The Vermont Center for Crime Victim Services is supportive of the amendments made in S.183. Upon review of the Senate-passed language, with input from victims, I would like to propose the following amendments to the Senate version of S.183:

**Victims of personal injury crimes**
We propose 2 amendments to §4822(a)
1. In any case involving personal injury or the threat of personal injury, current law allows for a hearing before a person may be discharged from custody. We believe a hearing should be required before discharge.
2. In addition to victims of listed crimes receiving notification (in subdivision (b)), we believe that victims of crimes involving bodily injury or the threat of bodily injury should also receive notification upon discharge.

Sec. 3. 4822. FINDINGS AND ORDER; PERSONS WITH A MENTAL ILLNESS
(a) If the court finds that the person is a person in need of treatment or a patient in need of further treatment as defined in 18 V.S.A. § 7101, the court shall issue an order of commitment directed to the Commissioner of Mental Health that shall admit the person to the care and custody of the Department of Mental Health for an indeterminate period. In any case involving personal injury or threat of personal injury, the committing court may issue an order requiring a court hearing before a person committed under this section may be discharged from custody. The State’s Attorney shall provide notice of the proposed action to any victim of the offense who has not opted out of receiving notice.

**Forensic Care Working Group**
We believe that the voices and rights of victims should be addressed in the Forensic Care Working Group. Therefore, we propose 2 amendments to Section 6.
1. Add the Center for Crime Victim Services to the membership of the working group
2. Add the expansion of victim’s rights to the charge of the working group.

Sec. 6. FORENSIC CARE WORKING GROUP
(a) On or before August 1, 2020, the Department of Mental Health shall convene a working group of interested stakeholders, including as appropriate, the Department of Corrections, the Department of State’s Attorneys and Sheriffs, the Office of the Attorney General, the Office of the Defender General, the Center for Crime Victim Services, the Director of Health Care Reform, the Department of Buildings and General Services, a representative appointed by Vermont Care Partners, a representative appointed by Vermont Legal Aid’s Mental Health Project, the Mental Health Care Ombudsman established pursuant to 18 V.S.A. § 7259, a representative of the designated hospitals
appointed by the Vermont Association of Hospitals and Health Care Systems, a person with lived experience of mental illness, and any other interested party permitted by the Commissioner of Mental Health, to:

(1) Identify any gaps in the current mental health and criminal justice system structure and opportunities to improve public safety, and the coordination of treatment for individuals incompetent to stand trial or who are adjudicated not guilty by reason of insanity, and the expansion of victim’s rights. The working group shall review competency restoration models used in other states and explore models used in other states that balance the treatment and public safety risks posed by individuals found not guilty by reason of insanity, such as Psychiatric Security Review Boards, including the Connecticut Psychiatric Security Review Board, and guilty but mentally ill verdicts in criminal cases.