

1 TO THE HOUSE OF REPRESENTATIVES:

2 The Committee on Health Care recommends that the report of the
3 Committee on Human Services be amended by striking out all after the
4 enacting clause and inserting in lieu thereof the following:

5 * * * Purpose * * *

6 Sec. 1. PURPOSE

7 It is the purpose of this act to:

8 (1) enable the Commissioner of Mental Health to seek treatment for
9 individuals at a secure residential recovery facility, regardless of a previous
10 order of hospitalization, and at a psychiatric residential treatment facility for
11 youth; and

12 (2) update the civil commitment procedures for individuals with
13 intellectual disabilities.

14 * * * Involuntary Commitment of Individuals with Mental Illness * * *

15 Sec. 2. 13 V.S.A. § 4822 is amended to read:

16 § 4822. FINDINGS AND ORDER; PERSONS WITH A MENTAL ILLNESS

17 (a) If the court finds that the person is a person in need of treatment or a
18 patient in need of further treatment as defined in 18 V.S.A. § 7101, the court
19 shall issue an order of commitment directed to the Commissioner of Mental
20 Health that shall admit the person to the care and custody of the Department of
21 Mental Health for ~~an indeterminate~~ a period of 90 days. In any case involving

1 personal injury or threat of personal injury, the committing court may issue an
2 order requiring a court hearing before a person committed under this section
3 may be discharged from custody.

4 * * *

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

1 appearance in the proceedings and may request examination of the patient by
2 an independent psychiatrist, who may testify at the hearing.

3 (2)(A) This subdivision (2) shall apply when a person is committed to
4 the care and custody of the Commissioner of Mental Health under this section
5 after having been found:

6 (i) not guilty by reason of insanity; or

7 (ii) incompetent to stand trial, provided that the person's criminal
8 case has not been dismissed.

9 (B)(i) When a person has been committed under this section, the
10 Commissioner shall provide notice to the State's Attorney of the county where
11 the prosecution originated or to the Office of the Attorney General if that office
12 prosecuted the case:

13 (I) at least 10 days prior to discharging the person from:

14 (aa) the care and custody of the Commissioner; or

15 (bb) a hospital or a secure residential recovery facility to the
16 community on an order of nonhospitalization pursuant to 18 V.S.A. § 7618;

17 (II) at least 10 days prior to the expiration of a commitment
18 order issued under this section if the Commissioner does not seek continued
19 treatment; or

20 (III) any time that the person elopes from the custody of the
21 Commissioner.

1 (C) is accredited by the Joint Commission or any other accrediting
2 organization with comparable standards recognized by the Commissioner of
3 Mental Health;

4 (D) meets the requirements in 42 C.F.R. §§ 441.151–441.182; and

5 (E) holds a license pursuant to section 7260 of this title.

6 (33) “Secure residential recovery facility” means a residential facility,
7 licensed as a therapeutic community residence as defined in 33 V.S.A.
8 § 7102(11), for an individual in need of treatment within a secure setting for an
9 extended period of time. “Secure,” when describing a secure residential
10 recovery facility, means that the residents can be physically prevented from
11 leaving the facility by means of locking devices or other mechanical or
12 physical mechanisms.

13 Sec. 4. 18 V.S.A. § 7253 is amended to read:

14 § 7253. CLINICAL RESOURCE MANAGEMENT AND OVERSIGHT

15 The Commissioner of Mental Health, in consultation with health care
16 providers as defined in section 9432 of this title, including designated
17 hospitals, designated agencies, individuals with mental conditions or
18 psychiatric disabilities, and other stakeholders, shall design and implement a
19 clinical resource management system that ensures the highest quality of care
20 and facilitates long-term, sustained recovery for individuals in the custody of
21 the Commissioner.

- 1 (1) comprehensive and coordinated community services, including
- 2 prevention, to serve children, families, and adults at all stages of mental
- 3 condition or psychiatric disability;
- 4 (2) peer services, which may include:
- 5 (A) a warm line;
- 6 (B) peer-provided transportation services;
- 7 (C) peer-supported crisis services; and
- 8 (D) peer-supported hospital diversion services;
- 9 (3) alternative treatment options for individuals seeking to avoid or
- 10 reduce reliance on medications;
- 11 (4) recovery-oriented housing programs;
- 12 (5) intensive residential recovery facilities;
- 13 (6) appropriate and adequate psychiatric inpatient capacity for voluntary
- 14 patients;
- 15 (7) appropriate and adequate psychiatric inpatient capacity for
- 16 involuntary inpatient treatment services, including persons receiving treatment
- 17 through court order from a civil or criminal court; ~~and~~
- 18 (8) a secure residential recovery facility; and
- 19 (9) a psychiatric residential treatment facility for youth.

1 Sec. 6. 18 V.S.A. § 7256 is amended to read:

2 § 7256. REPORTING REQUIREMENTS

3 Notwithstanding 2 V.S.A. § 20(d), the Department of Mental Health shall
4 report annually on or before January 15 to the Senate Committee on Health and
5 Welfare and the House Committee on ~~Human Services~~ Health Care regarding
6 the extent to which individuals with a mental health condition or psychiatric
7 disability receive care in the most integrated and least restrictive setting
8 available. The Department shall consider measures from a variety of sources,
9 including the Joint Commission, the National Quality Forum, the Centers for
10 Medicare and Medicaid Services, the National Institute of Mental Health, and
11 the Substance Abuse and Mental Health Services Administration. The report
12 shall address:

- 13 (1) use of services across the continuum of mental health services;
14 (2) adequacy of the capacity at each level of care across the continuum
15 of mental health services;
16 (3) individual experience of care and satisfaction;
17 (4) individual recovery in terms of clinical, social, and legal results;
18 (5) performance of the State’s mental health system of care as compared
19 to nationally recognized standards of excellence;
20 (6) ways in which patient autonomy and self-determination are
21 maximized within the context of involuntary treatment and medication;

1 license from the Department of Health for the psychiatric residential treatment
2 facility for youth in accordance with this section.

3 (b) Upon receipt of the application for a license, the Department of Health
4 shall issue a license if it determines that the applicant and the proposed
5 psychiatric residential treatment facility for youth meet the following minimum
6 standards:

7 (1) The applicant shall demonstrate the capacity to operate a psychiatric
8 residential treatment facility for youth in accordance with rules adopted by the
9 Department of Health and in a manner that ensures person-centered care and
10 resident dignity in accordance with 42 C.F.R. § 441.151.

11 (2) The applicant shall demonstrate that its facility complies fully with
12 standards for health, safety, and sanitation as required by State law, including
13 standards set forth by the State Fire Marshal and the Department of Health, and
14 municipal ordinance.

15 (3) The applicant shall have a clear process for responding to resident
16 complaints.

17 (4) The psychiatric residential treatment facility for youth, including the
18 buildings and grounds, shall be subject to inspection by the Department of
19 Disabilities, Aging, and Independent Living, its designees, and other
20 authorized entities at all times.

1 (c) A license is not transferable or assignable and shall be issued only for
2 the premises named in the application.

3 (d) Once licensed, a psychiatric residential treatment facility for youth shall
4 be among the placement options for individuals committed to the custody of
5 the Commissioner under an order of nonhospitalization.

6 (e) The Department of Health shall adopt rules pursuant to 3 V.S.A.
7 chapter 25 to carry out the purposes of this section. Rules pertaining to
8 emergency involuntary procedures shall:

9 (1) be identical to those rules adopted by the Department of Mental
10 Health governing the use of emergency involuntary procedures in psychiatric
11 inpatient units; and

12 (2) require that a certificate of need for all emergency involuntary
13 procedures performed at the psychiatric residential treatment facility for youth
14 be submitted to the Department and the Mental Health Care Ombudsman in the
15 same manner and time frame as required for hospitals.

16 Sec. 9. 18 V.S.A. § 7503 is amended to read:

17 § 7503. APPLICATION FOR VOLUNTARY ADMISSION

18 (a) Any person 14 years of age or over may apply for voluntary admission
19 to a designated hospital or psychiatric residential treatment facility for youth
20 for examination and treatment.

1 (b) Before the person may be admitted as a voluntary patient, the person
2 shall give consent in writing on a form adopted by the Department. The
3 consent shall include a representation that:

4 (1) the person understands that treatment will involve inpatient status or
5 residence at a psychiatric residential treatment facility for youth;

6 (2) the person desires to be admitted to ~~the~~ a hospital or a psychiatric
7 residential treatment facility for youth, respectively;

8 (3) the person consents to admission voluntarily, without any coercion
9 or duress; and

10 (4) the person understands that inpatient treatment or residence at a
11 psychiatric residential treatment facility for youth may be on a locked unit, and
12 a requested discharge may be deferred if the treating physician determines that
13 the person is a person in need of treatment pursuant to section 7101 of this
14 title.

15 (c) If the person is under 14 years of age, ~~he or she~~ the person may be
16 admitted as a voluntary patient if ~~he or she~~ the person consents to admission, as
17 provided in subsection (b) of this section, and if a parent or guardian makes
18 written application.

1 Sec. 10. 18 V.S.A. § 7612 is amended to read:

2 § 7612. APPLICATION FOR INVOLUNTARY TREATMENT

3 (a) An interested party may, by filing a written application, commence
4 proceedings for the involuntary treatment of an individual by judicial process.

5 * * *

6 (d) The application shall contain:

7 (1) The name and address of the applicant.

8 (2) A statement of the current and relevant facts upon which the
9 allegation of mental illness and need for treatment is based. The application
10 shall be signed by the applicant under penalty of perjury.

11 (e) The application shall be accompanied by:

12 (1) a certificate of a licensed physician, which shall be executed under
13 penalty of perjury stating that the physician has examined the proposed patient
14 within five days after the date the petition is filed and is of the opinion that the
15 proposed patient is a person in need of treatment, including the current and
16 relevant facts and circumstances upon which the physician's opinion is based;
17 or

18 (2) a written statement by the applicant that the proposed patient refused
19 to submit to an examination by a licensed physician.

20 (f) Before an examining physician completes the certificate of examination,
21 ~~he or she~~ the examining physician shall consider available alternative forms of

1 care and treatment that might be adequate to provide for the person’s needs
2 without requiring hospitalization. The examining physician shall document on
3 the certificate the specific alternative forms of care and treatment that ~~he or she~~
4 the examining physician considered and why those alternatives were deemed
5 inappropriate, including information on the availability of any appropriate
6 alternatives.

7 (g) If the Commissioner seeks to have the patient receive treatment in a
8 secure residential recovery facility or a psychiatric residential treatment facility
9 for youth, the application for an order authorizing treatment shall expressly
10 state that such treatment is being sought. The application shall contain, in
11 addition to the statements required by subsections (d) and (e) of this section, a
12 statement setting forth the reasons for the Commissioner’s determination that
13 clinically appropriate treatment for the patient’s condition can be provided
14 safely only in a secure residential recovery facility or a psychiatric residential
15 treatment facility for youth, respectively.

16 Sec. 11. 18 V.S.A. § 7618 is amended to read:

17 § 7618. ORDER; NONHOSPITALIZATION

18 (a) If the court finds that a treatment program other than hospitalization is
19 adequate to meet the person’s treatment needs, the court shall order the person
20 to receive whatever treatment other than hospitalization is appropriate for a
21 period of 90 days. If the treatment plan proposed by the Commissioner for a

1 secure residential recovery facility or a psychiatric residential treatment facility
2 for youth, the court may at any time, on its own motion or on a motion of an
3 interested party, review the need for treatment at the secure residential
4 recovery facility or the psychiatric residential treatment facility for youth,
5 respectively.

6 (b) If at any time during the specified period it comes to the attention of the
7 court either that the patient is not complying with the order or that the
8 alternative treatment has not been adequate to meet the patient’s treatment
9 needs, the court may, after proper hearing:

10 (1) consider other alternatives, modify its original order, and direct the
11 patient to undergo another program of alternative treatment for the remainder
12 of the 90-day period; or

13 (2) enter a new order directing that the patient be hospitalized for the
14 remainder of the 90-day period.

15 Sec. 12. 18 V.S.A. § 7620 is amended to read:

16 § 7620. APPLICATION FOR CONTINUED TREATMENT

17 * * *

18 (d) If the Commissioner seeks to have the patient receive the further
19 treatment in a secure residential recovery facility or a psychiatric residential
20 treatment facility for youth, the application for an order authorizing continuing
21 treatment shall expressly state that such treatment is being sought. The

1 application shall contain, in addition to the statements required by subsection
2 (b) of this section, a statement setting forth the reasons for the Commissioner’s
3 determination that clinically appropriate treatment for the patient’s condition
4 can be provided safely only in a secure residential recovery facility or a
5 psychiatric residential treatment facility for youth, respectively.

6 ~~(e) As used in this chapter:~~

7 ~~(1) “Secure,” when describing a residential facility, means that the~~
8 ~~residents can be physically prevented from leaving the facility by means of~~
9 ~~locking devices or other mechanical or physical mechanisms.~~

10 ~~(2) “Secure residential recovery facility” means a residential facility,~~
11 ~~licensed as a therapeutic community residence as defined in 33 V.S.A.~~
12 ~~§ 7102(11), for an individual who no longer requires acute inpatient care but~~
13 ~~who does remain in need of treatment within a secure setting for an extended~~
14 ~~period of time. A secure residential recovery facility shall not be used for any~~
15 ~~purpose other than the purposes permitted by this section.~~

16 Sec. 13. 18 V.S.A. § 7621 is amended to read:

17 § 7621. HEARING ON APPLICATION FOR CONTINUED TREATMENT;

18 ORDERS

19 * * *

20 (c) If the court finds that the patient is a patient in need of further treatment
21 but does not require hospitalization, it shall order nonhospitalization for up to

1 one year. If the treatment plan proposed by the Commissioner for a patient in
2 need of further treatment includes admission to a secure residential recovery
3 facility or a psychiatric residential treatment facility for youth, the court may at
4 any time, on its own motion or on motion of an interested party, review the
5 need for treatment at the secure residential recovery facility or the psychiatric
6 residential treatment facility for youth, respectively.

7 * * *

8 Sec. 14. 18 V.S.A. § 7624 is amended to read:

9 § 7624. APPLICATION FOR INVOLUNTARY MEDICATION

10 (a) The Commissioner may commence an action for the involuntary
11 medication of a person who is refusing to accept psychiatric medication and
12 meets any one of the following ~~six~~ conditions:

13 (1) has been placed in the Commissioner's care and custody pursuant to
14 section 7619 of this title or subsection 7621(b) of this title;

15 (2) has previously received treatment under an order of hospitalization
16 and is currently under an order of nonhospitalization, ~~including a person on an~~
17 ~~order of nonhospitalization who resides in a secure residential recovery~~
18 ~~facility;~~

19 (3) has been committed to the custody of the Commissioner on an order
20 of nonhospitalization and has been placed at a secure residential recovery
21 facility;

1 (4) has been committed to the custody of the Commissioner of
2 Corrections as a convicted felon and is being held in a correctional facility that
3 is a designated facility pursuant to section 7628 of this title and for whom the
4 Departments of Corrections and of Mental Health have determined jointly that
5 involuntary medication would be appropriate pursuant to 28 V.S.A.

6 § 907(4)(H);

7 (4)(5) has an application for involuntary treatment pending for which
8 the court has granted a motion to expedite pursuant to subdivision
9 7615(a)(2)(A)(i) of this title;

10 (5)(6)(A) has an application for involuntary treatment pending;

11 (B) waives the right to a hearing on the application for involuntary
12 treatment until a later date; and

13 (C) agrees to proceed with an involuntary medication hearing without
14 a ruling on whether ~~he or she~~ the person is a person in need of treatment; or

15 (6)(7) has had an application for involuntary treatment pending pursuant
16 to subdivision 7615(a)(1) of this title for more than 26 days without a hearing
17 having occurred and the treating psychiatrist certifies, based on specific
18 behaviors and facts set forth in the certification, that in ~~his or her~~ the
19 psychiatrist's professional judgment there is good cause to believe that:

20 (A) additional time will not result in the person establishing a
21 therapeutic relationship with providers or regaining competence; and

1 (B) serious deterioration of the person’s mental condition is
2 occurring.

3 (b)(1) Except as provided in subdivisions (2), ~~(3)(4)~~, and ~~(4)(5)~~ of this
4 subsection, an application for involuntary medication shall be filed in the
5 Family Division of the Superior Court in the county in which the person is
6 receiving treatment.

7 (2) If the application for involuntary medication is filed pursuant to
8 subdivision ~~(a)(4)~~ (a)(5) of this section:

9 (A) the application shall be filed in the county in which the
10 application for involuntary treatment is pending; and

11 (B) the court shall consolidate the application for involuntary
12 treatment with the application for involuntary medication and rule on the
13 application for involuntary treatment before ruling on the application for
14 involuntary medication.

15 (3) If the application for involuntary medication is filed pursuant to
16 subdivision ~~(a)(5)(6)~~ or ~~(a)(6)(7)~~ of this section, the application shall be filed in
17 the county in which the application for involuntary treatment is pending.

18 (4) Within 72 hours of the filing of an application for involuntary
19 medication pursuant to subdivision ~~(a)(6)(7)~~ of this section, the court shall
20 determine, based solely upon a review of the psychiatrist’s certification and
21 any other filings, whether the requirements of that subdivision have been

1 established. If the court determines that the requirements of subdivision
2 (a)~~(6)~~(7) of this section have been established, the court shall consolidate the
3 application for involuntary treatment with the application for involuntary
4 medication and hear both applications within 10 days after the date that the
5 application for involuntary medication is filed. The court shall rule on the
6 application for involuntary treatment before ruling on the application for
7 involuntary medication. Subsection 7615(b) of this title shall apply to
8 applications consolidated pursuant to this subdivision.

9 * * *

10 Sec. 15. 18 V.S.A. § 7628 is amended to read:

11 § 7628. PROTOCOL

12 The Department of Mental Health shall develop and adopt by rule a strict
13 protocol to ensure the health, safety, dignity, and respect of patients subject to
14 administration of involuntary psychiatric medications in any designated
15 hospital or secure residential recovery facility. This protocol shall be followed
16 by all designated hospitals and secure residential recovery facilities
17 administering involuntary psychiatric medications.

18 Sec. 16. 18 V.S.A. § 7703 is amended to read:

19 § 7703. TREATMENT

20 * * *

21 (b) The Department shall establish minimum standards for adequate
22 treatment as provided in this section, including requirements that, when

1 possible, psychiatric unit staff be used as the primary source to implement
2 emergency involuntary procedures such as seclusion and restraint. The
3 Department shall oversee and collect information and report on data regarding
4 the use of emergency involuntary procedures for patients admitted to a
5 psychiatric unit, a secure residential recovery facility, or a psychiatric
6 residential treatment facility for youth, regardless of whether the patient is
7 under the care and custody of the Commissioner.

8 * * * Policies Applicable to the Secure Residential Recovery Facility * * *

9 Sec. 17. RULEMAKING; SECURE RESIDENTIAL RECOVERY

10 FACILITY

11 On or before August 1, 2024, the Commissioner of Disabilities, Aging, and
12 Independent Living, in consultation with the Commissioner of Mental Health,
13 shall file permanent proposed rule amendments with the Secretary of State
14 pursuant to 3 V.S.A. § 836(a)(2) to the Department of Disabilities, Aging, and
15 Independent Living, Licensing and Operating Regulations for Therapeutic
16 Community Residences (CVR 13-110-12) for the purpose of amending the
17 secure residential recovery facility section of the rule. Prior to the permanent
18 rules taking effect, the Department shall adopt similar emergency rules that
19 shall be deemed to have met the standard for emergency rulemaking in
20 3 V.S.A. § 844. Both the permanent and emergency rules shall:

1 (1) authorize the use of emergency involuntary procedures at a secure
2 residential recovery facility in a manner identical to that required in rules
3 adopted by the Department of Mental Health governing the use of emergency
4 involuntary procedures in psychiatric inpatient units;

5 (2) require that a certificate of need for all emergency involuntary
6 procedures performed at a secure residential recovery facility be submitted to
7 the Department and the Mental Health Care Ombudsman in the same manner
8 and time frame as required for hospitals; and

9 (3) authorize the administration of involuntary medication at a secure
10 residential recovery facility in a manner identical to that required in rules
11 adopted by the Department of Mental Health governing the use of the
12 administration of involuntary medication in psychiatric inpatient units.

13 Sec. 18. 2021 Acts and Resolves No. 50, Sec. 3(c) is amended to read:

14 (c) The amount appropriated in subdivision (a)(1) of this section shall be
15 used to construct a 16-bed Secure Residential Recovery Facility on Parcel
16 ID# 200-5-003-001 as designated on the Town of Essex’s Tax Parcel Maps for
17 transitional support for individuals who are being discharged from inpatient
18 psychiatric care. Through interior fit-up, versus building redesign, the 16-bed
19 facility shall include two eight-bed wings designed with the capability to allow
20 for separation of one wing from the main section of the facility, if necessary.
21 Both wings shall be served by common clinical and activity spaces. ~~Neither~~

1 ~~wing shall include a locked seclusion area, and the facility shall not use~~
2 ~~emergency involuntary procedures.~~ Outdoor space shall be adequate for
3 exercise and other activities but not less than 10,000 square feet.

4 Sec. 19. CERTIFICATE OF NEED

5 Notwithstanding the requirements of 18 V.S.A. chapter 221, subchapter 5,
6 or any prior certificates of need issued pursuant to that subchapter, the secure
7 residential recovery facility shall be authorized to:

8 (1) use emergency involuntary procedures; and

9 (2) accept patients under an initial commitment order.

10 Sec. 20. REPEAL; INVOLUNTARY MEDICATION REPORT

11 1998 Acts and Resolves No. 114, Sec. 5 (report) is repealed on July 1, 2024.

12 * * * Persons in Need of Custody, Care, and Habilitation or Continued

13 Custody, Care, and Habilitation * * *

14 Sec. 21. 13 V.S.A. § 4814 is amended to read:

15 § 4814. ORDER FOR EXAMINATION OF COMPETENCY

16 * * *

17 (d) Notwithstanding any other provision of law, an examination ordered
18 pursuant to subsection (a) of this section may be conducted by a doctoral-level
19 psychologist trained in forensic psychology and licensed under 26 V.S.A.
20 chapter 55. ~~This subsection shall be repealed on July 1, 2024.~~

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Sec. 22. 13 V.S.A. § 4816 is amended to read:

§ 4816. SCOPE OF EXAMINATION; REPORT; EVIDENCE

* * *

(b) A competency evaluation for an individual thought to have a developmental disability shall ~~include~~ be a current evaluation by a doctoral-level psychologist trained in forensic psychology and skilled in assessing individuals with developmental disabilities.

* * *

(e) The relevant portion of a ~~psychiatrist's~~ report produced by a psychiatrist or psychologist, as described in subsection (c) of this section, shall be admitted into evidence as an exhibit on the issue of the person's mental competency to stand trial and the opinion shall be conclusive on the issue if agreed to by the parties and if found by the court to be relevant and probative on the issue.

(f) Introduction of a report under subsection (d) of this section shall not preclude either party or the court from calling the psychiatrist or psychologist as described in subsection (b) of this section who wrote the report as a witness or from calling witnesses or introducing other relevant evidence. Any witness called by either party on the issue of the defendant's competency shall be at the State's expense, or, if called by the court, at the court's expense.

1 Sec. 23. 13 V.S.A. § 4817 is amended to read:

2 § 4817. COMPETENCY TO STAND TRIAL; DETERMINATION

3 * * *

4 (c) If a person indicted, complained, or informed against for an alleged
5 criminal offense, an attorney or guardian acting in the person's behalf, or the
6 State, at any time before final judgment, raises before the court before which
7 such person is tried or is to be tried, the issue of whether such person is
8 incompetent to stand trial, or if the court has reason to believe that such person
9 may not be competent to stand trial, a hearing shall be held before such court at
10 which evidence shall be received and a finding made regarding the person's
11 competency to stand trial. However, in cases where the court has reason to
12 believe that such person may be incompetent to stand trial due to a mental
13 disease or mental defect, such hearing shall not be held until an examination
14 has been made and a report submitted by an examining psychiatrist or
15 psychologist in accordance with sections 4814–4816 of this title.

16 * * *

17 Sec. 24. 13 V.S.A. § 4820 is amended to read:

18 § 4820. HEARING REGARDING COMMITMENT

19 (a)(1) When a person charged on information, complaint, or indictment
20 with a criminal offense:

21 (1) ~~[Repealed.]~~

1 ~~(2)~~(A) is found upon hearing pursuant to section 4817 of this title to be
2 incompetent to stand trial due to a mental disease or mental defect;

3 ~~(3)~~(B) is not indicted upon hearing by grand jury by reason of insanity at
4 the time of the alleged offense, duly certified to the court; or

5 ~~(4)~~(C) upon trial by court or jury is acquitted by reason of insanity at the
6 time of the alleged offense;.

7 (2) the The court before which such person is tried or is to be tried for
8 such offense, shall hold a hearing for the purpose of determining whether such
9 person should be committed to the custody of the Commissioner of Mental
10 Health or Commissioner of Disabilities, Aging, and Independent Living, as
11 appropriate. Such person may be confined in jail or some other suitable place
12 by order of the court pending hearing for a period not exceeding 21 days.

13 (b) When a person is found to be incompetent to stand trial, has not been
14 indicted by reason of insanity for the alleged offense, or has been acquitted by
15 reason of insanity at the time of the alleged offense, the person shall be entitled
16 to have counsel appointed from Vermont Legal Aid to represent the person.
17 The Department of Mental Health and, if applicable, the Department of
18 Disabilities, Aging, and Independent Living shall be entitled to appear and call
19 witnesses at the proceeding.

20 (c) Notwithstanding any other provision of law, a commitment order issued
21 pursuant to this chapter shall not modify or vacate orders concerning

1 conditions of release or bail issued pursuant to chapter 229 of this title, and the
2 commitment order shall remain in place unless expressly modified, provided
3 that inpatient treatment shall be permitted if a person who is held without bail
4 is found to be in need of inpatient treatment under this chapter.

5 Sec. 25. 13 V.S.A. § 4823 is amended to read:

6 § 4823. FINDINGS AND ORDER; PERSONS WITH AN INTELLECTUAL
7 DISABILITY

8 (a) If the court finds by clear and convincing evidence that such person is a
9 person in need of custody, care, and habilitation as defined in 18 V.S.A.

10 § 8839, the court shall issue an order of commitment for up to one year
11 directed to the Commissioner of Disabilities, Aging, and Independent Living
12 for placement in a designated program in the least restrictive environment
13 consistent with the person's need for custody, care, and habilitation of such
14 person for an indefinite or limited period in a designated program.

15 (b) Such order of commitment shall have the same force and effect as an
16 order issued under 18 V.S.A. ~~§ 8843~~ chapter 206, subchapter 3 and persons
17 committed under such an order shall have the same status, and the same rights,
18 including the right to receive care and habilitation, to be examined and
19 discharged, and to apply for and obtain judicial review of their cases, as
20 persons ordered committed under 18 V.S.A. ~~§ 8843~~ chapter 206, subchapter 3.

1 (i) who was previously found to be a person in need of custody,
2 care, and habilitation;

3 (ii) who poses a danger of harm to others; and

4 (iii) for whom appropriate custody, care, and habilitation can be
5 provided by the Commissioner in a designated program.

6 (B) As used in this subdivision (3), a danger of harm to others shall
7 be shown by establishing that, in the time since the last order of commitment
8 was issued, the person:

9 (i) has inflicted or attempted to inflict serious bodily injury to
10 another or has committed an act that would constitute sexual conduct with a
11 child as defined in section 2821 of this title or lewd and lascivious conduct
12 with a child as provided in section 2602 of this title; or

13 (ii) has exhibited behavior demonstrating that, absent treatment or
14 programming provided by the Commissioner, there is a substantial likelihood
15 that the person would inflict or attempt to inflict physical or sexual harm to
16 another.

17 (4) “Person in need of custody, care, and habilitation” means a person:

18 (A) ~~a person~~ with an intellectual disability, which means significantly
19 subaverage intellectual functioning existing concurrently with deficits in
20 adaptive behavior that were manifest before 18 years of age;

1 (B) ~~who presents a danger of harm to others~~ has inflicted or
2 attempted to inflict serious bodily injury to another or who has committed an
3 act that would constitute sexual conduct with a child as defined in section 2821
4 of this title or lewd and lascivious conduct with a child as provided in section
5 2602 of this title; and

6 (C) for whom appropriate custody, care, and habilitation can be
7 provided by the Commissioner in a designated program.

8 (5) “Victim” has the same meaning as in 13 V.S.A. § 5301(4).

9 § 8840. ~~JURISDICTION AND VENUE~~

10 ~~Proceedings brought under this subchapter for commitment to the~~
11 ~~Commissioner for custody, care, and habilitation shall be commenced by~~
12 ~~petition in the Family Division of the Superior Court for the unit in which the~~
13 ~~respondent resides. [Repealed.]~~

14 § 8841. ~~PETITION; PROCEDURES~~

15 ~~The filing of the petition and procedures for initiating a hearing shall be as~~
16 ~~provided in sections 8822-8826 of this title. [Repealed.]~~

17 § 8842. ~~HEARING~~

18 ~~Hearings under this subchapter for commitment shall be conducted in~~
19 ~~accordance with section 8827 of this title. [Repealed.]~~

20 § 8843. ~~FINDINGS AND ORDER~~

1 ~~(a) In all cases, the court shall make specific findings of fact and state its~~
2 ~~conclusions of law.~~

3 ~~(b) If the court finds that the respondent is not a person in need of custody,~~
4 ~~care, and habilitation, it shall dismiss the petition.~~

5 ~~(c) If the court finds that the respondent is a person in need of custody,~~
6 ~~care, and habilitation, it shall order the respondent committed to the custody of~~
7 ~~the Commissioner for placement in a designated program in the least restrictive~~
8 ~~environment consistent with the respondent's need for custody, care, and~~
9 ~~habilitation for an indefinite or a limited period. [Repealed.]~~

10 § 8844. LEGAL COMPETENCE

11 No determination that a person is in need of custody, care, and habilitation
12 or in need of continued custody, care, and habilitation and no order authorizing
13 commitment shall lead to a presumption of legal incompetence.

14 § 8845. ~~JUDICIAL REVIEW~~ PETITION AND ORDER FOR CONTINUED
15 CUSTODY, CARE, AND HABILITATION

16 ~~(a) A person committed under this subchapter may be discharged from~~
17 ~~custody by a Superior judge after judicial review as provided herein or by~~
18 ~~administrative order of the Commissioner.~~

19 ~~(b) Procedures for judicial review of persons committed under this~~
20 ~~subchapter shall be as provided in section 8834 of this title, except that~~
21 ~~proceedings shall be brought in the Criminal Division of the Superior Court in~~

1 ~~the unit in which the person resides or, if the person resides out of state, in the~~
2 ~~unit that issued the original commitment order.~~

3 ~~(c) A person committed under this subchapter shall be entitled to a judicial~~
4 ~~review annually. If no such review is requested by the person, it shall be~~
5 ~~initiated by the Commissioner. However, such person may initiate a judicial~~
6 ~~review under this subsection after 90 days after initial commitment but before~~
7 ~~the end of the first year of the commitment.~~

8 ~~(d) If at the completion of the hearing and consideration of the record, the~~
9 ~~court finds at the time of the hearing that the person is still in need of custody,~~
10 ~~care, and habilitation, commitment shall continue for an indefinite or limited~~
11 ~~period. If the court finds at the time of the hearing that the person is no longer~~
12 ~~in need of custody, care, and habilitation, it shall discharge the person from the~~
13 ~~custody of the Commissioner. An order of discharge may be conditional or~~
14 ~~absolute and may have immediate or delayed effect.~~

15 (1) If, prior to the expiration of any previous commitment order issued in
16 accordance with 13 V.S.A. § 4823 or this subchapter, the Commissioner
17 believes that the person is a person in need of continued custody, care, and
18 habilitation, the Commissioner shall seek continued custody, care, and
19 habilitation in the Family Division of the Superior Court. The Commissioner
20 shall, by filing a written petition, commence proceedings for the continued
21 custody, care, and habilitation of a person. The petition shall state the current

1 and relevant facts upon which the person’s alleged need for continued custody,
2 care, and habilitation is predicated.

3 (2) Any commitment order for custody, care, and habilitation or
4 continued custody, care, and habilitation issued in accordance with 13 V.S.A.
5 § 4823 or this subchapter shall remain in force pending the court’s decision on
6 the petition.

7 (b) Upon receipt of the petition for the continued custody, care, and
8 habilitation, the court shall hold a hearing within 14 days after the date of
9 filing.

10 (c) If the court finds by clear and convincing evidence at the time of the
11 hearing that the person is a person in need of continued custody, care, and
12 habilitation, it shall issue an order of commitment for up to one year in a
13 designated program in the least restrictive environment consistent with the
14 person’s need for continued custody, care, and habilitation. If the court finds
15 at the time of the hearing that the person is no longer in need of continued
16 custody, care, and habilitation, it shall discharge the person from the custody of
17 the Commissioner in accordance with section 8847 of this subchapter. In
18 determining whether a person is a person in need of continued custody, care,
19 and habilitation, the court shall consider the degree to which the person has
20 previously engaged in or complied with the treatment and programming
21 provided by the Commissioner.

1 § 8846. RIGHT TO INITIATE REVIEW

2 A person may initiate a judicial review in the Family Division of the
3 Superior Court or an administrative review under this subchapter at any time
4 after 90 days following a current order of commitment or continued
5 commitment and not earlier than six months after the filing of a previous
6 application under this section. If the court or Commissioner finds that the
7 person is not a person in need of custody, care, and habilitation or continued
8 custody, care, and habilitation, the person shall be discharged from the custody
9 of the Commissioner pursuant to section 8847 of this subchapter.

10 § 8847. DISCHARGE FROM COMMITMENT

11 (a) A person committed under 13 V.S.A. § 4823 or this subchapter may be
12 discharged as follows:

13 (1) by a Family Division Superior Court judge after review of an order
14 of custody, care, and habilitation or an order of continued custody, care, and
15 habilitation if the court finds that a person is not a person in need of custody,
16 care, and habilitation or continued custody, care, and habilitation, respectively;
17 or

18 (2) by administrative order of the Commissioner regarding an order of
19 custody, care, and habilitation or an order of continued custody, care, and
20 habilitation if the Commissioner determines that a person is no longer a person

1 in need of custody, care, and habilitation or continued custody, care, and
2 habilitation, respectively.

3 (b) A judicial or administrative order of discharge may be conditional or
4 absolute and may have immediate or delayed effect.

5 (c)(1) When a person is under an order of commitment pursuant to
6 13 V.S.A. § 4823 or continued commitment pursuant to this subchapter, the
7 Commissioner shall provide notice to the State’s Attorney of the county where
8 the prosecution originated or to the Office of the Attorney General if that
9 Office prosecuted the case:

10 (A) at least 10 days prior to discharging a person from commitment
11 or continued commitment;

12 (B) at least 10 days prior to the expiration of a commitment or
13 continued commitment order if the Commissioner does not seek an order of
14 continued custody, care, and habilitation; or

15 (C) any time that the person elopes from custody of the
16 Commissioner and cannot be located, and there is reason to believe the person
17 may be lost or poses a risk of harm to others.

18 (2) When the State’s Attorney or Attorney General receives notice under
19 subdivision (1) of this subsection, the Office shall provide notice of the action
20 to any victim of the offense for which the person has been charged who has not
21 opted out of receiving notice.

1 facility to the House Committee on Human Services and to the Senate
2 Committee on Health and Welfare for enhanced community-based services for
3 those individuals committed to the Commissioner who require custody, care,
4 and habilitation in a secure setting for brief periods of time. A proposal
5 submitted pursuant to this subsection shall address required resources,
6 including funding and staffing, and be eligible for funding through the Global
7 Commitment Home- and Community-Based Services Waiver.

8 * * * Fiscal Estimate of Competency Restoration Program * * *

9 Sec. 28. REPORT; COMPETENCY RESTORATION PROGRAM; FISCAL
10 ESTIMATE

11 On or before November 1, 2024, the Agency of Human Services shall
12 submit a report to the House Committees on Appropriations, on Health Care,
13 and on Human Services and to the Senate Committees on Appropriations and
14 on Health and Welfare that provides a fiscal estimate for the implementation of
15 a competency restoration program operated or under contract with the
16 Department of Mental Health. The estimate shall include:

17 (1) whether and how to serve individuals with an intellectual disability
18 in a competency restoration program;

19 (2) varying options dependent upon which underlying charges are
20 eligible for court-ordered competency restoration; and

1

2

Representative _____

3

FOR THE COMMITTEE