1	TO THE HOUSE OF REPRESENTATIVES:
2	The Committee on Judiciary to which was referred Senate Bill No. 89
3	entitled "An act relating to establishing a forensic facility" respectfully reports
4	that it has considered the same and recommends that the House propose to the
5	Senate that the bill be amended by striking out all after the enacting clause and
6	inserting in lieu thereof the following:
7	* * * Purpose * * *
8	Sec. 1. PURPOSE
9	It is the purpose of this act to enable the Commissioner of Mental Health to
10	seek treatment and programming for certain individuals in a forensic facility.
11	An initial forensic facility shall be located in the nine-bed unit of the current
12	Vermont Psychiatric Care Hospital. This unit shall be relicensed as a
13	therapeutic community residence.
14	* * * Human Services Community Safety Panel * * *
15	Sec. 2. 3 V.S.A. § 3098 is added to read:
16	<u>§ 3098. HUMAN SERVICES COMMUNITY SAFETY PANEL</u>
17	(a) There is hereby created the Human Services Community Safety Panel
18	within the Agency of Human Services. The Panel shall be designated as the
19	entity responsible for assessing the potential placement of individuals at a
20	forensic facility pursuant to 13 V.S.A. § 4821 for individuals who:
21	(1) present a significant risk of danger if not held in a secure setting; and

1	(2)(A) are charged with a crime for which bail is not available; or
2	(B) were charged with a crime for which bail is not available and
3	adjudicated not guilty by reason of insanity.
4	(b)(1) The Panel shall comprise the following members:
5	(A) the Secretary of Human Services;
6	(B) the Commissioner of Mental Health; and
7	(C) the Commissioner of Corrections.
8	(2) The Panel shall have the technical, legal, fiscal, and administrative
9	support of the Agency of Human Services and the Departments of Mental
10	Health and of Corrections.
11	* * * Admission to Forensic Facility for Persons in Need of Treatment or
12	Continued Treatment * * *
13	Sec. 3. 13 V.S.A. § 4821 is amended to read:
14	§ 4821. NOTICE OF HEARING; PROCEDURES
15	(a) The person who is the subject of the proceedings, his or her; the
16	person's attorney;; the legal guardian, if any;; the Commissioner of Mental
17	Health or the Commissioner of Disabilities, Aging, and Independent Living;
18	and the State's Attorney or other prosecuting officer representing the State in
19	the case shall be given notice of the time and place of a hearing under
20	section 4820 of this title. Procedures for hearings for persons with a mental
21	illness shall be as provided in 18 V.S.A. chapter 181. Procedures for hearings

1	for persons with an intellectual disability shall be as provided in 18 V.S.A.
2	chapter 206, subchapter 3.
3	(b)(1) Once a report concerning competency or sanity is completed or
4	disclosed to the opposing party, the Human Services Community Safety Panel
5	established in 3 V.S.A. § 3098 may conduct a review on its own initiative
6	regarding whether placement of the person who is the subject of the report is
7	appropriate in a forensic facility. The review shall inform either the
8	Commissioner of Mental Health's decision in whether to seek placement of the
9	person in a forensic facility.
10	(2)(A) If the Panel does not initiate its own review, a party to a hearing
11	under section 4820 of this chapter may file a written motion to the court
12	requesting that the Panel conduct a review within seven days after receiving a
13	report under section 4816 of this chapter or within seven days of being
14	adjudicated not guilty by reason of insanity.
15	(B) A motion filed pursuant to this subdivision shall specify that the
16	person who is the subject of the proceedings is charged with a crime for which
17	there is no right to bail pursuant to sections 7553 and 7553a of this title, and
18	may include a person adjudicated not guilty by reason of insanity, and that the
19	person presents a significant risk of danger to themselves or the public if not
20	held in a secure setting.

1	(C) The court shall rule on a motion filed pursuant to this subdivision
2	within five days. A Panel review ordered pursuant to this subdivision shall be
3	completed and submitted to the court at least three days prior to a hearing
4	under section 4820 of this title.
5	(c) In conducting a review as whether to seek placement of a person in a
6	forensic facility, the Human Services Community Safety Panel shall consider
7	the following criteria:
8	(1) clinical factors, including:
9	(A) that the person is served in the least restrictive setting necessary
10	to meet the needs of the person; and
11	(B) that the person's treatment and programming needs dictate that
12	the treatment or programming be provided at an intensive residential level; and
13	(2) dangerousness factors, including:
14	(A) whether the person has inflicted or attempted to inflict serious
15	bodily injury on another, attempted suicide or serious self-injury, or committed
16	an act that would constitute sexual or lewd and lascivious conduct with a child,
17	and there is reasonable probability that the conduct will be repeated if
18	admission to a forensic facility is not ordered;
19	(B) whether the person has threatened to inflict serious bodily injury
20	to the person or others and there is reasonable probability that the conduct will
20	occur if admission to a forensic facility is not ordered;

1	(C) whether the results of any applicable evidence-based violence
2	risk assessment tool indicates that the person's behavior is deemed a
3	significant risk to others;
4	(D) the position of the parties to the criminal case as well as that of
5	any victim as defined in subdivision 5301(4) of this title; and
6	(E) any other factors the Human Services Community Safety Panel
7	determines to be relevant to the assessment of risk.
8	Sec. 4. 18 V.S.A. § 7101 is amended to read:
9	§ 7101. DEFINITIONS
10	As used in this part of this title, the following words, unless the context
11	otherwise requires, shall have the following meanings:
12	* * *
13	(31)(A) "Forensic facility" means a residential facility, licensed as a
14	therapeutic community residence as defined in 33 V.S.A. § 7102(11), for an
15	individual initially committed pursuant to 13 V.S.A. § 4822 who is in need of
16	treatment or further treatment pursuant to chapter 181 of this title within a
17	secure setting for an extended period of time.
18	(B) A forensic facility shall not be used for any purpose other than
19	the purposes permitted by this part. As used in this subdivision (31), "secure"
20	has the same meaning as in section 7620 of this title.
21	Sec. <mark>5</mark> . 18 V.S.A. § 7612 is amended to read:

1	§ 7612. APPLICATION FOR INVOLUNTARY TREATMENT
2	(a) An interested party may, by filing a written application, commence
3	proceedings for the involuntary treatment of an individual by judicial process.
4	(b) The application shall be filed in the Family Division of the Superior
5	Court.
6	(c) If the application is filed under section 7508 or 7620 of this title, it shall
7	be filed in the unit of the Family Division of the Superior Court in which the
8	hospital is located. In all other cases, it shall be filed in the unit in which the
9	proposed patient resides. In the case of a nonresident, it may be filed in any
10	unit. The court may change the venue of the proceeding to the unit in which
11	the proposed patient is located at the time of the trial.
12	(d) The application shall contain:
13	(1) The name and address of the applicant.
14	(2) A statement of the current and relevant facts upon which the
15	allegation of mental illness and need for treatment is based. The application
16	shall be signed by the applicant under penalty of perjury.
17	(e) The application shall be accompanied by:
18	(1) a certificate of a licensed physician, which shall be executed under
19	penalty of perjury stating that he or she the licensed physician has examined
20	the proposed patient within five days $\frac{1}{2}$ from the date the petition is filed and
21	is of the opinion that the proposed patient is a person in need of treatment,

1	including the current and relevant facts and circumstances upon which the
2	physician's opinion is based; or
3	(2) a written statement by the applicant that the proposed patient refused
4	to submit to an examination by a licensed physician.
5	(f) Before an examining physician completes the certificate of examination,
6	he or she the examining physician shall consider available alternative forms of
7	care and treatment that might be adequate to provide for the person's needs
8	without requiring hospitalization. The examining physician shall document on
9	the certificate the specific alternative forms of care and treatment that he or she
10	the examining physician considered and why those alternatives were deemed
11	inappropriate, including information on the availability of any appropriate
12	alternatives.
13	(g) If the Commissioner seeks to have a person receive treatment in a
14	forensic facility pursuant to an order of nonhospitalization, the application for
15	an order authorizing treatment shall expressly state that such treatment is being
16	sought. The application shall contain, in addition to the statements required by
17	this section, a statement setting forth the reasons for the Commissioner's
18	determination that clinically appropriate treatment for the person's condition
19	can be provided safely only in a forensic facility, including the
20	recommendation of the Human Services Community Safety Panel pursuant to
21	<u>13 V.S.A. § 4821.</u>

1	Sec. 6. 18 V.S.A. § 7615 is amended to read:
2	§ 7615. HEARING ON APPLICATION FOR INVOLUNTARY
3	TREATMENT
4	(a)(1) Upon receipt of the application, the court shall set a date for the
5	hearing to be held within 10 days from the date of the receipt of the application
6	or 20 days from the date of the receipt of the application if a psychiatric
7	examination is ordered under section 7614 of this title unless the hearing is
8	continued by the court pursuant to subsection (b) of this section.
9	(2)(A) The applicant or a person who is certified as a person in need of
10	treatment pursuant to section 7508 of this title may file a motion to expedite
11	the hearing. The motion shall be supported by an affidavit, and the court shall
12	rule on the motion on the basis of the filings without holding a hearing. The
13	court:
14	(i) shall grant the motion if it finds that the person demonstrates a
15	significant risk of causing the person or others serious bodily injury as defined
16	in 13 V.S.A. § 1021 even while hospitalized, and clinical interventions have
17	failed to address the risk of harm to the person or others;
18	(ii) may grant the motion if it finds that the person has received
19	involuntary medication pursuant to section 7624 of this title during the past
20	two years and, based upon the person's response to previous and ongoing
21	treatment, there is good cause to believe that additional time will not result in

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the person establishing a therapeutic relationship with providers or regaining
competence.
(B) If the court grants the motion for expedited hearing pursuant to
this subdivision, the hearing shall be held within ten days from the date of the
order for expedited hearing.
(3)(A) The applicant or a person for whom an order of
nonhospitalization at a forensic facility is sought may file a motion to expedite
the hearing. The motion shall be supported by an affidavit. The court:
(i) shall grant the motion if it finds that the person demonstrates a
significant risk of causing the person or others serious bodily injury as defined
in 13 V.S.A. § 1021 even while in custody, and clinical interventions have
failed to address the risk of harm to the person or others;
(ii) may grant the motion if it finds that the person has received
involuntary medication pursuant to section 7624 of this title during the past
two years and, based upon the person's response to previous and ongoing
treatment, there is good cause to believe that additional time will not result in
the person establishing a therapeutic relationship with providers or regaining
competence.
(B) If the court grants the motion for expedited hearing pursuant to
this subdivision (3), the hearing shall be held within three days from the date of
the order for expedited hearing. The court may grant an extension of not more

1	than five days to allow for a psychiatric examination in accordance with
2	section 7614 of this title.
3	(4) If a hearing on the application for involuntary treatment has not
4	occurred within 60 days from the date of the court's receipt of the application,
5	the Commissioner shall request that the court and both parties' attorneys
6	provide the reasons for the delay. The Commissioner shall submit a report to
7	the court, the Secretary of Human Services, and the patient's attorney that
8	either explains why the delay was warranted or makes recommendations as to
9	how delays of this type can be avoided in the future.
10	* * *
11	Sec. 7. 18 V.S.A. § 7618 is amended to read:
12	§ 7618. ORDER; NONHOSPITALIZATION
13	(a) Order of nonhospitalization.
14	(1) If the court finds that a treatment program other than hospitalization
15	is adequate to meet the person's treatment needs, the court shall order the
16	person to receive whatever treatment other than hospitalization is appropriate
17	for a period of 90 days.
18	(2) If the Commissioner determines that treatment at a forensic facility
19	is appropriate, and the court finds that treatment at a forensic facility is the
20	least restrictive setting adequate to meet the person's needs, the court shall
21	order the person to receive treatment there for a period of 90 days. The court

1	may at any time, on its own motion or on motion of an interested party, review
2	the need for treatment at the forensic facility.
3	(b) Noncompliance with order or inadequacy of treatment. If at any time
4	during the specified period it comes to the attention of the court either that the
5	patient is not complying with the order or that the alternative treatment has not
6	been adequate to meet the patient's treatment needs, the court may, after
7	proper hearing:
8	(1) Consider consider other alternatives, modify its original order, and
9	direct the patient to undergo another program of alternative treatment for the
10	remainder of the 90-day period; or
11	(2) Enter enter a new order directing that the patient be hospitalized for
12	the remainder of the 90-day period.
13	(c) Discharge from a forensic facility.
14	(1) When a person has been committed under subdivision (a)(2) of this
15	section, the Commissioner shall provide notice at least ten days prior to
16	discharging the person from a forensic facility to either the State's Attorney of
17	the county where the prosecution originated or to the Office of the Attorney
18	General if that office prosecuted the case.
19	(2) When the State's Attorney or the Attorney General receives
20	notification pursuant to subdivision (1) of this subsection, the respective office
21	shall provide notice of the action to any victim of the offense for which the

1	person has been charged, unless the victim has opted not to receive notice. As
2	used in this subdivision (2), "victim" has the same meaning as in 13 V.S.A.
3	<u>§ 5301(4).</u>
4	(3) The State's Attorney of the county where the prosecution originated
5	or the Office of the Attorney General if that office prosecuted the case, or the
6	victim may request a discharge hearing to be held within 10 days after
7	receiving notice under this subsection. The pending discharge shall be stayed
8	during this 10-day period. The State's Attorney, or the Attorney General's
9	Office, and the victim shall be permitted to appear and be heard on whether the
10	person shall be discharged from a forensic facility. The prosecutor may call
11	witnesses and present evidence pursuant to section 7612 of this title. When
12	deciding whether to discharge a person from the forensic facility, the
13	Commissioner of shall have the sole discretion to take testimony or evidence
14	provided pursuant to this subdivision into consideration.
15	(4) For persons committed to a forensic facility, the Criminal Division
16	of the Superior Court shall retain jurisdiction over the person's underlying
17	charge and any orders concerning conditions of release or bail pursuant to 13
18	V.S.A. chapter 229 shall remain in place. Those orders shall be placed on hold
19	while the person is held at the forensic facility. When a person is discharged
20	from the forensic facility to a correctional facility, the custody of the

1	Commissioner of Mental Health, shall cease upon that person entering the
2	correctional facility.
3	Sec. 8. 18 V.S.A. § 7620 is amended to read:
4	§ 7620. APPLICATION FOR CONTINUED TREATMENT
5	(a) If, prior to the expiration of any order issued in accordance with section
6	7623 of this title, the Commissioner believes that the condition of the patient is
7	such that the patient continues to require treatment, the Commissioner shall
8	apply to the court for a determination that the patient is a patient in need of
9	further treatment and for an order of continued treatment.
10	(b) An application for an order authorizing continuing treatment shall
11	contain a statement setting forth the reasons for the Commissioner's
12	determination that the patient is a patient in need of further treatment, a
13	statement describing the treatment program provided to the patient, and the
14	results of that course of treatment.
15	(c) Any order of treatment issued in accordance with section 7623 of this
16	title shall remain in force pending the court's decision on the application.
17	(d) If the Commissioner seeks to have the patient receive the further
18	treatment in a forensic facility or secure residential recovery facility, the
19	application for an order authorizing continuing treatment shall expressly state
20	that such treatment is being sought. The application shall contain, in addition
21	to the statements required by subsection (b) of this section, a statement setting

1	forth the reasons for the Commissioner's determination that clinically
2	appropriate treatment for the patient's condition can be provided safely only in
3	a secure residential recovery facility or forensic facility, as appropriate.
4	(e) As used in this chapter:
5	(1) "Secure," when describing a residential facility, means that the
6	residents can be physically prevented from leaving the facility by means of
7	locking devices or other mechanical or physical mechanisms.
8	(2) "Secure residential recovery facility" means a residential facility,
9	licensed as a therapeutic community residence as defined in 33 V.S.A.
10	§ 7102(11), for an individual who no longer requires acute inpatient care but
11	who does remain in need of treatment within a secure setting for an extended
12	period of time. A secure residential recovery facility shall not be used for any
13	purpose other than the purposes permitted by this section.
14	Sec. 9. 18 V.S.A. § 7621 is amended to read:
15	§ 7621. HEARING ON APPLICATION FOR CONTINUED TREATMENT;
16	ORDERS
17	* * *
18	(c) If the court finds that the patient is a patient in need of further treatment
19	but does not require hospitalization, it shall order nonhospitalization for up to
20	one year. If the treatment plan proposed by the Commissioner for a patient in
21	need of further treatment includes admission to a secure residential recovery

1	facility or a forensic facility, the court may at any time, on its own motion or
2	on motion of an interested party, review the need for treatment at the secure
3	residential recovery facility or forensic facility, as applicable.
4	* * *
5	Sec. 10. 18 V.S.A. § 7624 is amended to read:
6	§ 7624. APPLICATION FOR INVOLUNTARY MEDICATION
7	(a) The Commissioner may commence an action for the involuntary
8	medication of a person who is refusing to accept psychiatric medication and
9	meets any one of the following six conditions:
10	(1) has been placed in the Commissioner's care and custody pursuant to
11	section 7619 of this title or subsection 7621(b) of this title;
12	(2) has previously received treatment under an order of hospitalization
13	and is currently under an order of nonhospitalization, including a person on an
14	order of nonhospitalization who resides in a secure residential recovery
15	facility;
16	(3) has been committed to the custody of the Commissioner of
17	Corrections as a convicted felon and is being held in a correctional facility
18	which that is a designated facility pursuant to section 7628 of this title and for
19	whom the Departments of Corrections and of Mental Health have determined
20	jointly that involuntary medication would be appropriate pursuant to 28 V.S.A.
21	§ 907(4)(H);

1	(4) has an application for involuntary treatment pending for which the
2	court has granted a motion to expedite pursuant to subdivision 7615(a)(2)(A)(i)
3	of this title;
4	(5)(A) has an application for involuntary treatment pending;
5	(B) waives the right to a hearing on the application for involuntary
6	treatment until a later date; and
7	(C) agrees to proceed with an involuntary medication hearing without
8	a ruling on whether he or she <u>the person</u> is a person in need of treatment; or
9	(6) has been placed under an order of nonhospitalization in a forensic
10	facility or has an application for involuntary treatment at a forensic facility
11	pending for which the court has granted a motion to expedite pursuant to
12	subdivision 7615(a)(3)(A)(i) of this title, regardless of whether the person has
13	previously been under an order of hospitalization; or
14	(7) has had an application for involuntary treatment pending pursuant to
15	subdivision 7615(a)(1) of this title for more than 26 days without a hearing
16	having occurred and the treating psychiatrist certifies, based on specific
17	behaviors and facts set forth in the certification, that in his or her the
18	psychiatrist's professional judgment there is good cause to believe that:
19	(A) additional time will not result in the person establishing a
20	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), and (4) 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) $\underline{\text{or } (a)(6)}$ 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) 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 $\frac{1}{2}$ after 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 ten days $\frac{1}{2}$ of 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. 11. 18 V.S.A. § 7627 is amended to read:
11	§ 7627. COURT FINDINGS; ORDERS
12	* * *
13	(o) For a person who is receiving treatment pursuant to an order of
14	nonhospitalization in a forensic facility, if the court finds that without an order
15	for involuntary medication there is a substantial probability that the person
16	would continue to refuse medication and as a result would pose a danger of
17	harm to self or others, the court may order administration of involuntary
18	medications at a forensic facility for up to 90 days, unless the court finds that
19	an order is necessary for a longer period of time. An order for involuntary
20	medication pursuant to this subsection shall not be longer than the duration of
21	the current order of nonhospitalization. If at any time the treating psychiatrist

1	finds that a person subject to an order for involuntary medication has become
2	competent pursuant to subsection 7625(c) of this title, the order shall no longer
3	be in effect.
4	* * * Certificate of Need * * *
5	Sec. 12. 18 V.S.A. § 9435 is amended to read:
6	§ 9435. EXCLUSIONS
7	* * *
8	(g) Excluded from this subchapter is any forensic facility, as defined in
9	18 V.S.A. § 7101, that is supervised and operated by the Commissioner of
10	Mental Health.
11	* * * Rulemaking * * *
12	Sec. 13. RULEMAKING; CONFORMING AMENDMENTS
13	On or before July 1, 2023, the Commissioners of Mental Health and of
14	Disabilities, Aging, and Independent Living, respectively, shall file initial
15	proposed rule amendments with the Secretary of State pursuant to 3 V.S.A.
16	<u>§ 826(a)(2) to account for the establishment of the forensic facility:</u>
17	(1) Department of Disabilities, Aging, and Independent Living,
18	Licensing and Operating Regulations for Therapeutic Community Residences
19	(CVR 13-110-12) for the purpose of allowing the use of emergency
20	involuntary procedures and the administration of involuntary medication at a
21	forensic facility; and

1	(2) Department of Mental Health, Rules for the Administration of
2	Nonemergency Involuntary Psychiatric Medications (CVR 13-150-11) for the
3	purpose of allowing the administration of involuntary medication at a forensic
4	facility.
5	* * * Presentation and Report * * *
6	Sec. 14. PRESENTATION; FORENSIC FACILITY PROGRAMMING
7	On or before February 1, 2024, the Department of Mental Health shall
8	present the following information to the House Committee on Human Services
9	and to the Senate Committee on Health and Welfare:
10	(1) a plan for staffing and programming at the forensic facility,
11	including whether any specialized training will be required for staff members
12	and whether any services provided at the forensic facility will be contracted to
13	third parties; and
14	(2) whether any additional resources are needed for the operation of the
15	forensic facility.
16	Sec. 15. REPORT; FORENSIC FACILITY
17	Annually, on or before January 15 between 2025 and 2030, the Department
18	of Mental Health shall submit a report to the House Committee on Human
19	Services and to the Senate Committee on Health and Welfare containing:
20	(1) the average daily census at the forensic facility, including trends
21	over time;

1	(2) the number of individuals waitlisted for the forensic facility, and
2	where these individuals receive treatment or programming while waiting for a
3	bed at the forensic facility;
4	(3) aggregated demographic data about the individuals served at the
5	forensic facility; and
6	(4) an account of the number and types of emergency involuntary
7	procedures used at the forensic facility.
8	* * * Working Group on Policies Pertaining to Individuals with
9	Developmental or Intellectual Disability Who are Criminal-Justice Involved
10	<mark>* * *</mark>
11	Sec. 16. WORKING GROUP ON POLICIES PERTAINING TO
12	INDIVIDUALS WITH DEVELOPMENT OR INTELLECTUAL
13	DISABILITY WHO ARE CRIMINAL-JUSTICE INVOLVED
14	(a) Creation. There is created the Working Group on Policies Pertaining to
15	Individuals with Developmental or Intellectual Disability Who are Criminal-
16	Justice Involved to assess the need for a forensic-level of care for individuals
17	with developmental or intellectual disability.
18	(b) Membership. The Working Group shall be composed of the following
19	members:

1	(1) an employee of the Department for Disabilities, Aging, and
2	Independent Living who represents the public guardianship program or who is
3	a public safety specialist;
4	(2) a representative, appointed by the Disability Law Project of Vermont
5	Legal Aid;
6	(3) a representative, appointed by the Developmental Disabilities
7	Council:
8	(4) the Chief Administrative Judge or designee;
9	(5) a representative, appointed by the Green Mountain Self Advocates;
10	(6) a representative, appointed by Vermont Care Partners;
11	(7) a psychologist with experience conducting competency evaluations
12	under Act 248, appointed by the Vermont Psychological Association:
13	(7) two individuals with lived experience of a developmental or
14	intellectual disability, at least one of whom has previous experience in the
15	criminal-justice system of civil commitment system, or both, appointed by
16	Vermont Legal Aid; and
17	(8) a family member of an individual with a developmental or
18	intellectual disability who has experience in the criminal-justice system or Act
19	248, appointed by the State Program Standing Committee for Developmental
20	Services.

1	(c) Powers and duties. The Working Group shall assess the need for a
2	forensic-level of care for individuals with developmental or intellectual
3	disability, including:
4	(1) identifying any unmet needs and resource gaps for individuals with
5	developmental or intellectual disability who may be in need of forensic-level
6	care:
7	(2) recommending investments, policies, and programmatic options for
8	high quality community-based supports for at risk individuals committed to the
9	custody of the Commissioner of Disabilities, Aging, and Independent Living;
10	(3) recommending whether clinical care in a forensic facility should be
11	an option for individuals with development or intellectual disability;
12	(4) recommending whether clinical care in a forensic facility would
13	fully address the State's commitment to community-based care and non-
14	institutionalization;
15	(5) recommending updates to Act 248;
16	(6) recommending establishing an ombudsman, or Vermont Legal Aid
17	or Disability Rights Vermont could ensure necessary oversight of quality care
18	and protection of rights for individuals with development or intellectual
19	disability related to forensic-level care;
20	(7) recommending how to ensure due process rights for individuals with
21	developmental or intellectual disability; and

1	(8) any other activities the working group deems necessary to complete
2	its work.
3	(d) Assistance. The Working Group shall have the administrative,
4	technical, and legal assistance of the Department of Disabilities, Aging, and
5	Independent Living.
6	(e) Report. On or before November 1, 2024, the Working Group shall
7	submit a written report to the House Committees on Human Services and on
8	Judiciary and to the Senate Committee on Health Welfare and on Judiciary
9	with its findings and any recommendations for legislative action, including
10	proposed legislative language.
11	(f) Meetings.
12	(1) The representative of the Department of Disabilities, Aging, and
13	Independent Living shall call the first meeting of the Working Group to occur
14	on or before September 1, 2023.
15	(2) The Committee shall select a chair from among its members at the
16	first meeting.
17	(3) A majority of the membership shall constitute a quorum.
18	(4) The Working Group shall cease to exist on [date].
19	(g) Compensation and reimbursement. Members of the Working Group
20	not otherwise compensated for their participation in the Working Group shall
21	be entitled to per diem compensation and reimbursement of expenses as

1	permitted under 32 V.S.A. § 1010 for not more than 10 meetings. These
2	payments shall be made from monies appropriated to the Department of
3	Disabilities, Aging, and Independent Living.
4	* * * Effective Dates * * *
5	Sec. 17. EFFECTIVE DATES
6	This section and Sec. 13 (rulemaking; conforming amendments), Sec. 14
7	(presentation; forensic facility programming), and Sec. 16 (Working Group on
8	Policies Pertaining to Individuals with Developmental or Intellectual Disability
9	Who are Criminal-Justice Involved) shall take effect on passage. All
10	remaining sections shall take effect on July 1, 2024.
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18	(Committee vote:)
19	
20	Representative
21	FOR THE COMMITTEE

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