Outpatient Forensic Mental Health Services

Requirement: Chapter 916, F.S.

Children & Families Operating Procedures (CFOP) 155-18 and 155-38

Frequency: Monthly Reports

Due Date: 8th of each month

This guidance specifies Network Service Provider responsibilities related to Managing Entity tracking and reporting of individuals served in jail and Outpatient Forensic Mental Health Service settings. Refer to CFOP 155-18 and CFOP 155-38 for detailed implementation guidance.

For the purposes of this guidance, "forensics" is defined as those consumers with current involvement in the criminal justice system; committed under Chapter 916, F.S.; deemed Incompetent to Proceed and/or Not Guilty by Reason of Insanity. The Forensic Mental Health Services Model is also included herein by reference for this guidance.

This guidance also identifies the role of the Forensic Specialist, defined as a staff member employed by a Network Service Provider under contract with the Managing Entity. The Forensic Specialist has oversight responsibilities for the forensic services adults receive from their contracted agency and/or in the covered circuit/counties, as applicable.

Applicability:

These responsibilities apply to:

- Adults or juveniles adjudicated as adults
- Individuals charged with or at risk of being charged with a felony offense under Chapter 916, F.S.
- Individuals referred to a Network Service Provider for:
    - Conditional release
    - Pre-commitment diversion
    - Post-commitment diversion

Individuals with non-violent felony offenses should be prioritized for diversion. The Network Service Provider must ensure that individuals with non-violent felony offenses residing in a State Mental Health Treatment Facility (SMHTF) are prioritized for conditional release planning and discharge. A non-violent offense is a crime that does not involve violence against a person and is not listed under violent or capital offenses in s. 916.145, F.S. Pre-commitment diversion applies to individuals:

* Charged with felony

* Booked into jail or detention

* Identified with mental illness and at risk for SMHTF commitment

Services Includes:

* Community or jail-based services

This may also include conditional release orders.

- Post-commitment diversion applies to individuals

- Found Incompetent to Proceed (ITP) or Not Guilty by Reason of Insanity (NGI)

Process:

- Court vacates commitment order
- Individual is conditionally released
- Services provided in a less restrictive setting.

Managing Entity Responsibilities:

The Managing Entity will subcontract with one or more Network Service Providers to ensure:

A. All pre-commitment diversion:

- All diversion options are exhausted before SMHTF commitment

B. All post-commitment diversion:

- All diversion options are exhausted per CFOP 155-38

C. Conditional Release Compliance:

- Adherence to CFOP 155-18 guidelines

Forensic Coordinator Responsibilities

The Forensic Coordinator (or contracted provider) is responsible for:

- Oversight of forensic services
- Tracking and reporting required data
- Required Data Tracking
- Release plan status for all forensic individuals
- Client-level data for legislative requests
- Quarterly reporting by circuit and county

1. Forensic Diversion
    - **a.** Total individuals diverted
    - **b.** Individuals in pre-commitment diversion
    - **c.** Non-violent pre-commitment diversions
    - **d.** Individuals in post-commitment diversion
    - **e.** Non-violent post-commitment diversions
2. Conditional Release
    - **a.** NGI individuals placed on conditional release
    - **b.** ITP individuals placed on conditional release
    - **c.** Discharges from SMHTF to conditional release

    Discharge Reasons

    * Restored to competency

* Determined non-restorable
* Jurisdiction terminated (NGI)
* Committed to State Hospital

Placement Types

* Independent living
* Assisted Living Facility (ALF) / Adult Family Care Home (AFCH)
* Residential Treatment Facility (RTF)
* Other living arrangements

3. MH Community Forensic Beds
    a. Community facilities identified as having designated community forensic beds funded by the Department of Children and Families (DCF) through the Managing Entities (ME) and their contracted Network Service Providers (NSP).
    b. The following summary outputs are to be provided only for those individual community facilities and the beds funded with DCF dollars through the ME as MH Community Forensic Beds via OCA MH072.
        1. Official Capacity
        2. Operating Capacity
        3. Number of admissions
        4. Number of unsuccessful and successful discharges
        5. Waitlist numbers

Each Forensic Coordinator shall submit all requested information regarding diversion and conditional release to the Managing Entity by the 8th of each month.

The Managing Entity shall submit the required data specified in *CFOP 155-18 Appendix A* to the Department's SMHTF Community Forensic Liaison via email no later than the 15th of each month.

Forensic Specialist Specific Tracking and Duties:

1. Tracking Conditional Release: The Network Service Provider's designated Forensic Specialist is required to submit a Conditional Release Report to the Managing Entity's Forensic Coordinator (known as the Clinical Care Support Specialist – Adult Special Populations) by the eighth (8th) calendar day of each month. The required monthly reporting, as outlined in Appendix A to CFOP 155-18, includes:
    a. The overall number of persons on conditional release, fiscal year to date, AND broken down as follows:
        i. Number of Incompetent to Proceed;
        ii. Number of Not Guilty by Reason of Insanity;
        iii. Number by type of placement or program (home, ALF, Residential Level 1, etc.); and
        iv. Number by circuit and county of consumer's residence.

b. Number of those on Conditional Release who were restored to competency that month; and
c. Number of those on Conditional Release who were determined non-restorable that month.

NOTE: The Number of Incompetent to Proceed, and number of Not Guilty by Reason of Insanity should equal the number of persons on conditional release, as well the number by type of placement or program should equal the number of persons on conditional release.
Incorrect submissions will not be accepted by the Managing Entity's Forensic Coordinator (known as the Clinical Care Support Specialist – Adult Special Populations)

The Managing Entity will notify the Network Service Provider of any incorrect submissions.
The Network Service Provider has one business day to correct and resubmit the document for approval, to the Managing Entity via encrypted email to the Clinical Department and Network Manager.

2. The Network Service Provider's Forensic Specialist shall track the release plan status of all forensic individuals referred by a forensic or civil treatment facility(s).

3. The Network Service Provider's Forensic Specialist shall track the following diversions:
   a. Number of individuals with severe and persistent mental illnesses who are diverted from the forensic system prior to commitment;
   b. Number of individuals with severe and persistent mental illness who are diverted from the forensic system after commitment, but prior to admission; and
   c. Number of individuals served.

4. The Network Service Provider's Forensic Specialist shall track all client level data to ensure that any legislative requests for information can be responded to in a reasonable amount of time.

5. **DOC Aftercare Referral Duties:** For those consumers that are incarcerated at a Florida Department of Correction (DOC) facility, an identified release date or end of sentence (EOS), and have been referred for aftercare services:
   a. The Network Service Provider's Forensic Specialist, or other provider staff designee, shall log in and review the DCF SAMH Department of Correction (DOC) Aftercare and Referral site daily, to identify pending DOC aftercare referrals for appointment requests, and complete direct data entry of scheduled aftercare appointment information.
   b. The Network Service Provider is responsible for ensuring that follow up mental health service appointments are scheduled for all consumers referred, prior to their discharge from a Florida Department of Corrections (DOC) facility.
   c. These appointments should be scheduled so that the consumer can be seen by the Network Service Provider within 30 days of their release date or end of sentence (EOS).
   d. The Managing Entity will monitor and provide oversight of the Network Service Provider's compliance and timeliness with scheduling DOC Aftercare Referral appointments.

6. **Competency Restoration Duties:** The Network Service Provider shall provide outpatient competency restoration for adults who have been deemed incompetent to proceed under the

provisions of Florida Statute. Competency training shall be provided to applicable consumers, in the six competency areas:

a. Appreciation of charges and allegations
b. Appreciation of the range and nature of possible penalties
c. Understanding of the adversarial nature of the legal process
d. Capacity to disclose pertinent factors relevant to the case
e. Ability to demonstrate appropriate courtroom behavior
f. Capacity to testify relevantly

7. Reporting Requirements:

a. Forensic Conditional Release Report – Network Service Providers must submit the **Template 22 – Forensic Mental Health Service Report f/k/a Conditional Release Report** found at following link using the applicable fiscal year: https://www.myflfamilies.com/services/samh/providers/managing-entities into LSF Health Systems data system by the 8th of each month following service delivery.

b. Forensic Diversion Data Report – Network Service Providers must submit the **Template 23 – Forensic Diversion Report** found at following link using the applicable fiscal year: https://www.myflfamilies.com/services/samh/providers/managing-entities into LSF Health Systems data system by the 8th of each month following service delivery.

c. Community Forensic Beds - Network Service Providers (DaySpring Village and LifeStream Behavioral Center only) must submit the **Template 33 – Community Forensic Beds** found at following link using the applicable fiscal year: https://www.myflfamilies.com/services/samh/providers/managing-entities into LSF Health Systems data system by the 8th of each month following service delivery.

d. Ad Hoc and additional reporting may be required as determined necessary by LSF Health Systems or the Department of Children and Families.

8. The Network Service Provider shall follow F.A.C. 65E-14.021(4)(k)4.b.(V) when billing for incidental expenses.

The Outpatient Forensic Mental Health Services will be administered according to DCF Guidance 6, which can be found at following link using the applicable fiscal year: https://www.myflfamilies.com/services/samh/providers/managing-entities