CHAPTER 359

SENATE BILL 1444

AN ACT

AMENDING SECTION 41-3803, ARIZONA REVISED STATUTES; AMENDING LAWS 2021, CHAPTER 402, SECTION 3; RELATING TO THE ARIZONA STATE HOSPITAL.

(TEXT OF BILL BEGINS ON NEXT PAGE)
Be it enacted by the Legislature of the State of Arizona:

Section 1. Section 41-3803, Arizona Revised Statutes, is amended to read:

41-3803. Independent oversight committee on the mentally ill; membership; community forums; meetings; training plan; Arizona state hospital

A. The independent oversight committee on the mentally ill is established in the department of administration to promote the rights of persons who receive behavioral health services pursuant to:

1. Section 13-3992 or 13-3994.
2. Title 36, chapters 5 and 34.

B. Each region of this state covered by a regional behavioral health authority shall have at least one independent oversight committee with the authority and responsibilities as prescribed by the department of administration pursuant to rules adopted by the department relating to behavioral health services.

C. The director of the department may establish additional committees to serve persons who receive behavioral health services or to oversee the activities of any service provider.

D. Each independent oversight committee shall consist of at least seven and not more than fifteen members appointed by the director of the department with expertise in at least one of the following areas:

1. Psychology.
2. Law.
4. Education.
5. Special education.
6. Social work.
7. Mental health.
8. Housing for the mentally ill.

E. Each independent oversight committee, if appropriate, shall include at least two parents of children who receive behavioral health services pursuant to title 36, chapter 34.

F. Each independent oversight committee shall include at least one member who is a current or former client of the behavioral health system.

G. Current or former providers or employees of providers that have contracted with a regional behavioral health authority may serve on an independent oversight committee but may not hold more than two positions on the committee.

H. Each independent oversight committee may hold one or more community forums annually to receive comments regarding the experiences of individuals living with serious mental illness, and their family members and caregivers, across the care continuum.
I. The department shall ensure that each regional behavioral health authority and its providers develop and implement a human rights training plan to ensure that providers are trained regarding clients' human rights and the duties of the independent oversight committees.

J. The independent oversight committee at the Arizona state hospital shall have oversight of patients who have been determined to have a serious mental illness and who are hospitalized and receiving behavioral health services at the civil and forensic hospital pursuant to subsection A of this section. THE ARIZONA STATE HOSPITAL'S ADMINISTRATION AND EMPLOYEES MAY NOT RETALIATE AGAINST A PATIENT BECAUSE THE PATIENT OR THE PATIENT'S FAMILY PARTICIPATES IN THE INDEPENDENT OVERSIGHT COMMITTEE MEETINGS. A PATIENT OR PATIENT'S FAMILY THAT ALLEGES RETALIATION MUST PROVIDE TO THE INDEPENDENT OVERSIGHT COMMITTEE IN WRITING A DETAILED DESCRIPTION OF THE RETALIATION AND HOW THE RETALIATION IS CONNECTED TO THE PATIENT'S OR FAMILY'S PARTICIPATION IN THE INDEPENDENT OVERSIGHT COMMITTEE MEETINGS. THIS SUBSECTION DOES NOT PRECLUDE THE ARIZONA STATE HOSPITAL'S ADMINISTRATION FROM TAKING ACTION AGAINST A PATIENT WHO VIOLATES HOSPITAL POLICIES OR PROCEDURES. The Arizona state hospital shall provide to the committee, subject to state and federal law, information regarding the following:

1. Seclusion of and the use of restraints on patients.
2. Incident accident reports.
3. Allegations of illegal, dangerous or inhumane treatment of patients.
4. Provisions of services to patients in need of special assistance.
5. Allegations of neglect and abuse.
6. Allegations of denial of rights afforded to patients with serious mental illness except where IF a right may be restricted for the safety of a patient, the state hospital or the public.

K. THE ARIZONA STATE HOSPITAL SUPERINTENDENT AND CHIEF MEDICAL OFFICER, OR THEIR DESIGNEES, SHALL ATTEND AND PARTICIPATE IN SCHEDULED MEETINGS OF THE INDEPENDENT OVERSIGHT COMMITTEE AT THE ARIZONA STATE HOSPITAL, EXCEPT FOR THE PUBLIC COMMENT PERIOD. THE SUPERINTENDENT AND THE CHIEF MEDICAL OFFICER, OR THEIR DESIGNEES, SHALL GIVE A REPORT TO AND RESPOND TO QUESTIONS FROM THE INDEPENDENT OVERSIGHT COMMITTEE MEMBERS. QUESTIONS FROM THE INDEPENDENT OVERSIGHT COMMITTEE MEMBERS TO THE SUPERINTENDENT AND THE CHIEF MEDICAL OFFICER, OR THEIR DESIGNEES, ARE LIMITED TO SUBJECTS SPECIFIED IN SUBSECTION J OF THIS SECTION. THE SUPERINTENDENT SHALL ENSURE THAT THE ARIZONA STATE HOSPITAL ADMINISTRATION:

1. FULLY COOPERATES WITH THE INDEPENDENT OVERSIGHT COMMITTEE IN ALL ASPECTS OF ITS WORK, AS OUTLINED IN SUBSECTION J OF THIS SECTION.
2. FACILITATES AND SUPPORTS THE INDEPENDENT OVERSIGHT COMMITTEE'S
ACTIVITIES RELATED TO THE ARIZONA STATE HOSPITAL AND PURSUANT TO THE
DEPARTMENT OF ADMINISTRATION'S RULES.
3. RESPONDS TO THE INDEPENDENT OVERSIGHT COMMITTEE WITH INFORMATION
THAT IS RESPONSIVE TO INQUIRIES MADE PURSUANT TO THIS SUBSECTION OR
RESPONS IN WRITING AS TO WHY A REQUEST WAS DENIED.
K. L. Each committee shall be organized pursuant to this section
and the requirements of section 41-3804.
Sec. 2. Laws 2021, chapter 402, section 3 is amended to read:
Sec. 3. Joint legislative psychiatric hospital review
council; members; duties; reports; delayed repeal
A. The joint legislative psychiatric hospital review council is
established consisting of the following members:
1. Two members of the house of representatives who are not members
of the same political party and who are appointed by the speaker of the
house of representatives. The speaker of the house of representatives
shall designate one of these members to serve as cochairperson of the
committee.
2. Two members of the senate who are not members of the same
political party and who are appointed by the president of the senate. The
president of the senate shall designate one of these members to serve as
cochairperson of the committee.
3. The director of the Arizona health care cost containment system
or the director's designee.
4. The director of the department of health services or the
director's designee.
5. THE DIRECTOR OF THE STATE DEPARTMENT OF CORRECTIONS OR THE
DIRECTOR'S DESIGNEE.
6. A LAW ENFORCEMENT OFFICER WHO IS APPOINTED BY THE PRESIDENT OF
THE SENATE.
7. A PERSON WHO HAS EXPERIENCE AS A CHIEF EXECUTIVE OFFICER OR
CHIEF OPERATING OFFICER OF A HOSPITAL AND WHO IS APPOINTED BY THE SPEAKER
OF THE HOUSE OF REPRESENTATIVES.

8. A judge of a superior court in which cases involving persons
with serious mental illness are routinely adjudicated who is appointed by
the speaker of the house of representatives.
9. A person who provides legal representation to and advocates
on behalf of persons with serious mental illness who is appointed by the
president of the senate.
10. A family member of a person with serious mental illness who
is appointed by the speaker of the house of representatives.
11. A psychiatrist who specializes in treating persons with
serious mental illness and who is appointed by the president of the
senate.
B. Review council members are not eligible to receive compensation but are eligible for reimbursement of expenses under title 38, chapter 4, article 2, Arizona Revised Statutes.

C. The review council shall review, analyze and make recommendations regarding at least the following:

1. Psychiatric hospital capacity in this state, including the bed capacity at the Arizona state hospital and other public facilities.

2. The role of private facilities in addressing psychiatric treatment needs.

3. Innovative programs to ensure public safety while providing clinically appropriate treatment in the most integrated setting.

4. Legal barriers.

5. Current waiting lists.

6. Barriers to accessing appropriate inpatient care.

7. Licensing barriers.

8. Any other issues related to inpatient psychiatric treatment.

9. THE FEASIBILITY OF TRANSFERRING THE ARIZONA STATE HOSPITAL TO THE ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM OR AN ALTERNATIVE OVERSIGHT ENTITY.

D. The cochairpersons of the review council shall invite subject matter experts from the fields of law, behavioral health and behavioral health system development to advise the review council.

E. On or before December 31, 2022 and December 31, 2023, the review council shall submit a report of its findings and recommendations to the speaker of the house of representatives, the president of the senate and the governor and shall provide a copy of the reports to the secretary of state.

F. This section is repealed from and after August 31, 2026.

Sec. 3. Clinical improvement and human resources development plan; requirements; implementation; delayed repeal

A. On or before September 1, 2023, the Arizona state hospital administration shall develop and provide to the governor, the president of the senate, the speaker of the house of representatives and the committee chairpersons of the health and human services committees of the senate and the house of representatives an evidence-based and innovative clinical improvement and human resources development plan and proposed budget to fully implement the plan not later than January 1, 2025. This plan shall be developed in collaboration with the independent oversight committees on mental health and the Arizona state hospital, public and private community resources, community providers and guardians, families and representatives of patients at the Arizona state hospital. The plan shall do all of the following:

1. Identify the necessary enhancements to the services, facilities and staff at the Arizona state hospital to provide statutorily required treatment and services to patients in the forensic and civil hospitals and
the Arizona community protection and treatment center, including treatment
and services for secondary diagnoses, such as substance use disorder,
autism spectrum disorder, personality disorders and developmental
disabilities.

2. Provide options and recommendations to reduce the number of
patients statewide who are seeking admission to the Arizona state hospital
and to reduce the waiting time to be admitted to the Arizona state
hospital.

3. Identify optimal levels of acuity-based staffing at the Arizona
state hospital with full-time employees and minimal use of contract staff
and ways to increase the number of forensically trained clinical staff at
both the management and staff levels.

4. Include a pandemic response and preparedness plan that does the
following:
   (a) Creates a set of clinical metrics to significantly mitigate the
       effects of the COVID-19 pandemic and staffing shortages on the Arizona
       state hospital's implementation of each patient's individual treatment and
       discharge plan, including the patient's inability to achieve what is
       necessary to advance to conditional release.
   (b) Ensures continuous operation of the Arizona state hospital with
       minimal or no cessation or disruption of treatment services in the event
       of a new or recurrent epidemic or pandemic event.

5. In collaboration with community-based treatment facilities,
identify levels of service that assist in transitioning patients out of
the Arizona state hospital into clinically appropriate settings, which may
include secure or less restrictive settings than the Arizona state
hospital, and ways to increase the number of patients who successfully
transition into the community with no readmission to the Arizona state
hospital or other inpatient psychiatric facility.

6. Identify an independent third-party that resides outside of the
Arizona state hospital to investigate incident reports and to whom
patients, families and advocates may file complaints.

B. This section is repealed from and after December 31, 2025.

APPROVED BY THE GOVERNOR JULY 6, 2022.