1 TO THE HONORABLE SENATE:

2	The Committee on Judiciary to which was referred Senate Bill No. 183
3	entitled "An act relating to competency to stand trial and insanity as a defense"
4	respectfully reports that it has considered the same and recommends that the
5	bill be amended by striking out all after the enacting clause and inserting in
6	lieu thereof the following:
7	Sec. 1. 13 V.S.A. § 4816 is amended to read:
8	§ 4816. SCOPE OF EXAMINATION; REPORT; EVIDENCE
9	(a) Examinations provided for in section 4815 of this title shall have
10	reference to one or both of the following:
11	(1) mental Mental competency of the person examined to stand trial for
12	the alleged offense; and.
13	(2) sanity Sanity of the person examined at the time of the alleged
14	offense.
15	(b) A competency evaluation for an individual thought to have a
16	developmental disability shall include a current evaluation by a psychologist
17	skilled in assessing individuals with developmental disabilities.
18	(c)(1) As soon as practicable after the examination has been completed, the
19	examining psychiatrist or psychologist, if applicable, shall prepare a report
20	containing findings in regard to each of the applicable matters listed in
21	provisions of subsection (a) of this section. The report shall be transmitted to

1	the court issuing the order for examination, and copies of the report sent to the
2	State's Attorney, and, to the respondent's attorney if the respondent is
3	represented by counsel, and to the Commissioner of Mental Health.
4	(2) If the psychiatrist or psychologist has been asked to provide opinions
5	as to both the person's competency to stand trial and the person's sanity at the
6	time of the alleged offense, those opinions shall be presented in separate
7	reports, and addressed separately by the court. In such cases, the examination
8	of the defendant's sanity shall only be undertaken if the psychiatrist or
9	psychologist is able to form the opinion that the defendant is competent to
10	stand trial.
11	* * *
12	Sec. 2. 13 V.S.A. § 4820 is amended to read:
13	§ 4820. HEARING REGARDING COMMITMENT
14	(a) When a person charged on information, complaint, or indictment with a
15	criminal offense:
16	(1) Is reported by the examining psychiatrist following examination
17	pursuant to sections 4814-4816 of this title to have been insane at the time of
18	the alleged offense.
19	(2) Is found upon hearing pursuant to section 4817 of this title to be
20	incompetent to stand trial due to a mental disease or mental defect.

1	(3) Is not indicted upon hearing by grand jury by reason of insanity at the
2	time of the alleged offense, duly certified to the court.
3	(4) Upon trial by court or jury is acquitted by reason of insanity at the
4	time of the alleged offense; the court before which such person is tried or is to
5	be tried for such offense, shall hold a hearing for the purpose of determining
6	whether such person should be committed to the custody of the Commissioner
7	of Mental Health. Such person may be confined in jail or some other suitable
8	place by order of the court pending hearing for a period not exceeding 15 days.
9	(b) When a person is found to be incompetent to stand trial pursuant to
10	subdivision (a)(2) of this section, has not been indicted by reason of insanity
11	for the alleged offense, or has been acquitted by reason of insanity at the time
12	of the alleged offense, the court shall appoint counsel from Vermont Legal Aid
13	to represent the person who is the subject of the proceedings. The Department
14	of Mental Health shall be entitled to appear and call witnesses at the
15	proceeding and be represented by the Office of the Attorney General.
16	Sec. 3. 13 V.S.A. § 4822 is amended to read:
17	§ 4822. FINDINGS AND ORDER; PERSONS WITH A MENTAL ILLNESS
18	(a) If the court finds that the person is a person in need of treatment or a
19	patient in need of further treatment as defined in 18 V.S.A. § 7101, the court
20	shall issue an order of commitment directed to the Commissioner of Mental
21	Health that shall admit the person to the care and custody of the Department of

1	Mental Health for an indeterminate period. In any case involving personal
2	injury or threat of personal injury, the committing court may issue an order
3	requiring a court hearing before a person committed under this section may be
4	discharged from custody.
5	(b) An order of commitment issued pursuant to this section shall have the
6	same force and effect as an order issued under 18 V.S.A. §§ 7611–7622, and a
7	person committed under this order shall have the same status and the same
8	rights, including the right to receive care and treatment, to be examined and
9	discharged, and to apply for and obtain judicial review of his or her case, as a
10	person ordered committed under 18 V.S.A. §§ 7611–7622.
11	(c)(1) Notwithstanding the provisions of subsection (b) of this section, at
12	least 10 days prior to the proposed discharge of any person committed under
13	this section, the Commissioner of Mental Health shall give notice of the
14	discharge to the committing court and State's Attorney of the county where the
15	prosecution originated. In all cases requiring a hearing prior to discharge of a
16	person found incompetent to stand trial under section 4817 of this title, the
17	hearing shall be conducted by the committing court issuing the order under that
18	section. In all other cases, when the committing court orders a hearing under
19	subsection (a) of this section or when, in the discretion of the Commissioner of
20	Mental Health, a hearing should be held prior to the discharge, the hearing
21	shall be held in the Family Division of the Superior Court to determine if the

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1	committed person is no longer a person in need of treatment or a patient in
2	need of further treatment as set forth in subsection (a) of this section. Notice
3	of the hearing shall be given to the Commissioner, the State's Attorney of the
4	county where the prosecution originated, the committed person, and the
5	person's attorney. Prior to the hearing, the State's Attorney may enter an
6	appearance in the proceedings and may request examination of the patient by
7	an independent psychiatrist, who may testify at the hearing.
8	(2)(A) This subdivision (2) shall apply when a person is committed
9	to the care and custody of the Commissioner of Mental Health under this
10	section after having been found not guilty by reason of insanity or incompetent
11	to stand trial for a listed crime as defined in subdivision 5301(7) of this title
12	other than:
13	(i) lewd or lascivious conduct as defined in section 2601 of this
14	<u>title;</u>
15	(ii) recklessly endangering another person as defined in section
16	1025 of this title;
17	(iii) operating a vehicle under the influence of alcohol or other
18	substance with either death or serious bodily injury resulting as defined in 23
19	<u>V.S.A. § 1210(f) and (g);</u>
20	(iv) careless or negligent operation resulting in serious bodily
21	injury or death as defined in 23 V.S.A. § 1091(b);

1	(v) leaving the scene of an accident resulting in serious bodily
2	injury or death as defined in 23 V.S.A. § 1128(b) or (c); or
3	(vi) a misdemeanor violation of chapter 28 of this title, relating
4	to abuse, neglect, and exploitation of vulnerable adults.
5	(B) At least 10 days prior to discharging the person from a secure
6	mental health treatment facility or from the care and custody of the
7	Commissioner of Mental Health, the Commissioner shall provide notice of the
8	proposed action to the State's Attorney of the county where the prosecution
9	originated, or to the Office of the Attorney General if that office prosecuted the
10	case. The State's Attorney shall provide notice of the proposed action to any
11	victim of the offense who has not opted out of receiving notice.
12	(C) As used in this subdivision (2), "victim" has the same meaning as
13	in section 5301 of this title.
14	* * *
15	Sec. 4. Vermont Rule of Criminal Procedure 16.1 is amended to read:
16	RULE 16.1. DISCLOSURE TO THE PROSECUTION
17	(a) The Person of the Defendant.
18	(1) Notwithstanding the initiation of judicial proceedings, and subject to
19	constitutional limitations, upon motion and notice a judicial officer may
20	require the defendant to:
21	* * *

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1	(H) provide specimens of his handwriting; and
2	(I) submit to a reasonable physical or medical inspection of his body
3	or, if notice is given by the defendant that sanity is in issue or that expert
4	testimony will be offered as provided in Rule 12.1, to a reasonable mental
5	examination by a psychiatrist or other expert; and
6	(J) submit to a reasonable mental examination by a psychiatrist or
7	other expert when a court ordered examiner pursuant to 13 V.S.A. § 4814(a)(2)
8	or (4) reports that a defendant is not competent to stand trial.
9	* * *
10	Sec. 5. CORRECTIONS; ASSESSMENT OF MENTAL HEALTH
11	SERVICES
12	On or before November 1, 2020, the Departments of Corrections and of
13	Mental Health shall jointly submit an inventory and evaluation of the mental
14	health services provided by the entity with whom the Department of
15	Corrections contracts for health care services to the House Committees on
16	Corrections and Institutions, on Health Care, and on Judiciary and to the
17	Senate Committees on Health and Welfare and on Judiciary. The evaluation
18	shall include a comparison as to how the type, frequency, and timeliness of
19	mental health services provided in a correctional setting differ from those
20	services available in the community. The evaluation shall further address how
21	the memorandum of understanding executed by the Departments of

1	Corrections and of Mental Health impacts the mental health services provided
2	by the entity with whom the Department of Corrections contracts for health
3	care services.
4	Sec. 6. FORENSIC CARE WORKING GROUP
5	(a) On or before August 1, 2020, the Department of Mental Health shall
6	convene a working group of interested stakeholders, including as appropriate,
7	the Department of Corrections, the Department of State's Attorneys and
8	Sheriffs, the Office of the Attorney General, the Office of the Defender
9	General, the Director of Health Care Reform, the Department of Buildings and
10	General Services, a representative appointed by Vermont Care Partners, a
11	representative appointed by Vermont Legal Aid's Mental Health Project, the
12	Mental Health Care Ombudsman established pursuant to 18 V.S.A. § 7259, a
13	representative of the designated hospitals appointed by the Vermont
14	Association of Hospitals and Health Care Systems, a person with lived
15	experience of mental illness, and any other interested party permitted by the
16	Commissioner of Mental Health 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, including the Connecticut Psychiatric Security Review Board,
4	and guilty but mentally ill verdicts in criminal cases; and
5	(2) Evaluate various models for the establishment of a State-funded
6	forensic treatment facility for individuals found incompetent to stand trial or
7	who are adjudicated not guilty by reason of insanity. The evaluation shall
8	address:
9	(A) the need for a forensic treatment facility in Vermont;
10	(B) the entity or entities most appropriate to operate a forensic
11	treatment facility;
12	(C) the feasibility and appropriateness of repurposing an existing
13	facility for the purpose of establishing a forensic treatment facility versus
14	constructing a new facility 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 addressing any identified needed changes to
7	statute.
8	Sec. 7. EFFECTIVE DATE
9	This act shall take effect on July 1, 2020.
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12	
13	(Committee vote:)
14	
15	Senator
16	FOR THE COMMITTEE