 furnish copies of all pertinent medical records concerning the
 25 child which have been generated since the previous hearing. On
 26 its own motion or on good cause shown by any party, including
 27 any guardian ad litem, attorney, or attorney ad litem who has
 28 been appointed to represent the child or the child's
 29 interests, the court may review the status more frequently
 30 than required in this subsection.

31 2. The court may, in the best interests of the child,

586-837A-06

1 order the department to obtain a medical opinion addressing
2 whether the continued use of the medication under the
3 circumstances is safe and medically appropriate.

4 (g) The department shall adopt rules to ensure that
5 children receive timely access to clinically appropriate
6 psychotropic medications. These rules must include, but need
7 not be limited to, the process for determining which
8 adjunctive services are needed, the uniform process for
9 facilitating the prescribing physician's ability to obtain the
10 express and informed consent of a child's parent or guardian,
11 the procedures for obtaining court authorization for the
12 provision of a psychotropic medication, the frequency of
13 medical monitoring and reporting on the status of the child to
14 the court, how the child's parents will be involved in the
15 treatment-planning process if their parental rights have not
16 been terminated, and how caretakers are to be provided
17 information contained in the physician's signed medical
18 report. The rules must also include uniform forms to be used
19 in requesting court authorization for the use of a
20 psychotropic medication and provide for the integration of
21 each child's treatment plan and case plan. The department must
22 begin the formal rulemaking process within 90 days after the
23 effective date of this act.

24 (4)(a) A judge may order a child in an out-of-home
25 placement to be examined by a licensed health care
26 professional.

27 (b) The judge may also order such child to be
28 evaluated by a psychiatrist or a psychologist or, if a
29 developmental disability is suspected or alleged, by the
30 developmental disability diagnostic and evaluation team of the
31 department. If it is necessary to place a child in a

586-837A-06

1 residential facility for such evaluation, the criteria and
2 procedure established in s. 394.463(2) or chapter 393 shall be
3 used, whichever is applicable.

4 (c) The judge may also order such child to be
5 evaluated by a district school board educational needs
6 assessment team. The educational needs assessment provided by
7 the district school board educational needs assessment team
8 shall include, but not be limited to, reports of intelligence
9 and achievement tests, screening for learning disabilities and
10 other handicaps, and screening for the need for alternative
11 education as defined in s. 1001.42.

12 (5) A judge may order a child in an out-of-home
13 placement to be treated by a licensed health care professional
14 based on evidence that the child should receive treatment.
15 The judge may also order such child to receive mental health
16 or developmental disabilities services from a psychiatrist,
17 psychologist, or other appropriate service provider. Except
18 as provided in subsection (6), if it is necessary to place the
19 child in a residential facility for such services, the
20 procedures and criteria established in s. 394.467 or chapter
21 393 shall be used, whichever is applicable. A child may be
22 provided developmental disabilities or mental health services
23 in emergency situations, pursuant to the procedures and
24 criteria contained in s. 394.463(1) or chapter 393, whichever
25 is applicable.

26 (6) Children who are in the legal custody of the
27 department may be placed by the department, without prior
28 approval of the court, in a residential treatment center
29 licensed under s. 394.875 or a hospital licensed under chapter
30 395 for residential mental health treatment only pursuant to
31 this section or may be placed by the court in accordance with

586-837A-06

1 an order of involuntary examination or involuntary placement
 2 entered pursuant to s. 394.463 or s. 394.467. All children
 3 placed in a residential treatment program under this
 4 subsection must have a guardian ad litem appointed.

5 (a) As used in this subsection, the term:

6 1. "Residential treatment" means placement for
 7 observation, diagnosis, or treatment of an emotional
 8 disturbance in a residential treatment center licensed under
 9 s. 394.875 or a hospital licensed under chapter 395.

10 2. "Least restrictive alternative" means the treatment
 11 and conditions of treatment that, separately and in
 12 combination, are no more intrusive or restrictive of freedom
 13 than reasonably necessary to achieve a substantial therapeutic
 14 benefit or to protect the child or adolescent or others from
 15 physical injury.

16 3. "Suitable for residential treatment" or
 17 "suitability" means a determination concerning a child or
 18 adolescent with an emotional disturbance as defined in s.
 19 394.492(5) or a serious emotional disturbance as defined in s.
 20 394.492(6) that each of the following criteria is met:

- 21 a. The child requires residential treatment.
- 22 b. The child is in need of a residential treatment
 23 program and is expected to benefit from mental health
 24 treatment.
- 25 c. An appropriate, less restrictive alternative to
 26 residential treatment is unavailable.

27 (b) Whenever the department believes that a child in
 28 its legal custody is emotionally disturbed and may need
 29 residential treatment, an examination and suitability
 30 assessment must be conducted by a qualified evaluator who is
 31 appointed by the Agency for Health Care Administration. This

586-837A-06

1 suitability assessment must be completed before the placement
 2 of the child in a residential treatment center for emotionally
 3 disturbed children and adolescents or a hospital. The
 4 qualified evaluator must be a psychiatrist or a psychologist
 5 licensed in Florida who has at least 3 years of experience in
 6 the diagnosis and treatment of serious emotional disturbances
 7 in children and adolescents and who has no actual or perceived
 8 conflict of interest with any inpatient facility or
 9 residential treatment center or program.

10 (c) Before a child is admitted under this subsection,
 11 the child shall be assessed for suitability for residential
 12 treatment by a qualified evaluator who has conducted a
 13 personal examination and assessment of the child and has made
 14 written findings that:

15 1. The child appears to have an emotional disturbance
 16 serious enough to require residential treatment and is
 17 reasonably likely to benefit from the treatment.

18 2. The child has been provided with a clinically
 19 appropriate explanation of the nature and purpose of the
 20 treatment.

21 3. All available modalities of treatment less
 22 restrictive than residential treatment have been considered,
 23 and a less restrictive alternative that would offer comparable
 24 benefits to the child is unavailable.

25
 26 A copy of the written findings of the evaluation and
 27 suitability assessment must be provided to the department and
 28 to the guardian ad litem, who shall have the opportunity to
 29 discuss the findings with the evaluator.

30 (d) Immediately upon placing a child in a residential
 31 treatment program under this section, the department must

586-837A-06

1 notify the guardian ad litem and the court having jurisdiction
 2 over the child and must provide the guardian ad litem and the
 3 court with a copy of the assessment by the qualified
 4 evaluator.

5 (e) Within 10 days after the admission of a child to a
 6 residential treatment program, the director of the residential
 7 treatment program or the director's designee must ensure that
 8 an individualized plan of treatment has been prepared by the
 9 program and has been explained to the child, to the
 10 department, and to the guardian ad litem, and submitted to the
 11 department. The child must be involved in the preparation of
 12 the plan to the maximum feasible extent consistent with his or
 13 her ability to understand and participate, and the guardian ad
 14 litem and the child's foster parents must be involved to the
 15 maximum extent consistent with the child's treatment needs.
 16 The plan must include a preliminary plan for residential
 17 treatment and aftercare upon completion of residential
 18 treatment. The plan must include specific behavioral and
 19 emotional goals against which the success of the residential
 20 treatment may be measured. A copy of the plan must be provided
 21 to the child, to the guardian ad litem, and to the department.

22 (f) Within 30 days after admission, the residential
 23 treatment program must review the appropriateness and
 24 suitability of the child's placement in the program. The
 25 residential treatment program must determine whether the child
 26 is receiving benefit toward the treatment goals and whether
 27 the child could be treated in a less restrictive treatment
 28 program. The residential treatment program shall prepare a
 29 written report of its findings and submit the report to the
 30 guardian ad litem and to the department. The department must
 31 submit the report to the court. The report must include a

586-837A-06

1 discharge plan for the child. The residential treatment
 2 program must continue to evaluate the child's treatment
 3 progress every 30 days thereafter and must include its
 4 findings in a written report submitted to the department. The
 5 department may not reimburse a facility until the facility has
 6 submitted every written report that is due.

7 (g)1. The department must submit, at the beginning of
 8 each month, to the court having jurisdiction over the child, a
 9 written report regarding the child's progress toward achieving
 10 the goals specified in the individualized plan of treatment.

11 2. The court must conduct a hearing to review the
 12 status of the child's residential treatment plan no later than
 13 3 months after the child's admission to the residential
 14 treatment program. An independent review of the child's
 15 progress toward achieving the goals and objectives of the
 16 treatment plan must be completed by a qualified evaluator and
 17 submitted to the court before its 3-month review.

18 3. For any child in residential treatment at the time
 19 a judicial review is held pursuant to s. 39.701, the child's
 20 continued placement in residential treatment must be a subject
 21 of the judicial review.

22 4. If at any time the court determines that the child
 23 is not suitable for continued residential treatment, the court
 24 shall order the department to place the child in the least
 25 restrictive setting that is best suited to meet his or her
 26 needs.

27 (h) After the initial 3-month review, the court must
 28 conduct a review of the child's residential treatment plan
 29 every 90 days.

30 (i) The department must adopt rules for implementing
 31 timeframes for the completion of suitability assessments by

586-837A-06

1 qualified evaluators and a procedure that includes timeframes
 2 for completing the 3-month independent review by the qualified
 3 evaluators of the child's progress toward achieving the goals
 4 and objectives of the treatment plan which review must be
 5 submitted to the court. The Agency for Health Care
 6 Administration must adopt rules for the registration of
 7 qualified evaluators, the procedure for selecting the
 8 evaluators to conduct the reviews required under this section,
 9 and a reasonable, cost-efficient fee schedule for qualified
 10 evaluators.

11 (7) When a child is in an out-of-home placement, a
 12 licensed health care professional shall be immediately called
 13 if there are indications of physical injury or illness, or the
 14 child shall be taken to the nearest available hospital for
 15 emergency care.

16 (8) Except as otherwise provided herein, nothing in
 17 this section shall be deemed to eliminate the right of a
 18 parent, legal custodian, or the child to consent to
 19 examination or treatment for the child.

20 (9) Except as otherwise provided herein, nothing in
 21 this section shall be deemed to alter the provisions of s.
 22 743.064.

23 (10) A court shall not be precluded from ordering
 24 services or treatment to be provided to the child by a duly
 25 accredited practitioner who relies solely on spiritual means
 26 for healing in accordance with the tenets and practices of a
 27 church or religious organization, when required by the child's
 28 health and when requested by the child.

29 (11) Nothing in this section shall be construed to
 30 authorize the permanent sterilization of the child unless such
 31 sterilization is the result of or incidental to medically

586-837A-06

1 necessary treatment to protect or preserve the life of the
2 child.

3 (12) For the purpose of obtaining an evaluation or
4 examination, or receiving treatment as authorized pursuant to
5 this section, no child alleged to be or found to be dependent
6 shall be placed in a detention home or other program used
7 primarily for the care and custody of children alleged or
8 found to have committed delinquent acts.

9 (13) The parents or legal custodian of a child in an
10 out-of-home placement remain financially responsible for the
11 cost of medical treatment provided to the child even if either
12 one or both of the parents or if the legal custodian did not
13 consent to the medical treatment. After a hearing, the court
14 may order the parents or legal custodian, if found able to do
15 so, to reimburse the department or other provider of medical
16 services for treatment provided.

17 (14) Nothing in this section alters the authority of
18 the department to consent to medical treatment for a dependent
19 child when the child has been committed to the department and
20 the department has become the legal custodian of the child.

21 (15) At any time after the filing of a shelter
22 petition or petition for dependency, when the mental or
23 physical condition, including the blood group, of a parent,
24 caregiver, legal custodian, or other person who has custody or
25 is requesting custody of a child is in controversy, the court
26 may order the person to submit to a physical or mental
27 examination by a qualified professional. The order may be made
28 only upon good cause shown and pursuant to notice and
29 procedures as set forth by the Florida Rules of Juvenile
30 Procedure.

31 (16) At any time after a shelter petition or petition

586-837A-06

1 for dependency is filed, the court may order a child or a
 2 person who has custody or is requesting custody of the child
 3 to submit to a substance abuse assessment and evaluation. The
 4 assessment and evaluation must be administered by a qualified
 5 professional, as defined in s. 397.311. The order may be made
 6 only upon good cause shown. This subsection does not authorize
 7 placement of a child with a person seeking custody, other than
 8 the parent or legal custodian, who requires substance abuse
 9 treatment.

10 Section 4. Subsection (9) is added to section 39.507,
 11 Florida Statutes, to read:

12 39.507 Adjudicatory hearings; orders of
 13 adjudication.--

14 (9) After an adjudication of dependency, or a finding
 15 of dependency where adjudication is withheld, the court may
 16 order a child or a person who has custody or is requesting
 17 custody of the child to submit to a substance abuse assessment
 18 or evaluation. The assessment or evaluation must be
 19 administered by a qualified professional, as defined in s.
 20 397.311. The court may also require such person to participate
 21 in and comply with treatment and services identified as
 22 necessary, including, when appropriate and available,
 23 participation in and compliance with a treatment-based drug
 24 court program established under s. 397.334. In addition to
 25 supervision by the department, the court, including the
 26 treatment-based drug court program, may oversee the progress
 27 and compliance with treatment by the child or a person who has
 28 custody or is requesting custody of the child. The court may
 29 impose appropriate available sanctions for noncompliance upon
 30 the child or a person who has custody or is requesting custody
 31 of the child or make a finding of noncompliance for

586-837A-06

1 consideration in determining whether an alternative placement
 2 of the child is in the child's best interests. Any order
 3 entered under this subsection may be made only upon good cause
 4 shown. This subsection does not authorize placement of a child
 5 with a person seeking custody, other than the parent or legal
 6 custodian, who requires substance abuse treatment.

7 Section 5. Paragraph (b) of subsection (1) of section
 8 39.521, Florida Statutes, is amended to read:

9 39.521 Disposition hearings; powers of disposition.--

10 (1) A disposition hearing shall be conducted by the
 11 court, if the court finds that the facts alleged in the
 12 petition for dependency were proven in the adjudicatory
 13 hearing, or if the parents or legal custodians have consented
 14 to the finding of dependency or admitted the allegations in
 15 the petition, have failed to appear for the arraignment
 16 hearing after proper notice, or have not been located despite
 17 a diligent search having been conducted.

18 (b) When any child is adjudicated by a court to be
 19 dependent, the court having jurisdiction of the child has the
 20 power by order to:

21 1. Require the parent and, when appropriate, the legal
 22 custodian and the child, to participate in treatment and
 23 services identified as necessary. The court may require the
 24 child or the person who has custody or who is requesting
 25 custody of the child to submit to a substance abuse assessment
 26 or evaluation. The assessment or evaluation must be
 27 administered by a qualified professional, as defined in s.
 28 397.311. The court may also require such person to participate
 29 in and comply with treatment and services identified as
 30 necessary, including, when appropriate and available,
 31 participation in and compliance with a treatment-based drug

586-837A-06

1 court program established under s. 397.334. In addition to
 2 supervision by the department, the court, including the
 3 treatment-based drug court program, may oversee the progress
 4 and compliance with treatment by the child or a person who has
 5 custody or is requesting custody of the child. The court may
 6 impose appropriate available sanctions for noncompliance upon
 7 the child or a person who has custody or is requesting custody
 8 of the child or make a finding of noncompliance for
 9 consideration in determining whether an alternative placement
 10 of the child is in the child's best interests. Any order
 11 entered under this subparagraph may be made only upon good
 12 cause shown. This subparagraph does not authorize placement of
 13 a child with a person seeking custody of the child, other than
 14 the child's parent or legal custodian, who requires substance
 15 abuse treatment.

16 2. Require, if the court deems necessary, the parties
 17 to participate in dependency mediation.

18 3. Require placement of the child either under the
 19 protective supervision of an authorized agent of the
 20 department in the home of one or both of the child's parents
 21 or in the home of a relative of the child or another adult
 22 approved by the court, or in the custody of the department.
 23 Protective supervision continues until the court terminates it
 24 or until the child reaches the age of 18, whichever date is
 25 first. Protective supervision shall be terminated by the court
 26 whenever the court determines that permanency has been
 27 achieved for the child, whether with a parent, another
 28 relative, or a legal custodian, and that protective
 29 supervision is no longer needed. The termination of
 30 supervision may be with or without retaining jurisdiction, at
 31 the court's discretion, and shall in either case be considered

586-837A-06

1 a permanency option for the child. The order terminating
 2 supervision by the department shall set forth the powers of
 3 the custodian of the child and shall include the powers
 4 ordinarily granted to a guardian of the person of a minor
 5 unless otherwise specified. Upon the court's termination of
 6 supervision by the department, no further judicial reviews are
 7 required, so long as permanency has been established for the
 8 child.

9 Section 6. Paragraph (d) of subsection (9) of section
 10 39.701, Florida Statutes, is amended to read:

11 39.701 Judicial review.--

12 (9)

13 (d) The court may extend the time limitation of the
 14 case plan, or may modify the terms of the plan, which, in
 15 addition to other modifications, may include a requirement
 16 that the parent or legal custodian participate in a
 17 treatment-based drug court program established under s.
 18 397.334, based upon information provided by the social service
 19 agency, and the guardian ad litem, if one has been appointed,
 20 the parent or parents, and the foster parents or legal
 21 custodian, and any other competent information on record
 22 demonstrating the need for the amendment. If the court extends
 23 the time limitation of the case plan, the court must make
 24 specific findings concerning the frequency of past
 25 parent-child visitation, if any, and the court may authorize
 26 the expansion or restriction of future visitation.

27 Modifications to the plan must be handled as prescribed in s.
 28 39.601. Any extension of a case plan must comply with the time
 29 requirements and other requirements specified by this chapter.

30 Section 7. Section 397.334, Florida Statutes, is
 31 amended to read:

586-837A-06

1 397.334 Treatment-based drug court programs.--

2 (1) Each county may fund a treatment-based drug court
3 program under which persons in the justice system assessed
4 with a substance abuse problem will be processed in such a
5 manner as to appropriately address the severity of the
6 identified substance abuse problem through treatment services
7 ~~plans~~ tailored to the individual needs of the participant. It
8 is the intent of the Legislature to encourage the Department
9 of Corrections, the Department of Children and Family
10 Services, the Department of Juvenile Justice, the Department
11 of Health, the Department of Law Enforcement, the Department
12 of Education, and such ~~other~~ agencies, local governments, law
13 enforcement agencies, ~~and~~ other interested public or private
14 sources, and individuals to support the creation and
15 establishment of these problem-solving court programs.

16 Participation in the treatment-based drug court programs does
17 not divest any public or private agency of its responsibility
18 for a child or adult, but enables ~~allows~~ these agencies to
19 better meet their needs through shared responsibility and
20 resources.

21 (2) Entry into any pretrial treatment-based drug court
22 program shall be voluntary. The court may only order an
23 individual to enter into a pretrial treatment-based drug court
24 program upon written agreement by the individual, which shall
25 include a statement that the individual understands the
26 requirements of the program and the potential sanctions for
27 noncompliance.

28 ~~(3)(2)~~ The treatment-based drug court programs shall
29 include therapeutic jurisprudence principles and adhere to the
30 following 10 key components, recognized by the Drug Courts

31 Program Office of the Office of Justice Programs of the United

586-837A-06

1 States Department of Justice and adopted by the Florida
2 Supreme Court Treatment-Based Drug Court Steering Committee:

3 (a) Drug court programs integrate alcohol and other
4 drug treatment services with justice system case processing.

5 (b) Using a nonadversarial approach, prosecution and
6 defense counsel promote public safety while protecting
7 participants' due process rights.

8 (c) Eligible participants are identified early and
9 promptly placed in the drug court program.

10 (d) Drug court programs provide access to a continuum
11 of alcohol, drug, and other related treatment and
12 rehabilitation services.

13 (e) Abstinence is monitored by frequent testing for
14 alcohol and other drugs.

15 (f) A coordinated strategy governs drug court program
16 responses to participants' compliance.

17 (g) Ongoing judicial interaction with each drug court
18 program participant is essential.

19 (h) Monitoring and evaluation measure the achievement
20 of program goals and gauge program effectiveness.

21 (i) Continuing interdisciplinary education promotes
22 effective drug court program planning, implementation, and
23 operations.

24 (j) Forging partnerships among drug court programs,
25 public agencies, and community-based organizations generates
26 local support and enhances drug court program effectiveness.

27 ~~(4)(3)~~ Treatment-based drug court programs may include
28 pretrial intervention programs as provided in ss. 948.08,
29 948.16, and 985.306, treatment-based drug court programs
30 authorized in chapter 39, postadjudicatory programs, and the
31 monitoring of sentenced offenders through a treatment-based

586-837A-06

1 drug court program. While enrolled in any treatment-based drug
 2 court program, the participant is subject to a coordinated
 3 strategy developed by the drug court team under paragraph
 4 (3)(f). Each coordinated strategy may include a protocol of
 5 sanctions that may be imposed upon the participant. The
 6 protocol of sanctions for treatment-based programs other than
 7 those authorized in chapter 39 must include, and the protocol
 8 of sanctions for treatment-based drug court programs
 9 authorized in chapter 39 must include, as available options
 10 placement in a secure licensed clinical or jail-based
 11 treatment program or serving a period of incarceration for
 12 noncompliance with program rules within the time limits
 13 established for contempt of court. The coordinated strategy
 14 must be provided in writing to the participant before the
 15 participant agrees to enter into a pretrial treatment-based
 16 drug court program. Any person whose charges are dismissed
 17 after successful completion of the treatment-based drug court
 18 program may have his or her arrest record and plea of nolo
 19 contendere to the dismissed charges expunged under s.
 20 943.0585.

21 (5) Contingent upon an annual appropriation by the
 22 Legislature, each judicial circuit shall establish, at a
 23 minimum, one coordinator position for the treatment-based drug
 24 court program within the state courts system to coordinate the
 25 responsibilities of the participating agencies and service
 26 providers. Each coordinator shall provide direct support to
 27 the treatment-based drug court program by providing
 28 coordination between the multidisciplinary team and the
 29 judiciary, providing case management, monitoring compliance of
 30 the participants in the treatment-based drug court program
 31 with court requirements, and providing program evaluation and

586-837A-06

1 accountability.

2 (6)(4)(a) The Florida Association of Drug Court
3 ~~Program~~ Professionals is created. The membership of the
4 association may consist of treatment-based drug court program
5 practitioners who comprise the multidisciplinary
6 treatment-based drug court program team, including, but not
7 limited to, judges, state attorneys, defense counsel,
8 treatment-based drug court program coordinators, probation
9 officers, law enforcement officers, community representatives,
10 members of the academic community, and treatment
11 professionals. Membership in the association shall be
12 voluntary.

13 (b) The association shall annually elect a chair whose
14 duty is to solicit recommendations from members on issues
15 relating to the expansion, operation, and institutionalization
16 of treatment-based drug court programs. The chair is
17 responsible for providing on or before October 1 of each year
18 the association's recommendations and an annual report to the
19 appropriate Supreme Court ~~Treatment-Based Drug Court Steering~~
20 committee or to the appropriate personnel of the Office of the
21 State Courts Administrator, and shall submit a report each
22 year, on or before October 1, to the steering committee.

23 (7)(5) If a county chooses to fund a treatment-based
24 drug court program, the county must secure funding from
25 sources other than the state for those costs not otherwise
26 assumed by the state pursuant to s. 29.004. However, this does
27 not preclude counties from using treatment and other service
28 dollars provided through state executive branch agencies.
29 Counties may provide, by interlocal agreement, for the
30 collective funding of these programs.

31 (8) The chief judge of each judicial circuit may

586-837A-06

1 appoint an advisory committee for the treatment-based drug
 2 court program. The committee shall be composed of the chief
 3 judge, or his or her designee, who shall serve as chair; the
 4 judge of the treatment-based drug court program, if not
 5 otherwise designated by the chief judge as his or her
 6 designee; the state attorney, or his or her designee; the
 7 public defender, or his or her designee; the treatment-based
 8 drug court program coordinators; community representatives;
 9 treatment representatives; and any other persons the chair
 10 finds are appropriate.

11 Section 8. Paragraphs (b) and (e) of subsection (5) of
 12 section 910.035, Florida Statutes, are amended to read:

13 910.035 Transfer from county for plea and sentence.--

14 (5) Any person eligible for participation in a drug
 15 court treatment program pursuant to s. 948.08(6) may be
 16 eligible to have the case transferred to a county other than
 17 that in which the charge arose if the drug court program
 18 agrees and if the following conditions are met:

19 (b) If approval for transfer is received from all
 20 parties, the trial court shall accept a plea of nolo
 21 contendere and enter a transfer order directing the clerk to
 22 transfer the case to the county which has accepted the
 23 defendant into its drug court program.

24 (e) Upon successful completion of the drug court
 25 program, the jurisdiction to which the case has been
 26 transferred shall dispose of the case pursuant to s.
 27 948.08(6). If the defendant does not complete the drug court
 28 program successfully, the jurisdiction to which the case has
 29 been transferred shall dispose of the case within the
 30 guidelines of the Criminal Punishment Code ~~case shall be~~

31 ~~prosecuted as determined by the state attorneys of the sending~~

586-837A-06

1 ~~and receiving counties.~~

2 Section 9. Subsections (6), (7), and (8) of section
3 948.08, Florida Statutes, are amended to read:

4 948.08 Pretrial intervention program.--

5 (6)(a) Notwithstanding any provision of this section,
6 a person who is charged with a felony of the second or third
7 degree for purchase or possession of a controlled substance
8 under chapter 893, prostitution, tampering with evidence,
9 solicitation for purchase of a controlled substance, or
10 obtaining a prescription by fraud; who has not been charged
11 with a crime involving violence, including, but not limited
12 to, murder, sexual battery, robbery, carjacking, home-invasion
13 robbery, or any other crime involving violence; and who has
14 not previously been convicted of a felony nor been admitted to
15 a felony pretrial program referred to in this section is
16 eligible for voluntary admission into a pretrial substance
17 abuse education and treatment intervention program, including
18 a treatment-based drug court program established pursuant to
19 s. 397.334, approved by the chief judge of the circuit, for a
20 period of not less than 1 year in duration, upon motion of
21 either party or the court's own motion, except+

22 ~~1. If a defendant was previously offered admission to~~
23 ~~a pretrial substance abuse education and treatment~~
24 ~~intervention program at any time prior to trial and the~~
25 ~~defendant rejected that offer on the record, then the court or~~
26 ~~the state attorney may deny the defendant's admission to such~~
27 ~~a program.~~

28 ~~2.~~ if the state attorney believes that the facts and
29 circumstances of the case suggest the defendant's involvement
30 in the dealing and selling of controlled substances, the court
31 shall hold a preadmission hearing. If the state attorney

586-837A-06

1 establishes, by a preponderance of the evidence at such
2 hearing, that the defendant was involved in the dealing or
3 selling of controlled substances, the court shall deny the
4 defendant's admission into a pretrial intervention program.

5 (b) While enrolled in a pretrial intervention program
6 authorized by this section, the participant is subject to a
7 coordinated strategy developed by a drug court team under s.
8 397.334(3). The coordinated strategy may include a protocol of
9 sanctions that may be imposed upon the participant. The
10 protocol of sanctions must include as available options
11 placement in a secure licensed clinical or jail-based
12 treatment program or serving a period of incarceration for
13 noncompliance with program rules within the time limits
14 established for contempt of court. The coordinated strategy
15 must be provided in writing to the participant before the
16 participant agrees to enter into a pretrial treatment-based
17 drug court program, or other pretrial intervention program.

18 ~~(c)(b)~~ At the end of the pretrial intervention period,
19 the court shall consider the recommendation of the
20 administrator pursuant to subsection (5) and the
21 recommendation of the state attorney as to disposition of the
22 pending charges. The court shall determine, by written
23 finding, whether the defendant has successfully completed the
24 pretrial intervention program.

25 ~~(c)1.~~ If the court finds that the defendant has not
26 successfully completed the pretrial intervention program, the
27 court may order the person to continue in education and
28 treatment, which may include secure licensed clinical or
29 jail-based treatment programs, or order that the charges
30 revert to normal channels for prosecution.

31 ~~2.~~ The court shall dismiss the charges upon a finding

586-837A-06

1 that the defendant has successfully completed the pretrial
2 intervention program.

3 (d) Any entity, whether public or private, providing a
4 pretrial substance abuse education and treatment intervention
5 program under this subsection must contract with the county or
6 appropriate governmental entity, and the terms of the contract
7 must include, but need not be limited to, the requirements
8 established for private entities under s. 948.15(3).

9 ~~(7) The chief judge in each circuit may appoint an
10 advisory committee for the pretrial intervention program
11 composed of the chief judge or his or her designee, who shall
12 serve as chair; the state attorney, the public defender, and
13 the program administrator, or their designees; and such other
14 persons as the chair deems appropriate. The advisory committee
15 may not designate any defendant eligible for a pretrial
16 intervention program for any offense that is not listed under
17 paragraph (6)(a) without the state attorney's recommendation
18 and approval. The committee may also include persons
19 representing any other agencies to which persons released to
20 the pretrial intervention program may be referred.~~

21 ~~(7)(8)~~ The department may contract for the services
22 and facilities necessary to operate pretrial intervention
23 programs.

24 Section 10. Section 948.16, Florida Statutes, is
25 amended to read:

26 948.16 Misdemeanor pretrial substance abuse education
27 and treatment intervention program.--

28 (1)(a) A person who is charged with a misdemeanor for
29 possession of a controlled substance or drug paraphernalia
30 under chapter 893, and who has not previously been convicted
31 of a felony nor been admitted to a pretrial program, is

586-837A-06

1 eligible for voluntary admission into a misdemeanor pretrial
 2 substance abuse education and treatment intervention program,
 3 including a treatment-based drug court program established
 4 pursuant to s. 397.334, approved by the chief judge of the
 5 circuit, for a period based on the program requirements and
 6 the treatment plan for the offender, upon motion of either
 7 party or the court's own motion, except, if the state attorney
 8 believes the facts and circumstances of the case suggest the
 9 defendant is involved in dealing and selling controlled
 10 substances, the court shall hold a preadmission hearing. If
 11 the state attorney establishes, by a preponderance of the
 12 evidence at such hearing, that the defendant was involved in
 13 dealing or selling controlled substances, the court shall deny
 14 the defendant's admission into the pretrial intervention
 15 program.

16 (b) While enrolled in a pretrial intervention program
 17 authorized by this section, the participant is subject to a
 18 coordinated strategy developed by a drug court team under s.
 19 397.334(3). The coordinated strategy may include a protocol of
 20 sanctions that may be imposed upon the participant. The
 21 protocol of sanctions must include as available options
 22 placement in a secure licensed clinical or jail-based
 23 treatment program or serving a period of incarceration for
 24 noncompliance with program rules within the time limits
 25 established for contempt of court. The coordinated strategy
 26 must be provided in writing to the participant before the
 27 participant agrees to enter into a pretrial treatment-based
 28 drug court program, or other pretrial intervention program.

29 (2) At the end of the pretrial intervention period,
 30 the court shall consider the recommendation of the treatment
 31 program and the recommendation of the state attorney as to

586-837A-06

1 disposition of the pending charges. The court shall determine,
2 by written finding, whether the defendant successfully
3 completed the pretrial intervention program.

4 ~~(a)~~ If the court finds that the defendant has not
5 successfully completed the pretrial intervention program, the
6 court may order the person to continue in education and
7 treatment or return the charges to the criminal docket for
8 prosecution.

9 ~~(b)~~ The court shall dismiss the charges upon finding
10 that the defendant has successfully completed the pretrial
11 intervention program.

12 (3) Any public or private entity providing a pretrial
13 substance abuse education and treatment program under this
14 section shall contract with the county or appropriate
15 governmental entity. The terms of the contract shall include,
16 but not be limited to, the requirements established for
17 private entities under s. 948.15(3).

18 Section 11. Section 985.306, Florida Statutes, is
19 amended to read:

20 985.306 Delinquency pretrial intervention program.--

21 (1)~~(a)~~ Notwithstanding any provision of law to the
22 contrary, a child who is charged ~~under chapter 893~~ with a
23 felony of the second or third degree for purchase or
24 possession of a controlled substance under chapter 893;
25 tampering with evidence; solicitation for purchase of a
26 controlled substance; or obtaining a prescription by fraud,
27 and who has not previously been adjudicated for a felony ~~nor~~
28 ~~been admitted to a delinquency pretrial intervention program~~
29 ~~under this section~~, is eligible for voluntary admission into a
30 delinquency pretrial substance abuse education and treatment
31 intervention program, including a treatment-based drug court

586-837A-06

1 program established pursuant to s. 397.334, approved by the
 2 chief judge or alternative sanctions coordinator of the
 3 circuit to the extent that funded programs are available, for
 4 a period based on the program requirements and the treatment
 5 services that are suitable for the offender ~~of not less than 1~~
 6 ~~year in duration~~, upon motion of either party or the court's
 7 own motion. However, if the state attorney believes that the
 8 facts and circumstances of the case suggest the child's
 9 involvement in the dealing and selling of controlled
 10 substances, the court shall hold a preadmission hearing. If
 11 the state attorney establishes by a preponderance of the
 12 evidence at such hearing that the child was involved in the
 13 dealing and selling of controlled substances, the court shall
 14 deny the child's admission into a delinquency pretrial
 15 intervention program.

16 (2) While enrolled in a delinquency pretrial
 17 intervention program authorized by this section, a child is
 18 subject to a coordinated strategy developed by a drug court
 19 team under s. 397.334(3). The coordinated strategy may include
 20 a protocol of sanctions that may be imposed upon the child.
 21 The protocol of sanctions must include as available options
 22 placement in a secure licensed clinical facility or placement
 23 in a secure detention facility under s. 985.216 for
 24 noncompliance with program rules. The coordinated strategy
 25 must be provided in writing to the child before the child
 26 agrees to enter the pretrial treatment-based drug court
 27 program, or other pretrial intervention program.

28 (3)(b) At the end of the delinquency pretrial
 29 intervention period, the court shall consider the
 30 recommendation of the state attorney and the program
 31 administrator as to disposition of the pending charges. The

586-837A-06

1 court shall determine, by written finding, whether the child
 2 has successfully completed the delinquency pretrial
 3 intervention program.

4 ~~(c)~~1. If the court finds that the child has not
 5 successfully completed the delinquency pretrial intervention
 6 program, the court may order the child to continue in an
 7 education, treatment, or urine monitoring program if resources
 8 and funding are available or order that the charges revert to
 9 normal channels for prosecution.

10 ~~2.~~ The court may dismiss the charges upon a finding
 11 that the child has successfully completed the delinquency
 12 pretrial intervention program.

13 ~~(4)(d)~~ Any entity, whether public or private,
 14 providing pretrial substance abuse education, treatment
 15 intervention, and a urine monitoring program under this
 16 section must contract with the county or appropriate
 17 governmental entity, and the terms of the contract must
 18 include, but need not be limited to, the requirements
 19 established for private entities under s. 948.15(3). It is the
 20 intent of the Legislature that public or private entities
 21 providing substance abuse education and treatment intervention
 22 programs involve the active participation of parents, schools,
 23 churches, businesses, law enforcement agencies, and the
 24 department or its contract providers.

25 ~~(2) The chief judge in each circuit may appoint an~~
 26 ~~advisory committee for the delinquency pretrial intervention~~
 27 ~~program composed of the chief judge or designee, who shall~~
 28 ~~serve as chair; the state attorney, the public defender, and~~
 29 ~~the program administrator, or their designees; and such other~~
 30 ~~persons as the chair deems appropriate. The committee may also~~
 31 ~~include persons representing any other agencies to which~~

Bill No. SB's 114 & 444

Barcode 475964

586-837A-06

1 ~~children released to the delinquency pretrial intervention~~
2 ~~program may be referred.~~

3 Section 12. This act shall take effect upon becoming a
4 law.

5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31