TO THE HONORABLE SENATE:

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- The Committee on Judiciary to which was referred Senate Bill No. 183

 entitled "An act relating to competency to stand trial and insanity as a defense"

 respectfully reports that it has considered the same and recommends that the

 bill be amended by striking out all after the enacting clause and inserting in

 lieu thereof the following:
- 7 Sec. 1. 13 V.S.A. § 4822 is amended to read:
- 8 § 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.
 - (b) An order of commitment issued pursuant to this section shall have the same force and effect as an order issued under 18 V.S.A. §§ 7611–7622, and a person committed under this order shall have the same status and the same rights, including the right to receive care and treatment, to be examined and

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discharged, and to apply for and obtain judicial review of his or her case, as a person ordered committed under 18 V.S.A. §§ 7611–7622.

(c)(1) Notwithstanding the provisions of subsection (b) of this section, at least 10 days prior to the proposed discharge of any person committed under this section, the Commissioner of Mental Health shall give notice of the discharge to the committing court and State's Attorney of the county where the prosecution originated. In all cases requiring a hearing prior to discharge of a person found incompetent to stand trial under section 4817 of this title, the hearing shall be conducted by the committing court issuing the order under that section. In all other cases, when the committing court orders a hearing under subsection (a) of this section or when, in the discretion of the Commissioner of Mental Health, a hearing should be held prior to the discharge, the hearing shall be held in the Family Division of the Superior Court to determine if the committed person is no longer a person in need of treatment or a patient in need of further treatment as set forth in subsection (a) of this section. Notice of the hearing shall be given to the Commissioner, the State's Attorney of the county where the prosecution originated, the committed person, and the person's attorney. Prior to the hearing, the State's Attorney may enter an appearance in the proceedings and may request examination of the patient by an independent psychiatrist, who may testify at the hearing.

1	(2)(A) This subdivision (2) shall apply when a person is committed to
2	the care and custody of the Commissioner of Mental Health under this section
3	after having been found not guilty by reason of insanity for an offense listed in
4	33 V.S.A. § 5204(a).
5	(B) At least 10 days prior to discharging the person from a hospital,
6	discontinuing treatment of the person, or determining not to apply for an order
7	of continued treatment for the person secure mental health treatment facility or
8	from the care and custody of the Commissioner of Mental Health, the
9	Commissioner of Mental Health shall provide notice of the proposed action to
10	the State's Attorney of the county where the prosecution originated. The
11	State's Attorney shall provide notice of the proposed action to any victim of
12	the offense who has requested that notice be provided.
13	(C) As used in this subdivision (2), "victim" has the same meaning as
14	in section 5301 of this title.
15	* * *
16	Sec. 2. CORRECTIONS; ASSESSMENT OF MENTAL HEALTH
17	SERVICES
18	On or before November 1, 2020, the Departments of Corrections and of
19	Mental Health shall jointly submit an inventory and evaluation of the mental
20	health services provided by the entity with whom the Department of
21	Corrections contracts for health care services to the House Committees on

1	Corrections and institutions, on Health Care, and on Judiciary and to the
2	Senate Committees on Health and Welfare and on Judiciary. The evaluation
3	shall include a comparison as to how the type, frequency, and timeliness of
4	mental health services provided in a correctional setting differ from those
5	services available in the community. The evaluation shall further address how
6	the memorandum of understanding executed by the Departments of
7	Corrections and of Mental Health impacts the mental health services provided
8	by the entity with whom the Department of Corrections contracts for health
9	care services.
10	Sec. 3. FORENSIC CARE WORKING GROUP
11	(a) On or before August 1, 2020, the Department of Mental Health shall
12	convene a working group of interested stakeholders, including as appropriate,
13	the Department of Corrections, the Department of State's Attorneys and
14	Sheriffs, the Office of the Attorney General, the Office of the Defender
15	General, the Director of Health Care Reform, and the Department of Buildings
16	and General Services to:
17	(1) Identify any gaps in the current mental health and criminal justice
18	system structure and opportunities to improve public safety and the
19	coordination of treatment for individuals incompetent to stand trial or who are
20	adjudicated not guilty by reason of insanity. The working group shall review
21	competency restoration models used in other states and explore models used in

1	other states that balance the treatment and public safety risks posed by
2	individuals found not guilty by reason of insanity, such as Psychiatric Security
3	Review Boards; and
4	(2) Evaluate various models for the establishment of a State-funded
5	forensic treatment facility for individuals found incompetent to stand trial or
6	who are adjudicated not guilty by reason of insanity. The evaluation shall
7	address:
8	(A) the need for a forensic treatment facility in Vermont;
9	(B) the entity or entities most appropriate to operate a forensic
10	treatment facility;
11	(C) the feasibility and appropriateness of repurposing an existing
12	facility for the purpose of establishing a forensic treatment facility, such as
13	Woodside Juvenile Rehabilitation Center, versus constructing a new facility
14	for this purpose;
15	(D) the number of beds needed in a forensic treatment facility and the
16	impact that repurposing an existing mental health treatment facility would have
17	on the availability of beds for persons seeking mental health treatment in the
18	community or through the civil commitment system; and
19	(E) the fiscal impact of constructing or repurposing a forensic
20	treatment facility and estimated annual operational costs considering
21	"institutions of mental disease" waivers available through the Center for

1	Medicare and Medicaid Services that do not provide federal fiscal participation
2	for forensic mental health patients.
3	(b) On or before November 1, 2020, the Department of Mental Health shall
4	submit a report containing the findings and recommendations of the working
5	group to the Joint Legislative Justice Oversight Committee. The report shall
6	include proposed draft legislation adapting Connecticut's Psychiatric Security
7	Review Board to reflect Vermont's mental health and criminal justice systems.
8	Sec. 4. EFFECTIVE DATE
9	This act shall take effect on July 1, 2020.
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13	(Committee vote:)
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15	Senator
16	FOR THE COMMITTEE