# <u>Agenda – May 15, 2024</u> <u>State Attorney Addiction Recovery Task Force</u> <u>(SAART)</u>

- 1. Introduction
- 2. Update Overdose statistics: PBC ME, PBCFR: Al Johnson
- 3. FARR Update: Micah Robbins/Heidi Matheny
- 4. Oxford House Update: Michael McKeough
- 5. Kennedy Forum/ Alignment For Progress Project: Nikki Soda
- 6. Status, Statewide Recovery Residence Study: Dan Lauber
- 7. Discussion: Creation of Statewide Group Home Zoning Legislation
  - a. <u>Chapter 419</u>
- 8. Private Insurance Reimbursement Below Medicaid Rates: Nikki Soda
- 9. SHTF Comments.
- 10. Public comments.
- 11.<u>Closing remarks.</u>



# Palm Beach County Fire Rescue Primary or Secondary Impression = Opioid

January	# of Calls:	162	# of Patients:	165
February	# of Calls:	135	# of Patients:	138
March	# of Calls:	329	# of Patients:	343
April	# of Calls:	238	# of Patients:	251

GRAND TOTALS	# of Calls:	864	# of Patients:	897
GRAND TOTALS	# of Calls:	004	# of Patients:	001



# Palm Beach County Fire Rescue Primary or Secondary Impression = Opioid

January	# of Calls:	144	# of Patients:	148
February	# of Calls:	128	# of Patients:	130
March	# of Calls:	116	# of Patients:	120
April	# of Calls:	129	# of Patients:	133

GRAND TOTALS	# of Calls:	517	# of Patients:	531



# Palm Beach County Fire Rescue Primary or Secondary Impression = Opioid

January	# of Calls:	100	# of Patients:	102
February	# of Calls:	105	# of Patients:	107
March	# of Calls:	97	# of Patients:	100
April	# of Calls:	103	# of Patients:	104

GRAND TOTALS	# of Calls:	405	# of Patients:	413



# Palm Beach County Fire Rescue Primary or Secondary Impression = Opioid

2020

January	# of Calls:	183	# of Patients:	187
February	# of Calls:	147	# of Patients:	149
March	# of Calls:	147	# of Patients:	148
April	# of Calls:	143	# of Patients:	148

**GRAND TOTALS** 

# of Calls: 620

# of Patients: 632

# **4 MONTH COMPARISON**



# Palm Beach County Fire Rescue Primary or Secondary Impression = Opioid

**2021** 

January	# of Calls:	127	# of Patients:	129
February	# of Calls:	119	# of Patients:	121
March	# of Calls:	151	# of Patients:	156
April	# of Calls:	143	# of Patients:	144

**GRAND TOTALS** 

# of Calls: **540** 

# of Patients: 550



# Palm Beach County Fire Rescue Primary or Secondary Impression = Opioid

GRAND TOTALS	# of Calls:	516	# of Patients:	527	
April	# of Calls:	102	# of Patients:	103	
March	# of Calls:	126	# of Patients:	130	
February	# of Calls:	148	# of Patients:	150	
January	# of Calls:	140	# of Patients:	144	



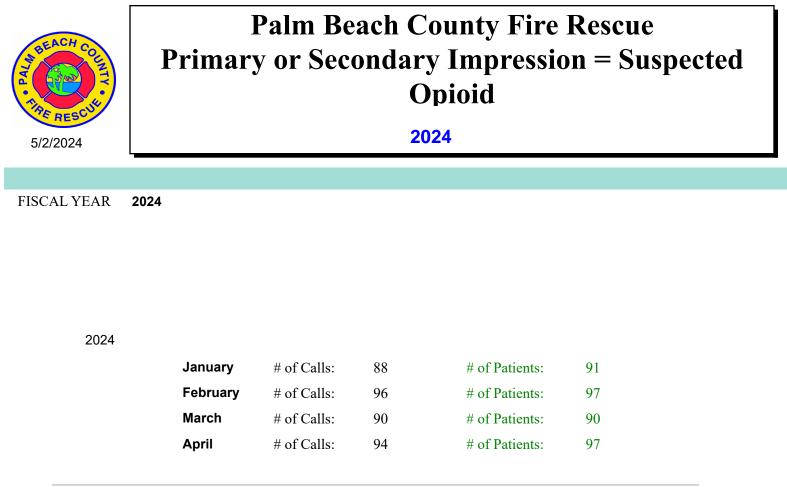
2023

# Palm Beach County Fire Rescue Primary or Secondary Impression = Opioid

**2023** 

January	# of Calls:	97	# of Patients:	98
February	# of Calls:	81	# of Patients:	83
March	# of Calls:	115	# of Patients:	116
April	# of Calls:	112	# of Patients:	114

GRAND TOTALS # of Calls: 405 # of Patients: 411



**GRAND TOTALS** 

# of Calls: 368

# of Patients

# 2022/2023 PBCME Opiate OD Deaths

# > PBC Medical Examiner -2022 - no pending cases

- > Total drug overdose cases 553
- > Total opioid OD deaths 431 (78% of total OD cases)
- > Total Fentanyl & Fentanyl analog cause or presence 391 (93%)\*\*
- Decline in Opioid OD deaths 2021/2022 (17%)

# > PBC Medical Examiner -2023 - no pending cases

- > Total drug overdose cases 531
- Total opioid OD deaths 406 (76% of total OD cases)
- Total fentanyl & fentanyl analog cause or presence 374 (92%)
- > Decline in Opioid OD deaths 2022/2023 (6%)
- \* Xylazine: "tranq" non-opioid animal tranquilizer 2022- 40/ 2023- 32
- \*\* New Fentanyl analogues:
  - N-Pyrrolidino Etonitazene (NPE) 20x more potent than Fentanyl 2022-20/2023-0
  - Fleurofentanyl similar potency to Fentanyl 2022-100/2023-65

# PBCFR TRANSPORTS 2017-2024 January 1 – April 30

YEAR	#CALLS	# PATIENTS	%CHANGE/CALLS
2017	864	897	
2018	517	531	< 40%
2019	405	413	< 22 %
2020	620	632	> 35%
2021	540	550	< 13%
2022	516	527	< 4%
2023	405	411	< 22%
2024	368	375	< 9
	Net chang	e 2017-2024: <b>57</b> 9	% reduction in transpo

rts

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1	
2	An act relating to substance abuse treatment; amending
3	s. 397.311, F.S.; providing the levels of care at
4	certified recovery residences and their respective
5	levels of care for residents; defining the term
6	"community housing"; amending s. 397.407, F.S.;
7	authorizing, rather than requiring, the Department of
8	Children and Families to issue a license for certain
9	service components operated by a service provider;
10	removing the timeframe in which a licensed service
11	provider must apply for additional services; requiring
12	the service provider to obtain approval before
13	relocating to a different service site; removing a
14	requirement that a separate license is required for
15	each service component maintained by a service
16	provider; amending s. 397.487, F.S.; extending the
17	deadline for certified recovery residences to retain a
18	replacement for a certified recovery residence
19	administrator who has been removed from his or her
20	position; requiring certified recovery residences to
21	remove certain individuals from their positions under
22	certain circumstances; requiring the certified
23	recovery residence to retain a certified recovery
24	residence administrator if the previous certified
25	recovery residence administrator has been removed for

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26	any reason; prohibiting certified recovery residences,
27	on or after a specified date, from denying an
28	individual access to housing under specified
29	circumstances; prohibiting local ordinances or
30	regulations from further regulating after a specified
31	date the duration or frequency of a resident's stay in
32	a certified recovery residence located within a
33	certain zoning districts; providing applicability;
34	amending s. 397.4871, F.S.; authorizing certain Level
35	IV certified recovery residences owned or controlled
36	by certain licensed service providers and managed by a
37	certified recovery residence administrator to manage a
38	specified greater number of residents under certain
39	circumstances; prohibiting a certified recovery
40	residence administrator who has been removed by a
41	certified recovery residence from taking on certain
42	other management positions without approval from a
43	credentialing entity; amending ss. 119.071, 381.0038,
44	394.4573, 394.9085, 397.4012, 397.407, 397.410,
45	397.416, and 893.13, F.S.; conforming provisions to
46	changes made by the act; providing an effective date.
47	
48	Be It Enacted by the Legislature of the State of Florida:
49	
50	Section 1. Subsections (9) through (50) of section
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51	397.311, Florida Statutes, are renumbered as subsections (10)
52	through (51), respectively, subsection (5) and present
53	subsection (43) are amended, and a new subsection (9) is added
54	to that section, to read:
55	397.311 Definitions.—As used in this chapter, except part
56	VIII, the term:
57	(5) "Certified recovery residence" means a recovery
58	residence that holds a valid certificate of compliance and is
59	actively managed by a certified recovery residence
60	administrator.
61	(a) A Level I certified recovery residence houses
62	individuals in recovery who have completed treatment, with a
63	minimum of 9 months of sobriety. A Level I certified recovery
64	residence is democratically run by the members who reside in the
65	home.
66	(b) A Level II certified recovery residence encompasses
67	the traditional perspectives of sober living homes. There is
68	oversight from a house manager who has experience with living in
69	recovery. Residents are expected to follow rules outlined in a
70	resident handbook provided by the certified recovery residence
71	administrator. Residents must pay dues, if applicable, and work
72	toward achieving realistic and defined milestones within a
73	chosen recovery path.
74	(c) A Level III certified recovery residence offers higher
75	supervision by staff with formal training to ensure resident
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76	accountability. Such residences are staffed 24 hours a day, 7
77	days a week, and offer residents peer-support services, which
78	may include, but are not limited to, life skill mentoring,
79	recovery planning, and meal preparation. Clinical services may
80	not be performed at the residence. Such residences are most
81	appropriate for persons who require a more structured
82	environment during early recovery from addiction.
83	(d) A Level IV certified recovery residence is a residence
84	offered, referred to, or provided by, a licensed service
85	provider to its patients who are required to reside at the
86	residence while receiving intensive outpatient and higher levels
87	of outpatient care. Such residences are staffed 24 hours a day
88	and combine outpatient licensable services with recovery
89	residential living. Residents are required to follow a treatment
90	plan and attend group and individual sessions, in addition to
91	developing a recovery plan within the social model of living in
92	a sober lifestyle. No clinical services are provided at the
93	residence and all licensable services are provided off-site.
94	(9) "Community housing" means a certified recovery
95	residence offered, referred to, or provided by a licensed
96	service provider that provides housing to its patients who are
97	required to reside at the residence while receiving intensive
98	outpatient and higher levels of outpatient care. A certified
99	recovery residence used by a licensed service provider that
100	meets the definition of community housing shall be classified as
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101 a Level IV level of support, as described in subsection (5). 102 (44) (43) "Service component" or "component" means a 103 discrete operational entity within a service provider which is subject to licensing as defined by rule. Service components 104 105 include prevention, intervention, and clinical treatment described in subsection (27)  $\frac{(26)}{(26)}$ . 106 107 Section 2. Subsection (11) of section 397.407, Florida Statutes, is renumbered as subsection (10) and subsection (6) 108 109 and present subsection (10) of that section are amended to read: 397.407 Licensure process; fees.-110 111 (6) The department may issue probationary, regular, and interim licenses. The department may shall issue one license for 112 113 all each service components component that is operated by a 114 service provider and defined pursuant to s. 397.311(26). The 115 license is valid only for the specific service components listed 116 for each specific location identified on the license. The 117 licensed service provider shall apply for a new license at least 118 60 days before the addition of any service components and obtain 119 approval before initiating additional services. The licensed service provider must notify the department and provide any 120 required documentation at least <del>or</del> 30 days before the relocation 121 of any of its service sites. Provision of service components or 122 123 delivery of services at a location not identified on the license 124 may be considered an unlicensed operation that authorizes the 125 department to seek an injunction against operation as provided

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126 in s. 397.401, in addition to other sanctions authorized by s. 127 397.415. Probationary and regular licenses may be issued only 128 after all required information has been submitted. A license may not be transferred. As used in this subsection, the term 129 130 "transfer" includes, but is not limited to, the transfer of a majority of the ownership interest in the licensed entity or 131 132 transfer of responsibilities under the license to another entity 133 by contractual arrangement. 134 (10) A separate license is required for each service 135 component maintained by the service provider. 136 Section 3. Subsection (8) of section 397.487, Florida 137 Statutes, is amended and subsections (13) and (14) are added to that section, to read: 138 139 397.487 Voluntary certification of recovery residences.-140 Onsite followup monitoring of a certified recovery (8) 141 residence may be conducted by the credentialing entity to 142 determine continuing compliance with certification requirements. 143 The credentialing entity shall inspect each certified recovery residence at least annually to ensure compliance. 144 145 A credentialing entity may suspend or revoke a (a) 146 certification if the recovery residence is not in compliance with any provision of this section or has failed to remedy any 147 148 deficiency identified by the credentialing entity within the 149 time period specified. 150 (b) A certified recovery residence must notify the

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151 credentialing entity within 3 business days after the removal of 152 the recovery residence's certified recovery residence 153 administrator due to termination, resignation, or any other 154 reason. The certified recovery residence has 90 30 days to 155 retain a certified recovery residence administrator. The credentialing entity must shall revoke the certificate of 156 157 compliance of any certified recovery residence that fails to 158 comply with this paragraph. 159 (c) If a certified recovery residence's administrator has been removed due to termination, resignation, or any other 160 161 reason and had been previously approved to actively manage more than 50 residents pursuant to s. 397.4871(8)(b), the certified 162 recovery residence has 90 days to retain another certified 163 164 recovery residence administrator pursuant to s. 397.4871. The 165 credentialing entity must revoke the certificate of compliance 166 of any certified recovery residence that fails to comply with 167 this paragraph. 168 (d) (c) If any owner, director, or chief financial officer of a certified recovery residence is arrested and awaiting 169 170 disposition for or found guilty of, or enters a plea of guilty 171 or nolo contendere to, regardless of whether adjudication is 172 withheld, any offense listed in s. 435.04(2) while acting in 173 that capacity, the certified recovery residence must shall 174 immediately remove the person from that position and shall notify the credentialing entity within 3 business days after 175

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176 such removal. The credentialing entity <u>must</u> shall revoke the 177 certificate of compliance of a <u>certified</u> recovery residence that 178 fails to meet these requirements.

179 <u>(e) (d)</u> A credentialing entity shall revoke a <u>certified</u> 180 recovery residence's certificate of compliance if the <u>certified</u> 181 recovery residence provides false or misleading information to 182 the credentialing entity at any time.

183 (f) (e) Any decision by a department-recognized 184 credentialing entity to deny, revoke, or suspend a 185 certification, or otherwise impose sanctions on a certified recovery residence, is reviewable by the department. Upon 186 receiving an adverse determination, the certified recovery 187 residence may request an administrative hearing pursuant to ss. 188 189 120.569 and 120.57(1) within 30 days after completing any 190 appeals process offered by the credentialing entity or the 191 department, as applicable.

192 (13) Beginning January 1, 2025, a certified recovery 193 residence may not deny an individual access to housing solely on 194 the basis that he or she has been prescribed federally approved 195 medication that assists with treatment for substance use disorders by a licensed physician, a physician's assistant, or 196 197 an advanced practice registered nurse registered under s. 198 464.0123. 199 (14) A local ordinance or regulation may not further regulate the duration or frequency of a resident's stay in a 200

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#### 201 certified recovery residence located within a multifamily zoning 202 district after June 30, 2024. This provision shall expire July 203 1, 2026. 204 Section 4. Paragraphs (b) and (c) of subsection (6) of 205 section 397.4871, Florida Statutes, are amended and paragraph 206 (c) is added to subsection (8) of that section, to read: 207 397.4871 Recovery residence administrator certification.-208 The credentialing entity shall issue a certificate of (6) 209 compliance upon approval of a person's application. The 210 certification shall automatically terminate 1 year after 211 issuance if not renewed. 212 If a certified recovery residence administrator of a (b) 213 recovery residence is arrested and awaiting disposition for or 214 found guilty of, or enters a plea of guilty or nolo contendere 215 to, regardless of whether adjudication is withheld, any offense 216 listed in s. 435.04(2) while acting in that capacity, the 217 certified recovery residence must shall immediately remove the 218 person from that position and shall notify the credentialing 219 entity within 3 business days after such removal. The certified 220 recovery residence shall have 30 days to retain a certified 221 recovery residence administrator within 90 days after such removal. The credentialing entity must shall revoke the 222 223 certificate of compliance of any recovery residence that fails 224 to meet these requirements. 225 (c) A credentialing entity must shall revoke a certified

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226	recovery residence administrator's certificate of compliance if
227	the recovery residence administrator provides false or
228	misleading information to the credentialing entity at any time.
229	(8)
230	(c) Notwithstanding paragraph (b), a Level IV certified
231	recovery residence operating as community housing as defined in
232	s. 397.311(9), which residence is actively managed by a
233	certified recovery residence administrator approved for 100
234	residents under this section and is wholly owned or controlled
235	by a licensed service provider, may actively manage up to 150
236	residents so long as the licensed service provider maintains a
237	service provider personnel-to-patient ratio of 1 to 8 and
238	maintains onsite supervision at the residence 24 hours a day, $7$
239	days a week, with a personnel-to-resident ratio of 1 to 10. A
240	certified recovery residence administrator who has been removed
241	by a certified recovery residence due to termination,
242	resignation, or any other reason may not continue to actively
243	manage more than 50 residents for another service provider or
244	certified recovery residence without being approved by the
245	credentialing entity.
246	Section 5. Paragraph (d) of subsection (4) of section
247	119.071, Florida Statutes, is amended to read:
248	119.071 General exemptions from inspection or copying of
249	public records
250	(4) AGENCY PERSONNEL INFORMATION
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251 (d)1. For purposes of this paragraph, the term: 252 "Home addresses" means the dwelling location at which a. 253 an individual resides and includes the physical address, mailing 254 address, street address, parcel identification number, plot 255 identification number, legal property description, neighborhood 256 name and lot number, GPS coordinates, and any other descriptive 257 property information that may reveal the home address. 258 "Judicial assistant" means a court employee assigned to b. 259 the following class codes: 8140, 8150, 8310, and 8320. 260 "Telephone numbers" includes home telephone numbers, с. 261 personal cellular telephone numbers, personal pager telephone 262 numbers, and telephone numbers associated with personal 263 communications devices. 264 2.a. The home addresses, telephone numbers, dates of 265 birth, and photographs of active or former sworn law enforcement 266 personnel or of active or former civilian personnel employed by 267 a law enforcement agency, including correctional and 268 correctional probation officers, personnel of the Department of 269 Children and Families whose duties include the investigation of 270 abuse, neglect, exploitation, fraud, theft, or other criminal 271 activities, personnel of the Department of Health whose duties 272 are to support the investigation of child abuse or neglect, and personnel of the Department of Revenue or local governments 273 274 whose responsibilities include revenue collection and enforcement or child support enforcement; the names, home 275

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addresses, telephone numbers, photographs, dates of birth, and places of employment of the spouses and children of such personnel; and the names and locations of schools and day care facilities attended by the children of such personnel are exempt from s. 119.07(1) and s. 24(a), Art. I of the State Constitution.

282 b. The home addresses, telephone numbers, dates of birth, 283 and photographs of current or former nonsworn investigative 284 personnel of the Department of Financial Services whose duties 285 include the investigation of fraud, theft, workers' compensation 286 coverage requirements and compliance, other related criminal activities, or state regulatory requirement violations; the 287 288 names, home addresses, telephone numbers, dates of birth, and 289 places of employment of the spouses and children of such 290 personnel; and the names and locations of schools and day care 291 facilities attended by the children of such personnel are exempt 292 from s. 119.07(1) and s. 24(a), Art. I of the State 293 Constitution.

c. The home addresses, telephone numbers, dates of birth, and photographs of current or former nonsworn investigative personnel of the Office of Financial Regulation's Bureau of Financial Investigations whose duties include the investigation of fraud, theft, other related criminal activities, or state regulatory requirement violations; the names, home addresses, telephone numbers, dates of birth, and places of employment of

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301 the spouses and children of such personnel; and the names and 302 locations of schools and day care facilities attended by the 303 children of such personnel are exempt from s. 119.07(1) and s. 304 24(a), Art. I of the State Constitution.

305 The home addresses, telephone numbers, dates of birth, d. and photographs of current or former firefighters certified in 306 307 compliance with s. 633.408; the names, home addresses, telephone numbers, photographs, dates of birth, and places of employment 308 309 of the spouses and children of such firefighters; and the names and locations of schools and day care facilities attended by the 310 311 children of such firefighters are exempt from s. 119.07(1) and s. 24(a), Art. I of the State Constitution. 312

e. The home addresses, dates of birth, and telephone 313 314 numbers of current or former justices of the Supreme Court, 315 district court of appeal judges, circuit court judges, and 316 county court judges, and of current judicial assistants; the 317 names, home addresses, telephone numbers, dates of birth, and 318 places of employment of the spouses and children of current or former justices and judges and of current judicial assistants; 319 320 and the names and locations of schools and day care facilities 321 attended by the children of current or former justices and 322 judges and of current judicial assistants are exempt from s. 323 119.07(1) and s. 24(a), Art. I of the State Constitution. This 324 sub-subparagraph is subject to the Open Government Sunset Review Act in accordance with s. 119.15 and shall stand repealed on 325

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326 October 2, 2028, unless reviewed and saved from repeal through 327 reenactment by the Legislature.

328 f. The home addresses, telephone numbers, dates of birth, 329 and photographs of current or former state attorneys, assistant 330 state attorneys, statewide prosecutors, or assistant statewide prosecutors; the names, home addresses, telephone numbers, 331 332 photographs, dates of birth, and places of employment of the 333 spouses and children of current or former state attorneys, 334 assistant state attorneys, statewide prosecutors, or assistant 335 statewide prosecutors; and the names and locations of schools 336 and day care facilities attended by the children of current or 337 former state attorneys, assistant state attorneys, statewide 338 prosecutors, or assistant statewide prosecutors are exempt from 339 s. 119.07(1) and s. 24(a), Art. I of the State Constitution.

The home addresses, dates of birth, and telephone 340 α. 341 numbers of general magistrates, special magistrates, judges of 342 compensation claims, administrative law judges of the Division 343 of Administrative Hearings, and child support enforcement 344 hearing officers; the names, home addresses, telephone numbers, 345 dates of birth, and places of employment of the spouses and children of general magistrates, special magistrates, judges of 346 347 compensation claims, administrative law judges of the Division 348 of Administrative Hearings, and child support enforcement 349 hearing officers; and the names and locations of schools and day care facilities attended by the children of general magistrates, 350

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351 special magistrates, judges of compensation claims, 352 administrative law judges of the Division of Administrative 353 Hearings, and child support enforcement hearing officers are 354 exempt from s. 119.07(1) and s. 24(a), Art. I of the State 355 Constitution.

356 The home addresses, telephone numbers, dates of birth, h. 357 and photographs of current or former human resource, labor 358 relations, or employee relations directors, assistant directors, 359 managers, or assistant managers of any local government agency 360 or water management district whose duties include hiring and 361 firing employees, labor contract negotiation, administration, or 362 other personnel-related duties; the names, home addresses, 363 telephone numbers, dates of birth, and places of employment of 364 the spouses and children of such personnel; and the names and 365 locations of schools and day care facilities attended by the 366 children of such personnel are exempt from s. 119.07(1) and s. 367 24(a), Art. I of the State Constitution.

368 i. The home addresses, telephone numbers, dates of birth, 369 and photographs of current or former code enforcement officers; 370 the names, home addresses, telephone numbers, dates of birth, 371 and places of employment of the spouses and children of such 372 personnel; and the names and locations of schools and day care facilities attended by the children of such personnel are exempt 373 374 from s. 119.07(1) and s. 24(a), Art. I of the State 375 Constitution.

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376 The home addresses, telephone numbers, places of ή. 377 employment, dates of birth, and photographs of current or former 378 guardians ad litem, as defined in s. 39.820; the names, home 379 addresses, telephone numbers, dates of birth, and places of 380 employment of the spouses and children of such persons; and the 381 names and locations of schools and day care facilities attended 382 by the children of such persons are exempt from s. 119.07(1) and 383 s. 24(a), Art. I of the State Constitution. 384 The home addresses, telephone numbers, dates of birth, k. 385 and photographs of current or former juvenile probation 386 officers, juvenile probation supervisors, detention 387 superintendents, assistant detention superintendents, juvenile justice detention officers I and II, juvenile justice detention 388 389 officer supervisors, juvenile justice residential officers, 390 juvenile justice residential officer supervisors I and II, 391 juvenile justice counselors, juvenile justice counselor 392 supervisors, human services counselor administrators, senior 393 human services counselor administrators, rehabilitation 394 therapists, and social services counselors of the Department of 395 Juvenile Justice; the names, home addresses, telephone numbers, 396 dates of birth, and places of employment of spouses and children 397 of such personnel; and the names and locations of schools and 398 day care facilities attended by the children of such personnel 399 are exempt from s. 119.07(1) and s. 24(a), Art. I of the State Constitution. 400

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401 The home addresses, telephone numbers, dates of birth, 1. 402 and photographs of current or former public defenders, assistant 403 public defenders, criminal conflict and civil regional counsel, 404 and assistant criminal conflict and civil regional counsel; the 405 names, home addresses, telephone numbers, dates of birth, and 406 places of employment of the spouses and children of current or 407 former public defenders, assistant public defenders, criminal conflict and civil regional counsel, and assistant criminal 408 409 conflict and civil regional counsel; and the names and locations of schools and day care facilities attended by the children of 410 411 current or former public defenders, assistant public defenders, criminal conflict and civil regional counsel, and assistant 412 criminal conflict and civil regional counsel are exempt from s. 413 414 119.07(1) and s. 24(a), Art. I of the State Constitution. 415 The home addresses, telephone numbers, dates of birth, m.

416 and photographs of current or former investigators or inspectors 417 of the Department of Business and Professional Regulation; the 418 names, home addresses, telephone numbers, dates of birth, and 419 places of employment of the spouses and children of such current 420 or former investigators and inspectors; and the names and 421 locations of schools and day care facilities attended by the 422 children of such current or former investigators and inspectors 423 are exempt from s. 119.07(1) and s. 24(a), Art. I of the State 424 Constitution.

425

n. The home addresses, telephone numbers, and dates of

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birth of county tax collectors; the names, home addresses, telephone numbers, dates of birth, and places of employment of the spouses and children of such tax collectors; and the names and locations of schools and day care facilities attended by the children of such tax collectors are exempt from s. 119.07(1) and s. 24(a), Art. I of the State Constitution.

432 The home addresses, telephone numbers, dates of birth, ο. 433 and photographs of current or former personnel of the Department 434 of Health whose duties include, or result in, the determination 435 or adjudication of eligibility for social security disability 436 benefits, the investigation or prosecution of complaints filed against health care practitioners, or the inspection of health 437 438 care practitioners or health care facilities licensed by the 439 Department of Health; the names, home addresses, telephone 440 numbers, dates of birth, and places of employment of the spouses 441 and children of such personnel; and the names and locations of 442 schools and day care facilities attended by the children of such 443 personnel are exempt from s. 119.07(1) and s. 24(a), Art. I of 444 the State Constitution.

p. The home addresses, telephone numbers, dates of birth, and photographs of current or former impaired practitioner consultants who are retained by an agency or current or former employees of an impaired practitioner consultant whose duties result in a determination of a person's skill and safety to practice a licensed profession; the names, home addresses,

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451 telephone numbers, dates of birth, and places of employment of 452 the spouses and children of such consultants or their employees; 453 and the names and locations of schools and day care facilities 454 attended by the children of such consultants or employees are 455 exempt from s. 119.07(1) and s. 24(a), Art. I of the State 456 Constitution.

457 The home addresses, telephone numbers, dates of birth, q. and photographs of current or former emergency medical 458 459 technicians or paramedics certified under chapter 401; the 460 names, home addresses, telephone numbers, dates of birth, and 461 places of employment of the spouses and children of such 462 emergency medical technicians or paramedics; and the names and 463 locations of schools and day care facilities attended by the 464 children of such emergency medical technicians or paramedics are 465 exempt from s. 119.07(1) and s. 24(a), Art. I of the State 466 Constitution.

467 The home addresses, telephone numbers, dates of birth, r. 468 and photographs of current or former personnel employed in an 469 agency's office of inspector general or internal audit 470 department whose duties include auditing or investigating waste, fraud, abuse, theft, exploitation, or other activities that 471 could lead to criminal prosecution or administrative discipline; 472 473 the names, home addresses, telephone numbers, dates of birth, 474 and places of employment of spouses and children of such personnel; and the names and locations of schools and day care 475

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476 facilities attended by the children of such personnel are exempt 477 from s. 119.07(1) and s. 24(a), Art. I of the State 478 Constitution.

479 s. The home addresses, telephone numbers, dates of birth, 480 and photographs of current or former directors, managers, 481 supervisors, nurses, and clinical employees of an addiction 482 treatment facility; the home addresses, telephone numbers, 483 photographs, dates of birth, and places of employment of the 484 spouses and children of such personnel; and the names and 485 locations of schools and day care facilities attended by the 486 children of such personnel are exempt from s. 119.07(1) and s. 487 24(a), Art. I of the State Constitution. For purposes of this 488 sub-subparagraph, the term "addiction treatment facility" means 489 a county government, or agency thereof, that is licensed 490 pursuant to s. 397.401 and provides substance abuse prevention, 491 intervention, or clinical treatment, including any licensed 492 service component described in s. 397.311(27) s. 397.311(26).

493 t. The home addresses, telephone numbers, dates of birth, 494 and photographs of current or former directors, managers, 495 supervisors, and clinical employees of a child advocacy center that meets the standards of s. 39.3035(2) and fulfills the 496 screening requirement of s. 39.3035(3), and the members of a 497 498 Child Protection Team as described in s. 39.303 whose duties 499 include supporting the investigation of child abuse or sexual abuse, child abandonment, child neglect, and child exploitation 500

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501 or to provide services as part of a multidisciplinary case 502 review team; the names, home addresses, telephone numbers, 503 photographs, dates of birth, and places of employment of the 504 spouses and children of such personnel and members; and the 505 names and locations of schools and day care facilities attended 506 by the children of such personnel and members are exempt from s. 507 119.07(1) and s. 24(a), Art. I of the State Constitution. 508 The home addresses, telephone numbers, places of u. 509 employment, dates of birth, and photographs of current or former 510 staff and domestic violence advocates, as defined in s. 511 90.5036(1)(b), of domestic violence centers certified by the 512 Department of Children and Families under chapter 39; the names, 513 home addresses, telephone numbers, places of employment, dates 514 of birth, and photographs of the spouses and children of such 515 personnel; and the names and locations of schools and day care 516 facilities attended by the children of such personnel are exempt 517 from s. 119.07(1) and s. 24(a), Art. I of the State 518 Constitution. 519 The home addresses, telephone numbers, dates of birth, v.

and photographs of current or former inspectors or investigators of the Department of Agriculture and Consumer Services; the names, home addresses, telephone numbers, dates of birth, and places of employment of the spouses and children of current or former inspectors or investigators; and the names and locations of schools and day care facilities attended by the children of

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526 current or former inspectors or investigators are exempt from s. 527 119.07(1) and s. 24(a), Art. I of the State Constitution. This 528 sub-subparagraph is subject to the Open Government Sunset Review 529 Act in accordance with s. 119.15 and shall stand repealed on 530 October 2, 2028, unless reviewed and saved from repeal through 531 reenactment by the Legislature.

532 3. An agency that is the custodian of the information 533 specified in subparagraph 2. and that is not the employer of the 534 officer, employee, justice, judge, or other person specified in 535 subparagraph 2. must maintain the exempt status of that information only if the officer, employee, justice, judge, other 536 537 person, or employing agency of the designated employee submits a 538 written and notarized request for maintenance of the exemption 539 to the custodial agency. The request must state under oath the 540 statutory basis for the individual's exemption request and 541 confirm the individual's status as a party eligible for exempt 542 status.

543 4.a. A county property appraiser, as defined in s. 544 192.001(3), or a county tax collector, as defined in s. 545 192.001(4), who receives a written and notarized request for 546 maintenance of the exemption pursuant to subparagraph 3. must 547 comply by removing the name of the individual with exempt status 548 and the instrument number or Official Records book and page 549 number identifying the property with the exempt status from all publicly available records maintained by the property appraiser 550

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551 or tax collector. For written requests received on or before 552 July 1, 2021, a county property appraiser or county tax 553 collector must comply with this sub-subparagraph by October 1, 554 2021. A county property appraiser or county tax collector may 555 not remove the street address, legal description, or other 556 information identifying real property within the agency's 557 records so long as a name or personal information otherwise 558 exempt from inspection and copying pursuant to this section is 559 not associated with the property or otherwise displayed in the 560 public records of the agency.

b. Any information restricted from public display,
inspection, or copying under sub-subparagraph a. must be
provided to the individual whose information was removed.

564 5. An officer, an employee, a justice, a judge, or other 565 person specified in subparagraph 2. may submit a written request 566 for the release of his or her exempt information to the 567 custodial agency. The written request must be notarized and must 568 specify the information to be released and the party authorized 569 to receive the information. Upon receipt of the written request, 570 the custodial agency must release the specified information to the party authorized to receive such information. 571

572 6. The exemptions in this paragraph apply to information 573 held by an agency before, on, or after the effective date of the 574 exemption.

575

7. Information made exempt under this paragraph may be

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disclosed pursuant to s. 28.2221 to a title insurer authorized pursuant to s. 624.401 and its affiliates as defined in s. 624.10; a title insurance agent or title insurance agency as defined in s. 626.841(1) or (2), respectively; or an attorney duly admitted to practice law in this state and in good standing with The Florida Bar.

582 8. The exempt status of a home address contained in the 583 Official Records is maintained only during the period when a 584 protected party resides at the dwelling location. Upon 585 conveyance of real property after October 1, 2021, and when such 586 real property no longer constitutes a protected party's home 587 address as defined in sub-subparagraph 1.a., the protected party 588 must submit a written request to release the removed information 589 to the county recorder. The written request to release the 590 removed information must be notarized, must confirm that a 591 protected party's request for release is pursuant to a 592 conveyance of his or her dwelling location, and must specify the 593 Official Records book and page, instrument number, or clerk's 594 file number for each document containing the information to be 595 released.

596 9. Upon the death of a protected party as verified by a 597 certified copy of a death certificate or court order, any party 598 can request the county recorder to release a protected 599 decedent's removed information unless there is a related request 600 on file with the county recorder for continued removal of the

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601 decedent's information or unless such removal is otherwise 602 prohibited by statute or by court order. The written request to release the removed information upon the death of a protected 603 604 party must attach the certified copy of a death certificate or 605 court order and must be notarized, must confirm the request for 606 release is due to the death of a protected party, and must 607 specify the Official Records book and page number, instrument 608 number, or clerk's file number for each document containing the 609 information to be released. A fee may not be charged for the 610 release of any document pursuant to such request. 611 10. Except as otherwise expressly provided in this 612 paragraph, this paragraph is subject to the Open Government Sunset Review Act in accordance with s. 119.15 and shall stand 613 614 repealed on October 2, 2024, unless reviewed and saved from 615 repeal through reenactment by the Legislature. 616 Section 6. Paragraph (a) of subsection (4) of section 617 381.0038, Florida Statutes, is amended to read: 618 381.0038 Education; sterile needle and syringe exchange 619 programs.-The Department of Health shall establish a program to 620 educate the public about the threat of acquired immune 621 deficiency syndrome. (4) A county commission may authorize a sterile needle and 622 623 syringe exchange program to operate within its county 624 boundaries. The program may operate at one or more fixed 625 locations or through mobile health units. The program shall

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626 offer the free exchange of clean, unused needles and hypodermic 627 syringes for used needles and hypodermic syringes as a means to 628 prevent the transmission of HIV, AIDS, viral hepatitis, or other 629 blood-borne diseases among intravenous drug users and their 630 sexual partners and offspring. Prevention of disease 631 transmission must be the goal of the program. For the purposes 632 of this subsection, the term "exchange program" means a sterile 633 needle and syringe exchange program established by a county 634 commission under this subsection. A sterile needle and syringe 635 exchange program may not operate unless it is authorized and 636 approved by a county commission in accordance with this 637 subsection.

638 (a) Before an exchange program may be established, a639 county commission must:

640 1. Authorize the program under the provisions of a county641 ordinance;

642 2. Enter into a letter of agreement with the department in 643 which the county commission agrees that any exchange program 644 authorized by the county commission will operate in accordance 645 with this subsection;

646 3. Enlist the local county health department to provide
647 ongoing advice, consultation, and recommendations for the
648 operation of the program;

649 4. Contract with one of the following entities to operate650 the program:

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**#6** RIDA HOUSE OF REPRESENTATIVES F L

ENROLLED CS/CS/CS/HB 1065

#### 2024 Legislature

651	a. A hospital licensed under chapter 395.
652	b. A health care clinic licensed under part X of chapter
653	400.
654	c. A medical school in this state accredited by the
655	Liaison Committee on Medical Education or the Commission on
656	Osteopathic College Accreditation.
657	d. A licensed addictions receiving facility as defined in
658	<u>s. 397.311(27)(a)1.</u> <del>s. 397.311(26)(a)1.</del>
659	e. A s. 501(c)(3) HIV/AIDS service organization.
660	Section 7. Paragraph (e) of subsection (2) of section
661	394.4573, Florida Statutes, is amended to read:
662	394.4573 Coordinated system of care; annual assessment;
663	essential elements; measures of performance; system improvement
664	grants; reports.—On or before December 1 of each year, the
665	department shall submit to the Governor, the President of the
666	Senate, and the Speaker of the House of Representatives an
667	assessment of the behavioral health services in this state. The
668	assessment shall consider, at a minimum, the extent to which
669	designated receiving systems function as no-wrong-door models,
670	the availability of treatment and recovery services that use
671	recovery-oriented and peer-involved approaches, the availability
672	of less-restrictive services, and the use of evidence-informed
673	practices. The assessment shall also consider the availability
674	of and access to coordinated specialty care programs and
675	identify any gaps in the availability of and access to such

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#6 LORIDA HOUSE OF REPRESENTATIVES F

#### 2024 Legislature

676	programs in the state. The department's assessment shall
677	consider, at a minimum, the needs assessments conducted by the
678	managing entities pursuant to s. 394.9082(5). The department
679	shall compile and include in the report all plans submitted by
680	managing entities pursuant to s. 394.9082(8) and the
681	department's evaluation of each plan.
682	(2) The essential elements of a coordinated system of care
683	include:
684	(e) Case management. Each case manager or person directly
685	supervising a case manager who provides Medicaid-funded targeted
686	case management services shall hold a valid certification from a
687	department-approved credentialing entity as defined in <u>s.</u>
688	<u>397.311(11)</u> <del>s. 397.311(10)</del> by July 1, 2017, and, thereafter,
689	within 6 months after hire.
690	Section 8. Subsection (6) of section 394.9085, Florida
691	Statutes, is amended to read:
692	394.9085 Behavioral provider liability
693	(6) For purposes of this section, the terms
694	"detoxification services," "addictions receiving facility," and
695	"receiving facility" have the same meanings as those provided in
696	<u>ss. 397.311(27)(a)4., 397.311(27)(a)1.</u> <del>ss. 397.311(26)(a)3.,</del>
697	<del>397.311(26)(a)1.</del> , and 394.455(40), respectively.
698	Section 9. Subsection (8) of section 397.4012, Florida
699	Statutes, is amended to read:
700	397.4012 Exemptions from licensure.—The following are

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#6 IDA HOUSE OF REPRESENTATIVES F 0 L R

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701	exempt from the licensing provisions of this chapter:
702	(8) A legally cognizable church or nonprofit religious
703	organization or denomination providing substance abuse services,
704	including prevention services, which are solely religious,
705	spiritual, or ecclesiastical in nature. A church or nonprofit
706	religious organization or denomination providing any of the
707	licensed service components itemized under <u>s. 397.311(27)</u> <del>s.</del>
708	<del>397.311(26)</del> is not exempt from substance abuse licensure but
709	retains its exemption with respect to all services which are
710	solely religious, spiritual, or ecclesiastical in nature.
711	
712	The exemptions from licensure in subsections (3), (4), (8), (9),
713	and (10) do not apply to any service provider that receives an
714	appropriation, grant, or contract from the state to operate as a
715	service provider as defined in this chapter or to any substance
716	abuse program regulated under s. 397.4014. Furthermore, this
717	chapter may not be construed to limit the practice of a
718	physician or physician assistant licensed under chapter 458 or
719	chapter 459, a psychologist licensed under chapter 490, a
720	psychotherapist licensed under chapter 491, or an advanced
721	practice registered nurse licensed under part I of chapter 464,
722	who provides substance abuse treatment, so long as the
723	physician, physician assistant, psychologist, psychotherapist,
724	or advanced practice registered nurse does not represent to the
725	public that he or she is a licensed service provider and does

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CODING: Words stricken are deletions; words underlined are additions.

IDA HOUSE OF R E P R E S E N T A T I V E S

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726 not provide services to individuals under part V of this 727 chapter. Failure to comply with any requirement necessary to 728 maintain an exempt status under this section is a misdemeanor of 729 the first degree, punishable as provided in s. 775.082 or s. 730 775.083.

731 Section 10. Subsections (1) and (6) of section 397.407,
732 Florida Statutes, are amended to read:

733

397.407 Licensure process; fees.-

734 The department shall establish the licensure process (1)735 to include fees and categories of licenses and must prescribe a fee range that is based, at least in part, on the number and 736 737 complexity of programs listed in s. 397.311(27) s. 397.311(26) 738 which are operated by a licensee. The fees from the licensure of 739 service components are sufficient to cover the costs of 740 regulating the service components. The department shall specify 741 a fee range for public and privately funded licensed service 742 providers. Fees for privately funded licensed service providers must exceed the fees for publicly funded licensed service 743 744 providers.

(6) The department may issue probationary, regular, and interim licenses. The department shall issue one license for each service component that is operated by a service provider and defined pursuant to  $\underline{s. 397.311(27)} = \underline{s. 397.311(26)}$ . The license is valid only for the specific service components listed for each specific location identified on the license. The

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751 licensed service provider shall apply for a new license at least 752 60 days before the addition of any service components or 30 days 753 before the relocation of any of its service sites. Provision of 754 service components or delivery of services at a location not 755 identified on the license may be considered an unlicensed 756 operation that authorizes the department to seek an injunction 757 against operation as provided in s. 397.401, in addition to 758 other sanctions authorized by s. 397.415. Probationary and 759 regular licenses may be issued only after all required 760 information has been submitted. A license may not be 761 transferred. As used in this subsection, the term "transfer" 762 includes, but is not limited to, the transfer of a majority of 763 the ownership interest in the licensed entity or transfer of 764 responsibilities under the license to another entity by 765 contractual arrangement. 766 Section 11. Subsection (1) of section 397.410, Florida

767 Statutes, is amended to read:

397.410 Licensure requirements; minimum standards; rules.(1) The department shall establish minimum requirements
for licensure of each service component, as defined in <u>s.</u>
<u>397.311(27)</u> s. <u>397.311(26)</u>, including, but not limited to:

(a) Standards and procedures for the administrative management of the licensed service component, including procedures for recordkeeping, referrals, and financial management.

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#6 LORIDA HOUSE OF REPRESENTATIVES F

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776	(b) Standards consistent with clinical and treatment best
777	practices that ensure the provision of quality treatment for
778	individuals receiving substance abuse treatment services.
779	(c) The number and qualifications of all personnel,
780	including, but not limited to, management, nursing, and
781	qualified professionals, having responsibility for any part of
782	an individual's clinical treatment. These requirements must
783	include, but are not limited to:
784	1. Education; credentials, such as licensure or
785	certification, if appropriate; training; and supervision of
786	personnel providing direct clinical treatment.
787	2. Minimum staffing ratios to provide adequate safety,
788	care, and treatment.
789	3. Hours of staff coverage.
790	4. The maximum number of individuals who may receive
791	clinical services together in a group setting.
792	5. The maximum number of licensed service providers for
793	which a physician may serve as medical director and the total
794	number of individuals he or she may treat in that capacity.
795	(d) Service provider facility standards, including, but
796	not limited to:
797	1. Safety and adequacy of the facility and grounds.
798	2. Space, furnishings, and equipment for each individual
799	served.
800	3. Infection control, housekeeping, sanitation, and
ļ	Page 32 of 35

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801 facility maintenance.

802

4. Meals and snacks.

803

. . . . . . . .

00.

(e) Disaster planning policies and procedures.

(f) A prohibition on the premises against alcohol, marijuana, illegal drugs, and the use of prescribed medications by an individual other than the individual for whom the medication is prescribed. For the purposes of this paragraph, "marijuana" includes marijuana that has been certified by a qualified physician for medical use in accordance with s. 381.986.

811 Section 12. Section 397.416, Florida Statutes, is amended 812 to read:

813 397.416 Substance abuse treatment services; qualified 814 professional.-Notwithstanding any other provision of law, a 815 person who was certified through a certification process 816 recognized by the former Department of Health and Rehabilitative 817 Services before January 1, 1995, may perform the duties of a 818 qualified professional with respect to substance abuse treatment 819 services as defined in this chapter, and need not meet the 820 certification requirements contained in s. 397.311(36) s. 821 397.311(35). Section 13. Paragraph (h) of subsection (1) of section 822

823 893.13, Florida Statutes, is amended to read:

824 893.13 Prohibited acts; penalties.-

825

(1)

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#6 LORIDA HOUSE OF REPRESENTATIVES F

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826	(h) Except as authorized by this chapter, a person may not
827	sell, manufacture, or deliver, or possess with intent to sell,
828	manufacture, or deliver, a controlled substance in, on, or
829	within 1,000 feet of the real property comprising a mental
830	health facility, as that term is used in chapter 394; a health
831	care facility licensed under chapter 395 which provides
832	substance abuse treatment; a licensed service provider as
833	defined in s. 397.311; a facility providing services that
834	include clinical treatment, intervention, or prevention as
835	described in <u>s. 397.311(27)</u> <del>s. 397.311(26)</del> ; a recovery residence
836	as defined in s. 397.311; an assisted living facility as defined
837	in chapter 429; or a pain management clinic as defined in s.
838	458.3265(1)(a)1.c. or s. 459.0137(1)(a)1.c. A person who
839	violates this paragraph with respect to:
840	1. A controlled substance named or described in s.
841	893.03(1)(a), (1)(b), (1)(d), (2)(a), (2)(b), or (2)(c)5.
842	commits a felony of the first degree, punishable as provided in
843	s. 775.082, s. 775.083, or s. 775.084.
844	2. A controlled substance named or described in s.
845	893.03(1)(c), (2)(c)1., (2)(c)2., (2)(c)3., (2)(c)6., (2)(c)7.,
846	(2)(c)8., (2)(c)9., (2)(c)10., (3), or (4) commits a felony of
847	the second degree, punishable as provided in s. 775.082, s.
848	775.083, or s. 775.084.
849	3. Any other controlled substance, except as lawfully
850	sold, manufactured, or delivered, must be sentenced to pay a
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#6 FLORIDA HOUSE OF REPRESENTATIVES

ENROLLED CS/CS/CS/HB 1065

2024 Legislature

- 851 \$500 fine and to serve 100 hours of public service in addition 852 to any other penalty prescribed by law.
- 853

3 Section 14. This act shall take effect July 1, 2024.

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State Attorney Addiction Recovery Task Force May 15, 2024

#### **STATEWIDE PROGRAMS CERTIFIED (726)**

r	<u>IVIAY 202</u>	<u>24</u> :	1	
	Units: 1,8	72		
	Beds: 9,3	06		
Levels I,	Units:	Be	eds:	
II & III:	1,090	6,	058	
Level IV:	Units:	Be	Beds:	
	797	3,	248	

#### MAN 2021.

#### **FLORIDA COUNTIES**

- Broward County has 31% of the units and 29% of the beds.
- Palm Beach County has 42% of the units and 38.6% of the beds.

County	Units	Beds
Alachua	2	10
Brevard	11	136
Broward	567	2,716
Clay	1	8
Collier	9	65
Duval	43	282
Escambia	13	57
Flagler	6	39
Hillsborough	81	439
Indian River	13	80
Lee	50	325
Manatee	22	111
Marion	8	40

Martin	24	139
Miami-Dade	22	111
Orange	21	1178
Osceola	1	12
Palm Beach	793	3,596
Pasco	35	163
Pinellas	88	295
Polk	1	6
Sarasota	33	184
Seminole	2	20
St. Lucie	12	91
Volusia	12	46



#### **RUNNING TOTALS**

#### STATE CAPACITY TREND

May 2024

#### **FARR**

July	2017	3,280	beds
January	2018	4,153	beds
January	2019	5,786	beds
January	2020	5,781	beds
January	2021	6,715	beds
January	2022	6,872	beds
January	2023	8,122	beds
January February March April May	2024 2024 2024 2024 2024 2024	9,001 9,203 9,226 9,306 9,306	beds beds beds beds beds

• 7.9% bed capacity Increase since January 2023

#### PALM BEACH COUNTY NUMBERS

#### **102 Certified Providers**

793 Units, 3,596 Beds (Men: 1,628, Women: 626, Both: 1,318, LGBTQ+: 24)

Level I: 6 Programs, 27 Units, 79 Beds	
Level II: 60 Programs, 331 Units, 1,807 Beds	
Level III: 7 Programs, 40 Units, 141 Beds	
Level IV: 41 Programs, 395 Units, 1,569 Beds	

#### **Overdose Numbers**

#### **Certified Recovery Residences - Self Reporting**

JAN 2023 – May 2024 21.7% Death Rate

Total	Male	Female	Deaths
46	42	5	10

#### City Report

Bradenton (2 Overdose) (0 Death) Boynton Beach (1 Overdose) (0 Death) Clearwater (1 Overdose) (0 Death)

Coral Springs (2 Overdose) (1 Death)

Delray (9 Overdose) (0 Death)

Fort Lauderdale (8 Overdose) (2 Death)

Hollywood (2 Overdose) (1 Death)

Jacksonville (3 Overdose) (0 Death)

Lake Worth (2 Overdose) (0 Death)

Miami (2 Overdose) (1 Death)

Tampa (2 Overdose) (0 Death)

West Palm Beach (2 Overdose) (0 Death)

Oakland Park (2 Overdose) (0 Death)

Pompano Beach (7 Overdose) (4 Death)

Rockledge (1 Overdose) (1 Death)

St Pete (1 Overdose) (0 Death)

#### Age Report

20's- (6)

30's- (12)

40's- (3)

**Drug Preference** 

#### **Naloxone Dose**

Under 20- (0) 50's & Up- (1) Opiates/Fentanyl-(42) Cocaine-(2) Alcohol-(2) Xanax -(0)

1 Dose () 2 Doses () 3 Doses () 4 Doses () Unknow (46)

Average Age: 32

#### **Certification Level Time in Florida State of Origin** Level I- (0) NY-(2) 10 Hours- (0) 3 Months- (1) Level II- (16) Georgia-(2) Level III- (0) MO-(1) 1 Year- (0) Level IV- (6) 2 Years- (0) MA-(0) Unknown- (45) Ohio-(1) NC-(1)

Unknown-(39)



### COMMITMENT IS THE KEY TO RECOVERY

We are committed to maintaining quality standards, upholding FARR's recovery services and providing effective strategies to meet the expanding needs of our providers.



#### **Mission Statement**

- 1 To create, monitor, evaluate and improve standards for recovery residences in the State of Florida
- 02 Maintain the standards set forth by NARR (National Association of Recovery Residences)
- O3 Maintain a forum for exchange of ideas, problem solving and providing guidance for our members

04 To remain ethical in all our endeavors to those we serve

#### **Our Philosophy**

We believe in a high quality of care for chemically dependent individuals and other persons needing recovery residence services

We believe that this can best be achieved through maintaining standards of care that are designed for this purpose

We also believe that all people deserve to recover in an atmosphere which meets their special needs as well as their basic right to safety, dignity and respect

#### NARR Mission

The National Alliance for Recovery Residences (NARR) supports people in recovery from alcohol and other drug use by improving the accessibility, availability and quality of recovery-oriented housing and services.

In support of this mission, we create, evaluate and improve standards and measures of quality for recovery residences. We provide a forum for exchanging ideas, problem solving, technical assistance and training. NARR informs public policy development as recovery experts at the national and regional level.

NARR assists existing regional organizations and fosters the development of stakeholder organizations where none exist. NARR is the national resource on recovery residences for people in recovery, health and recovery professionals, social service agencies, state and local governments and recovery residence providers.



The National Alliance for Recovery Residences (NARR) was formed in 2011 to fill a void in the field of addiction recovery services.

Recovery residences are a vital resource for many along the road to recovery. They have not had a *national unified resource*.

Until now.



#### NARR Benefits

- Universally accepted protocol for operating ethical, high quality recovery residences,
- Advice and technical assistance to state and local governments on recovery residence issues,
- Opportunity to effect change through NARR's involvement in professional and policy communities,
- Resource for advocacy, training, technical assistance and information about fair housing rights,
- Latest information, research and policy recommendations on recovery residence conditions, resources and issues impacting people in recovery nationally,
- Participation in discussions and policy formation on issues affecting recovery residences nationally,
- Resource support for local and regional stakeholder organizations seeking to improve the availability, accessibly and quality of recovery residence options.

### www.narronline.org

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#### FLORIDA STATE OXFORD HOUSES

Total Houses	184
Total Beds	1656
Men Houses	114
Men Beds	1020
Women Houses	26
Women Beds	223
Women with Children Houses	40
Women with Children Beds	374
Men with Children Houses	4
Men with Children Beds	39

#### Cities that currently have Oxford Houses

West Palm Beach	Vero Beach	Lakeland	Bradenton
Lantana	Port St. Lucie	St. Petersburg	Ft. Myers
Riviera Beach	Ft. Lauderdale	Temple Terrace	Cape Coral
Lake Park	Lauderhill	Largo	Pensacola
Fort Pierce	Tampa	Clearwater	Panama City
Seminole	Winter Haven	Land O' Lakes	Panama City Beach
Tallahassee	Altamonte Springs	a Apopka	Orlando
Winter Park	Jacksonville	Orange Park	St. Augustine
Palm Coast	Daytona	Port Orange	Ocala

Gainesville	Miami Gardens	Miami	Kissimmee	Deltona
New Port Richie	Jacksonville Beach	Ft. Walton	Sarasota	Deland
Palm Bay	Sanford	Crestview	Naples	Spring Hill
Maitland	Port Charlotte	Fruitland Pa	ark	

Overdoses since the last meeting: 1 fatal (Sarasota)

Upcoming Events: Oxford House World Convention Fall 2024 (Rosen Shingle Creek, Orlando)

All chapters in the state continue to do Narcan Administration trainings. All chapters are working with DCF to become Narcan providers for their areas.

National Website <u>www.oxfordhouse.org</u> Vacancy Website <u>www.oxfordvacancies.org</u> State Website <u>www.oxfordhousefl.org</u>

Contacts: Lori Holtzclaw-Hunt Director of National Field Services 504-430-8554 lori.holtzclaw@oxfordhouse.org Michael McKeogh Regional Manager 601-402-6864 michael.mckeogh@oxfordhouse.org

## 5 YR ANNIVERSARY EDITION OXFORD HOUSE FLORIDA NEWSLETTER

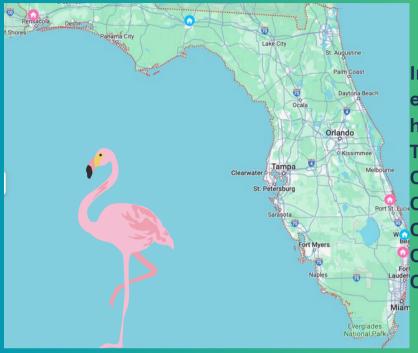
As we reflect on our journey since our establishment in 2019, we're filled with gratitude for the incredible growth and impact we've achieved together. From our humble beginnings with the first house in Tallahassee, aptly named Oxford House Tallahassee, we've tirelessly worked to expand our reach and change more lives. Over the past five years, our dedication to providing safe, supportive environments for individuals in recovery has driven us to open more houses across communities. Each new house represents not just a physical structure, but a beacon of hope for those seeking a path to recovery and stability. It's a testament to our commitment to saving lives and fostering long-term success for our members.

As we celebrate our expansion, it's important to recognize the countless individuals whose lives have been positively transformed through Oxford House. Whether it's providing a sense of belonging, access to resources, or simply a supportive community, our houses continue to serve as catalysts for change. Every story of triumph over addiction and adversity fuels our passion to do more and reach further. Looking ahead, we're energized by the possibilities that lie before us. With each new house we open, we're not just growing in numbers, but expanding our capacity to make a difference. Together, we'll continue to create opportunities for recovery, empowerment, and lasting change.

Thank you for being part of the Oxford House journey. Your support, dedication, and belief in our mission are what drive us forward every day.



## FLORIDA GROWTH



In 2019 Oxford House began its expansion in Florida with a mere 5 houses spread all throughout the state. The first 5 houses were: Oxford House Tallahassee Oxford House Mango Oxford House Pineapple Oxford House Clusia Oxford House Glo

Since its beginning in 2019 with the establishment of its first five houses, Oxford House has flourished into a vast network, proudly encompassing more than 175 homes nestled within the embrace of 25 chapters. This expansion not only signifies growth but also underscores Oxford House's steadfast commitment to fostering unity and long term recovery among its members and communities.



# FLORIDA GROWTH



Florida's first attendance at Oxford House World Convention 2019



**100+ Delegates attended World 2023** 



The first State Association meeting and workshop retreat.



#### 2024 Workshop training retreat with 150+ attending





**2023 State Association** 



# **Alumni Association**

The Oxford House FL Alumni Association was officially formed in October of 2022. The founding members: Desiree Rioux, Karl Krahn, Frances Cooksie, Ashleigh Pintor, Bo Byrd, and Matthew Slier held a meeting where bylaws and service positions were established. Our main focus has always been to help the members of Oxford House Florida in whatever capacity we can: leading by example, training, attending house meetings, and empowering struggling houses. We encourage our Alumni to stay involved by regularly attending their local chapter meetings and getting voted in as voting alumni. As of today, there are 84 registered alumni in the state of Florida. Since becoming financially stable we have been able to give back by donating money to open several new houses. We have also been donating one week's EES to 2-3 newer members per month who demonstrate qualities that we hold in high regard within Oxford House. In addition, we intend to sponsor several alumni's trips to the OH World Convention in Orlando this fall. The OH FL Alumni Association is doing very well considering the short amount of time we have been an organization. On average, our monthly business meetings have more than 15 attendees. If you would like to get involved and give back what was so freely given to you, join us on Zoom on the 2nd Sunday of every month at 1:00 PM EST (meeting ID: 863 7080 3939.)

I started drinking when I was 9, by age 12 early onset alcoholism was well on its way and heavy drug use would shortly follow. Here started my lifelong affliction and battle with alcohol, drugs, and everything that comes with it. By age 18 I was sick and tired of being sick and tired, so I took my first shot at getting clean/sobriety. I could get clean once the withdrawals of sickness subsided. The only problem is I couldn't stay clean. This is when the sick dance with repeated relapse began. Fast forward to age 36, I found myself sick and tired of being sick and tired again.



So, I checked myself into detox for the 53rd time on 10/13/19 (my sobriety date). Little did I know that this would still be my sobriety date almost 4 1/2 years later. When I was about to get released from treatment, I was not sure what I was going to do. I had nowhere to live the days in residential were coming to an end, All I knew was I wanted to stay clean, but I knew that would be impossible if I went back to the streets. I started to panic. A few days before release a buddy told me about a place called Oxford House. He gave me the number to Jax house in Jacksonville, FL. I called and set up an interview and was accepted. So started my journey with Oxford House, and what a journey it has been.

Oxford House first gave me a place to live. And then it gave me a purpose. At the beginning, I wasn't sure about this whole Oxford House thing but as time went on, I started to get more involved. I became a big part of my house. Then I moved on to become a chapter officer (HSC chair). I started to become heavily involved in all the houses in Jacksonville. I realized I could help the newcomers. Not only with the Oxford House model, rules, and way of life but also with their sobriety as well. Which in turn helped me with mine. (continued on next page)

Oxford House gave me a life back. It taught me how to live again through basic skills that the different officer positions taught me. Some I knew already and didn't practice and others I never knew like how to write a check or balance a checkbook. It also gave me hands-on experience with dealing with conflicts in a nonviolent way (which was a first). It also taught me how to get along and showed me that I am not unique and that there are others like me out there. Shoot I live with a whole house full of guys just like me with problems just like mine. Oxford House showed me that I'm not alone out here. For all these things that Oxford House has given me, I am forever grateful. So, in a nutshell, Oxford House saved my life. So, I recommend if you're not already doing so get involved, stay involved, and most importantly stay sober.



~Karl, Jacksonville Alumni



My name is Matthew Slier, and I'm an addict. My clean date is June 29th, 2020. I came into Oxford House Raising Hill in Jacksonville straight from treatment on October 2nd, 2020. Having attempted to get clean several times with no success, I decided to take suggestions and try something different. I moved into a house with 8 other men who were serious about their recovery, and who made accountability a priority; this structure is exactly what I needed. I was elected Secretary at my first house meeting, and after about a month in that role, I was elected President. The average person may not think that being president of a sober living house is a big deal, but it was (and still is) a very big deal to me!

Some of the people I looked up to in my area held chapter positions, so I decided that was what I wanted to do next. Although I lost my first election for Chapter Chair, I did not let that discourage me. The opportunity arose again a few months later, and I was elected as Chapter Chair. Soon after that, I was elected Vice-Chair of the OH FL State Association. The love of my life, Katie, and I moved in together after I had lived in OH for one year. Since OH was relatively new to Florida, we did not have any organized Alumni bodies and I wanted to change that. We created an Alumni Coordinator position within the State Association, and I was elected to that position.



Matt, Jacksonville

As an alumnus I have done my best to give guidance and assistance in whatever capacity I can: opening/furnishing new houses, sitting in on house meetings, fundraising, training, presentations, etc. In November of 2022, myself and several other active alumni formed the official OH Florida Alumni Association. I am very proud of the work we do within the Alumni Assoc. and look forward to what's to come. I have always credited Gateway Treatment Center for saving my life, and OH for showing me how to live. I regularly attend 12-step meetings, but OH is my true fellowship. Recovery has allowed me to accomplish things that I never thought were possible for myself. Today I have a wonderful marriage, a promising career, the trust of my family, and a fulfilled life.



I grew up in Thomasville, Georgia. My parents were strict and they fought a lot, but they both provided for me. I started drinking at about 13 years old. My behavior was dictated by my drinking and learned behaviors. After high school, I attended LaGrange College to study art and design. After 6 years of partying and drinking, I received a BA in Art and Design from Lagrange College I began my road to recovery on March 21, 2016. My journey began in Celebrate Recovery, attending step studies, going to the dependency small group, and staying clean. I can honestly say that I was cured of the obsession to drink, but I wasn't sober. I was dried out when I met a woman who became my wife. I got married in June 2018, and after a few months, we were struggling, just as I did in previous relationships. By August 2020, she was done.

I moved into OH Noles. I was out of control in so many ways. I needed help. I began intensive outpatient therapy where I learned how to listen to others' perspectives, to be honest with myself, and to identify feelings that I was stuffing away with alcohol and other addictive behaviors. I got a new sponsor. When I wasn't working, I was at an AA meeting or other 12-step meeting. OH was a strange new environment. I didn't like living with consequences. What I found was a group of men who wanted a safe and stable place to live without the chaos. I connected with the community. I spent my first Thanksgiving and Christmas with people who had gratitude. I gave people rides to work. I helped out when people asked for it. I changed careers and became a peer specialist in 2022. As a Peer, I'm able to help others find what I had found in sobriety. After about 9 months at Noles house, an opportunity arose to open Temperance. So, I helped open that house. About a year later, I moved to Tally house. It took a lot of hard work to turn that house around. After 6 months the house got back on track financially, and members were again attending meetings. I bought a house in August of 2023. I organized a Sober Poker Run in 2023 to benefit Oxford House. With help from volunteers from the chapter, it was a successful event. I serve as the alumni chair and rep for Chapter 3, as well as the Vice Chair for the Florida Alumni Association. I couldn't have done it without the guidance of God, my friends, following the steps, and the OH guidelines, and lots of patience and acceptance. ~ Clay, Tallahassee Alumni



I am an alumnus of Oxford House Gwendolyn. For years I battled with drug addiction. After multiple rehabs and some time in the county. I wanted to surrender, wanting something new for my life. Instead of getting high and slowly killing myself. In August 2021 I moved into Oxford House. I stayed for the whole year, as recommended. As I look back at what Oxford House did for me, Oxford House saved my life! Teaching me to continue my recovery with the unity of other addicts. Working on a program and gaining my independence back. March 12, 2024, I'm now 3 years clean! Because of Oxford House, I have rebuilt healthy relationships with friends and family. Also gained custody of my oldest son after 2 1/2 years!! My service work is helping others in Oxford House to the best of my abilities. I will always tell another addict, Oxford House saved my life!

#### Ashley, Pensacola Alumni

I used to blame everyone, everything, and alcohol for my problems. It was not until I found out alcohol was the solution to my problems and my problem was myself, that I became willing to try living a new way of life. This new way of life is one God had planned, not me. I can assure you, I did not wake up one morning and say to myself, "You know what, I think I'm going to move into an Oxford House. "Sober living was not exactly a dream of mine, nor something I wanted as a part of my story. Unfortunately, due to the disease of alcoholism, it was either try sober living to try to survive; or go back to my apartment and drink myself to oblivion or death. I had lived in sober living throughout the years in multiple for-profit run by private owners. The lack of support and toxic environment in those places is something I wish on no one.



Due to my previous experience in sober living, I had no idea what to expect from Oxford House. To my surprise, it was run like Greek life in college. The organized structure was refreshing! I moved into a new women's house the day it opened and I was part of starting what would later become one of the strongest women's houses in our area. The democratic process made the home something we all had a voice in. The lengths of sobriety in our home started stacking up to where the majority of the home consisted of what Oxford House considers, "core members." We turned our house into a home. I learned many important life skills and lessons in Oxford House that I will carry with me moving forward in life. I learned that the rules and contracts of the house are not punishment and are meant to help us grow. The rule of going to meetings I had to learn, was also not a punishment or a chore. This rule meeting attendance got me into a habit and kept me involved in AA. Then, I got into working the steps. By working the steps, I stopped being such a controlling and selfish piece of \$h!t; and learned to take my own inventory before taking others. I also learned discipline, consistency, and focus. Before Oxford House, I did not know how to keep commitments and a routine; and all I did was come home after work and drink.

I did not come to Oxford House to make friends. Throughout the eleven months I lived there, I did leave with whom I hope will be life-long friends. I did not have many friends left due to my drinking, let alone women friends. Today, I have some of the most amazing and strong women in my life and that is because of the Oxford House. These women support me throughout my journey and I have self-forgiveness, respect, and truly trust in this process. It is very easy to get caught up in the chaos of so many people's lives when you live with eleven other people. The only piece of advice I can give is to be the friend you want to have. Before Oxford House, I was not a good friend. However, at the end of the day, the choice is ours. We can be the message of hope in our homes or be part of the chaos. Who do we want to be?



"I am a grateful, recovering alcoholic, and how I've made it this far is through God, Alcoholics Anonymous, and the Oxford House."

Jessica, Fort Myers Alumni

## UNITY, EVENTS, AND FUNDRAISERS

Oxford House in Florida recently hosted Sober Rocktober, a stirring event featuring Colichee, a musician in recovery who is spreading a message of hope through his music. Renowned for his powerful track "Drug Addiction," Colichee's performance resonated deeply with attendees. The event, organized by the Housing Service Committee, served as an inspiring fundraiser, drawing support from individuals across the state. Sober Rocktober exemplified the strength of community and the transformative power of music in the journey of recovery







Chapter 8 hosted a bowling event after their chapter meeting to work on getting more involvement during the chapter meeting.







The Housing Service Committee in Chapters 4 & 19 had an amazing

A couple of areas hosted a pie your outreach & alumni in the face to help raise money. As well as outside movie night. This brought a lot of laughter and fun for all!



Florida loves Christmas we also know holidays are a tough time of year for a lot, so we celebrate together. Areas hosted Christmas Tree and Door decorating contests all through the state.



The Spooky Sober Scramble golf tournament was hosted in Tampa in partnership with The Phoenix. This was a free event with food, prizes, costume contests, and raffles.

## **REGIONAL WORKSHOPS**



In our ongoing efforts to expand and strengthen Oxford House in Florida, we recently organized regional workshops across the state. These workshops served as invaluable opportunities to educate our members on the Oxford House model, fostering a deeper understanding of our mission and principles. Through engaging activities, informative sessions, and vibrant fellowship, attendees not only learned but also connected with fellow members. The gatherings were filled with fun, food, and camaraderie, enhancing the sense of community within Oxford House. Our goal is to make these workshops an annual tradition, ensuring continuous growth and development within the Florida chapters, thereby solidifying our foundation and empowering individuals in their recovery journeys.

# **RE-ENTRY SPOTLIGHT**

Last year in Florida, 7% of our residents reported coming to us directly from incarceration. This year we are already averaging 36 new reentry members per month, and we only expect that number to go up. To help ensure the success of reducing recidivism, Oxford House, Inc. staff have been traveling to correctional institutions throughout the state to spread the word at reentry seminars and networking events with other professionals in the field. We have also been in contact with the Florida Department of Corrections to find ways we can work together to streamline the process. Reentry members are already accustomed to living in group settings, keeping their areas clean, and structured, and respecting boundaries. These qualities, coupled with the fact that they have built up some time in sobriety, help them to be successful in our houses. Oxford House currently has one Reentry coordinator with plans to add another very soon. Here are a few of our success stories we have witnessed firsthand and they are still going strong.



My true start to my Recovery was in jail, facing a year in prison due to possession charges. I had been white knuckle'n my sobriety for about two and a half years. That being said, I was still hanging around people and places I shouldn't have been. This is what led to my possession charges. Since I found myself in jail, I decided to use it to my benefit by being sentenced to a recovery program called the S.M.A.R.T Program.

When I was released after completing the program on April 2, 2023, I moved into Oxford House Seahorse. After being in the house for two weeks, I took over the comptroller position. After about two months, I wanted to do more. I took on the Re-Entry position for chapter 12. All the while, I have worked with those who run the S.M.A.R.T program and taken meetings into Epic Recovery to share my experience with others transitioning to a life of recovery and growth.



~James, Palm Coast

In 2016 when I lost my kids to the state, I hit my bottom. When this event happened I lost myself and got hooked on drugs and drank more and more. Those decisions lead to a lot of jail time. I started to use meth and heroin more, to kill the pain but it didn't work. I sobered up at one of my stays in jail and got right back out and started it all over again. I started selling to support my habit and ended up in prison in 2019 for 48 months. Even in prison, I still couldn't stop. At this point, my children thought I had been dead for the last 3yrs. Upon release from prison, I reached out to a friend who lives in Oxford House Amberjack and she told me all about it.





#### CECIL CAPE CORAL

That day I picked up the phone, called, and got an interview and they accepted me. Feb 11, 2023, was the day my life changed for the better and I had hope. I now have a relationship with my children, and I can keep a real job today. Without Oxford House, accountability, and fellowship, I most likely would be dead or on my way back to prison. I am forever grateful for this opportunity so I chose to go into rehabs and share with them that they have the same choice as I did, to do something different so that maybe they can change their life the way I was able to with the help of Oxford House. I love telling everyone about this organization.



Heaven sent me hellbound, and back! My name is Angelica Green. I have struggled with a 13-year pain pill, methamphetamines, and fentanyl addiction intravenously! This led to hospitalization and incarceration on and off from 2013 to 2022. Homelessness for three-plus years losing my family and almost myself! Once I admitted I was powerless over my addiction I needed God to help me, he guided me to recovery where I opened my mind up to suggestions going from incarceration to residential and then PHP at Banyan Behavioral Center because I do have a dual diagnosis.

This led me to Oxford House Endless Summer where I was welcomed with open arms! Since entering the home I've not only regained my worth, but my relationship with God has grown so deep. The bond within the house of women I live with is amazing. I've been able to receive employment at Publix as a cake decorator in the bakery! I've received my license back! But the one gift that God has given me that is the best out of all is having conversations with my 15-year-old son whom I was absent from for 12 years! My God guided me to The Recovery Center and OH and I am blessed and thankful to be alive!! I'm coming up on a year on May 15th of 2024 and my knowledge experience and compassion are just growing as the days go on!! I am blessed to be a part of Oxford House, and blessed to be given another chance!



Angelica, West Palm

I'm Diana, the House President here at Oxford House Mermaid Cove. June 2023 marked a turning point in my life, as I entered Oxford House after incarceration in the county jail. Stepping into recovery was a momentous decision, and it's been a journey filled with both challenges and triumphs. One year ago, I embarked on my first attempt at getting sober, and I'm incredibly proud to say that on March 23rd, I'll be celebrating one year clean!







This milestone wouldn't have been possible without the unwavering support of the Oxford House community. Here, I found not just a safe space but also a purpose. Beyond my role as House President, I actively serve as the Re-Entry Chair for Chapter 19. This allows me to give back to the community and support others navigating the re-entry process, sharing the lessons I've learned along the way. Outside of Oxford House, I cherish spending time with my daughter, our bond being a constant source of strength. I also enjoy exploring new experiences while staying sober, often accompanied by my supportive boyfriend.

"My journey through recovery is a testament to the power of resilience and the transformative impact of strong support systems. I'm incredibly grateful for the opportunities and connections I've found at Oxford House, and I'm excited to continue contributing to this amazing community."

Diana G., Fort Myers Chapter 19

## REUNIFICATION SPOTLIGHTS Beach

Reuniting parents with their children is important to Oxford House, which provides specialized homes for women and children as well as men and children. These homes offer a supportive setting for parents to mend bonds with their children during recovery. Here, parents receive guidance and accountability to strengthen these relationships while focusing on their own sobriety. Prioritizing family reunification alongside recovery empowers parents to create stable and loving environments, nurturing healing and growth for the whole family.



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## Michael & Zane

I Have been a part of Oxford House Waltham since May of 2023. In the time I have been here Oxford House has been a huge part of why my life is as good as it is now. During this time one of the biggest parts of my life that has been recovered is the restoration of my family. I have a 25-year-old daughter, a 24year-old son, and a 5-year-old son. Along this journey last year I became a full-time single parent of my 5 year old unexpectedly.

Oxford House Chapter 2 Pensacola made it possible for me and my son Zane to stay living at Oxford House Waltham by voting unanimously to make our house the first daddy and me house in Chapter 2. I am forever thankful for this because it has allowed mine and Zanes transition in the time very easy and helped me to manage both of our lives with ease.

#### **Kortnie Clark**



My name is Kortnie and I am an addict; although up until recently I could never admit that to myself let alone anyone else. I have struggled with addiction for the majority of my adult life. In 2003 I was diagnosed with a debilitating disease for which I was prescribed narcotic medication. The recovery process was a long and painful one, but over the course of months, I did recover. Unfortunately, depression began to spiral out of control as did my addiction.

In the years to follow I would have periods of sobriety and in 2014 my incredibly beautiful son JJ was born. My miracle baby. As amazing as it was to be a mother, such a gift from God, I struggled with postpartum depression. I was given opiates after labor and I relapsed shortly thereafter.

I struggled in silence to get clean. His father and I had been together for 20 years and although we loved each other very much, our relationship became very toxic. My son always had everything he needed and wanted, but looking back now he didn't have the thing he needed the most; a sober mother. On 8/30/2020, our son was removed from us by DCF, and although that should have been enough to keep me clean, it simply wasn't. On 10/29/2021 I entered treatment. I was lost, I was broken, but most of all I was sick and tired of living the way I had been living. I never looked back. I left everything behind including my son's father and the life we had built together. He vowed to get clean while I was in treatment but he really struggled and ultimately he lost his life to this disease. I was in treatment for eleven months and while I was there I discovered Oxford House for women and children. I knew it was the key to reunification with my son. On 4/12/2023, after two and a half years, I was reunified in court with my son. I never stopped fighting for him or for myself because he's worth it and so am I. He moved out of foster care and into Oxford House to live with me for good. Oxford House gave me the chance to mend the relationship between my son and me. We are now able to build a life together surrounded by an amazing support system of people. I wake up with a grateful heart today because of how far I've come and I look forward to each day not with fear, but with hope.



Growing up I had a pretty good childhood for the most part but addiction struck around the age of 13. I dealt with the use of alcohol and drugs, jail, DCF, and plenty of other childhood dysfunctions that led to me being unstable mentally and spiritually. In the spring of 2021, I had been in a car wreck that winter, and coming up on my year of sobriety I relapsed after not working a program. I was at the bottom and searched to find a way to overcome so I reached out to every program I could find and that brought me to Addie Rawls now known as SMA Healthcare in Ocala. At the time, I allowed my mother to take my oldest daughter to NC, my son was with his dad, and my youngest two girls were with their dad as well. Upon completion of my program I heard of a house that would allow me to bring my two youngest girls and myself to work a program, keep my sponsor that I acquired in treatment, and build a life again. I have been in Oxford House ever since. (continue on next page)

October 27, 2021, was the day I started my journey with Oxford House. I have been blessed to mentor women and become house secretary, treasurer, comptroller, and president. I also help our area by doing chapter treasurer and secretary, and then on to my current position as well as state comptroller. This journey with Oxford House has led me to be the woman, mother, employee, boss (at my job), sponsor and sponsee, daughter, and sister I had dreamed of but could not attain from the desires of my past. The willingness to confront this disease and work a program every day has allowed me to become the woman I am today. Oxford House has grown over the two years I have been here and I have as well. I still have the same sponsor Erin, who is gentle and direct all in the same. She has given me insight and much inspiration over the years.

"I carry the message to women in Oxford House and to others who are looking for their way on this journey. We all fall short but these doors here have been opened to help the best of us. I have had the pleasure of assisting my outreach worker (Lacie Campbell) and become the best of friends throughout this. I am appreciative most of all that my children get to see the best part of me, SOBER!"

Brittany, Ocala

My name is Michelle W. I'm a mom, a daughter, a veteran, and a sister. I have a great job that I love and friends who care for me. I'm also an addict. I had a good life. Grew up with a good family. I traveled the US and the world as both a Navy brat and when I joined the Navy. I had great friends and a career in nursing that I loved. Life was good until it wasn't. An injury on the job introduced me to pain meds and it wasn't long before I was fully addicted. I managed my life for a while, or so I thought. But eventually, the craving and addiction took over my life. I went to rehab more than once, lost my career and my marriage, and eventually started getting into trouble with the law. Nothing seemed to help me to get my life back on track.



Michelle W., Jacksonville

On February 15, 2018, I was going to court for my latest legal problems related to my drug use. It was also my son's 8th birthday and the first day of a minimal 90-day stay in an inpatient rehab. To say the least, it was a very bad day. Rehab taught me a lot, but it didn't teach me to be ready to surrender. I spent a little over two years away from home, from my son and family, still using drugs. I thought I was in a healthy relationship with an alcoholic, but it was just a toxic, codependent mess. Finally, though, I had enough. I went to the local VA physically, mentally, and emotionally sick. I was done. About a month later I found Oxford House and interviewed at Jaguar House. I was accepted and moved in on April 16, 2021.

I've been in Oxford House Jaguar for almost three years, and it has been life-changing. I have a relationship with my family again. I see my son (now 14 years old) every single day. I get promotions and am trusted at work. I have a car payment. I'm learning to be a better person because of Oxford House. Oxford House demands that I at least try to do my best. It's ok if I make mistakes. We are there to learn together. I wouldn't be the person I am today without Oxford House and it would take more than this short article to share all the ways living in Oxford House has changed my life for the better. There's a special kind of magic in Oxford House and I've been blessed to have been a part of that magic.

### SOBRIETY CELEBRATIONS

We want to recognize and celebrate members in Florida who still live in our homes with over a year of sobriety, showing dedication and resilience in their recovery. Their commitment to sobriety and support enriches our Oxford House family as we continue to grow and thrive. Look at all this recovery time!!!

#### Chapter 1

Chasity Acevedo 4/15/23 Priscilla Ortiz 4/22/23 Mark Kidwell 8/16/19 Andrey Lesyuk 10/14/22 Mike Malinowski 2/27/22

#### Chapter 6

Phil Green 4/24/23 Scott Gardner 4/15/23 John Love 2/1/23 Rick Johnson 1/5/21 Sam Sonnenberg12/12/22 Joe Foster 2/25/23 Travis Johnson 11/1/22 Kortnie Clark 10/30/21 Trudy Garcia 8/13/20 Michelle Lucas 11/19/21 **Ricky Riley 12/6/22** Robert Holman 2/21/18 Juan Gonzalez Jr. 12/28/21 Kaleb Semon 7/24/22 Justin Pisklo 11/18/20 Mark Holman 2/28/23 Tamitra Quiles 7/19/22 Phil Cannizzaro 4/25/96

#### Chapter 14

Jesse Dupre 03/08/23 Tiffany Dove 04/11/20 Christi Taylor 04/11/22 Joshua Herrington 06/18/22 Karianne Keller 1/8/23 Matt Lindsey 05/20/22 Tyler Fragassi 08/10/22 Tye Pettengill 01/28/23 Siobhan Herlihy 01/28/23 Meagan Schrenk 2/18/22 Nancy Thompson 04/01/22 Amanda Smyth 03/17/22 (Alumni) Denise Bell 04/14/21 (Alumni)

#### Chapter 19

Hiedi White 7/22/22 Samantha Reyes 3/10/23 Jon Herrera 7/16/22 Sarah Rutledge 3/30/23 Diana Gonzalez 3/23/23 Audrey Devis 11/2/22 Joe Allen 10/29/86 Henry King Jr. 3/1/22 Eugene Welch 7/7/21 Edgar Morales 6/26/21

#### Chapter 2

Robert Vieceli 01/11/23 Amir King 03/01/2023 Michael Scott 10/03/22 Tabitha Williams 03/19/23 james Reyes 11/11/22 Jeremy Theall 04/21/21 Samantha Wilson 07/24/2022 Michael Bosinger 03/02/23 Carrie Rausch 03/02/22 James Scoggins 09/03/22 Joy Nazary 02/23/21

#### Chapter 7

Greg Hurd 04/07/23 Maria Aybar 04/17/22 Nicole Rowe- 04/10/22 Michelle Bell 09/16/18 Jimmy C 08/07/20 David R 11/14/22 Edward E 09/08/21 Phillip Barfied 01/28/23 Clifton B 05/26/21 Marguise W 12/17/19 Kevin T 9/22/22 Brandon P 01/13/23

#### Chapter 15

Aaron Willis 12/28/22 Miranda Arocho 10/10/22 Victoria Depriest 2/23/23 Roger Berry 7/15/22 Whitney Swick 8/8/21 Paige Ryan 2/21/23 Brittany Smith 7/11/21 Amber Merced 10/23/22

Chapter 20 Eric Thomas 1/18/23

Ray Luera 8/7/22 Alfonzo Perez 1/3/23 Thomas Garver 1/9/23 Anthony Mackin 12/26/22Kris Thompson 12/26/22 Harland Griffith 1/3/23 JR Sousa 1/21/22 Terry Mashburn 12/28/22 Lindsey Bates 11/4/22 Valerie Logan 9/27/22

#### Chapter 3

Rick Walker 12/7/21 Jason Shuman 6/1/22 Jourdan Jones 4/7/22 Lake Beebe 11/27/22 Eric Galbreath 2/1/22 Dillon Hadley 3/1/23 Don Smith 12/15/22 Sam Myric 7/9/22 Brian svindland 7/5/22 James White 6/15/21 Trevor Swartzman 3/27/23 Brad Watson 4/4/15 Corey Squires 4/6/22 Chris LaBelle 2/19/23 Raymond leamon 11/02/20 Russell Stanley 01/09/23 Jeff Jowers 12/10/21 Bobby Durrance 07/03/22 Tim Gabel 01/10/22 Jason Donald 03/20/2023 Dan Cammarata 2/23/22 Abigail Harris 1/22/22 Doreen Howard 3/31/23 Crystal Cromartie 8/23/22 Teresa Liles 7/9/23 Allison Johnson 2/19/23

#### Chapter 16

Ramon Calderon 1/25/22 Micheal Miller 2/17/23 Jeanmarie Adams 2/2/22 Michael Barnhurt 2/17/23 Bryce Ormsby 11/23/22 Bill Dodd 6/3/22 Stevo Wilmoth 5/17/22 Jared Edwards 6/23/22 Courtney Basham 1/11/23 Fredrick Hardy 10/10/19 Christopher Monroe 9/20/17 Cory Mace 9/17/21 Pooh Jones 3/14/22 Alexander Wells 6/2/21 Charles Julian 8/3/20 Angela Graflage 3/1/23 Angela Halcomb 9/11/21

#### Chapter 21

Christine Dubois 11/17/21 Catie Oneill 6/30/22 David Hammonds 11/16/22 Amy Skinner 10/07/22 Holly Jones 2/6/22 Shelly Roath 11/21/22 Summer Stockton 12/4/22 Amanda Bushong 11/19/19 Edyn Quijada 3/13/2023

Chapters 4 & 25 Sierra Peterson 1/23/23 Dom Titara 6/27/21 Al Eisenmann 1/26/23 Rob Jahn 2/12/23 Cecil Serrano 2/12/23 Jeremy Benaitis 1/19/23 Marshall James 5/1/20 Brandon Mensonides 2/21/23 Mel Gordon 11/12/22 Diana Hansen 12/12/22

#### Chapter 8

Laura McClure 12/26/21 Joe Wallis 3/13/22 Cody Lowe 2/25/22 Nathan Johnson 10/27/22 Carolyn Hovey 4/6/21t

#### Chapter 9

Brandon English 11/15/22 Carl Gauck 5/27/22 Jeff Hines 11/15/21 Stephen Weintraut 12/26/21 Kelly West 6/11/21 Ashley Schiro 10/21/22 Larry Finney 1/29/22

#### Chapter 17

Beth Hardie 12/9/21 Christina Martinez 7/28/22 Sandrea Shank 1/9/22 Steve Bosquet 4/24/23 Anthony Thornley 2/5/23 Jennifer Keenan 10/6/22

#### Chapter 22 Joanna Spencer 01/04/23

Chapter 23 Rickey Greene 3/19/19 Eric Layton 10/15/21 John Eldridge 8/8/20 Chase Imbler 4/3/21 Cyrus Hejazimanesh 1/1/23 Rayvon Moore 1/11/21 Justin Cassell 3/11/22 Stephen Price 5/24/21 Mark Skiwurt 2/6/23 Eva Morales 8/15/22

#### **Chapter 5**

Michelle White 4/15/21 Kelly Lewis 12/17/19 Melissa Ellis 5/13/22 Frances Cooksey 12/10/19 Lauren Gallatin 01/06/23 Rebecca Collins 8/29/21 John Goodwin 12/16/22 Jonathan Webb 11/11/22 Caroline J. Schirmer 01/30/23 Jackie Brown 7/10/19 Edward Frances 2/1/21

#### Chapter 12

Edwin May 11/23/20 Chris Childers 6/25/21 Mark Jackson 11/20/22 Lauren Gross 2/16/23 Austin Behne 12/26/21 Lisa Joel 7/7/22

#### Chapter 13

Stephanie Meyer 04/04/21 Megan Pinsker 02/24/23 Amanda Harig 08/10/22 Dawn Fischer 04/20/22 Brianna Brooks 02/16/22 Michael Paulette 04/21/23 Nicole Eagleman 01/30/22 Amy Rivera 07/11/22 LaToya Walker 12/17/22 Rob Knight 12/18/21

#### Chapter 18

Caleb Dunnahoe 12/6/22 Kyle Cox 8/19/11 Josh White 6/28/19 Thomas Aleck 3/10/21 Chris Simmons 12/22/22 Tammy Shelton 1/5/23 Stacy Testerman 4/30/20 Kirston Cunningham 8/18/22 Jazmine Abreu 11/1/21 Kristen Cross 12/2/22 Christiana Griffin 12/2/23 Megan LeBlanc 12/6/22 Chapter 24 Phillip Tietz 6/15/22 Jeffery Bueno 12/19/22 Elizabeth Palmer 8/7/22 Ashley Cocker 3/25/23 Hayley Gibson 10/28/21 Christina Clark 7/12/21 Brittany Townsend 7/12/21 James Donaldson 7/26/20 Crystal Goff 10/6/22 Savannah Harrill 5/9/22

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## **State Attorney Addiction Recovery Task Force**



## ALIGNMENT FOR **PRGRESS**

### THE KENNEDY FORUM

Nikki Soda May 15, 2024









The Kennedy Forum remains steadfast in its commitment to instigate profound and lasting change by ensuring mental health as essential health. In addition to conducting our own deep policy work, we foster multi-stakeholder partnerships that engage government, non-profit organizations, private sector companies and investors, and community organizations.

ALIGNMENT FOR PROGRESS CONFERENCE



# KENNEDY Forum







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### THE TIME TO ACT IS NOW

We find ourselves in a critical moment of need —and of opportunity. In the aftermath of a global pandemic and amid ongoing economic uncertainty, the United States is experiencing an unprecedented mental health and substance use crisis.



## Defining Guideposts to our Goals

Mental Health and Substance Use Disorder Coverage Parity

Coverage parity is the bedrock of our work to ensure mental health and substance use disorder care are accessible and equitable. We engage and convene policymakers, insurance companies, providers, and community members to enforce and expand parity laws, guaranteeing that mental health and substance use disorder care is not a privilege, but a right afforded to all.



ALIGNMENT FOR PROGRESS CONFERENCE





## Our vision: Mental Health as Essential Health

We will achieve our vision by aligning a movement that ensures parity in resources, access, quality, and outcomes.

90% of individuals are screened for mental or substance use disorders, 90% receive the evidence-based services and supports they need, and 90% of those treated can manage their symptoms and achieve recovery



Ensuring sufficient and comprehensive **payment model** that drives these outcomes



Supporting a skilled and inclusive **workforce** equipped to address the needs of diverse communities



ALIGNMENT FOR PROGRESS CONFERENCE

## **Aligning to Ensure:**

### Calling for:

90/90/90 by 2033

### Achieved by:





Adopting a public health approach with a focus on prevention and early intervention

Accelerating innovation to make high-quality care affordable to all







### Alignment for Progress: A National Strategy for Mental Health and Substance Use Disorders

It's time for a meaningful national conversation about mental health and substance use care. We must remove the barriers to equitable and available coverage for these conditions so people can get the help they need.

## The National Strategy

#### NATIONAL STRATEGY RECOMMENDATIONS AREAS OF FOCUS ABOUT THE STRATEGY 🔻





#### **Browse the Featured Recommendations**

**VIEW ALL RECOMMENDATIONS** 

#### PARITY, COVERAGE, & EQUITABLE ACCESS

**!** EMERGENCY & CRISIS RESPONSE

#### Make mobile crisis services mandatory under Medicaid

Congress should make mobile crisis services mandatory under Medicaid. At a minimum, these services should be made a permanent state option available to states eligible for enhanced federal Medicaid match funding.[1]

#### **DIVERSE WORKFORCE**

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The Substance Abuse and Mental Health Services Administration (SAMHSA) should develop culturally competent guidelines for mental health and substance use service providers[1], particularly those serving predominantly underserved communities—particularly Black/African American; Hispanic/Latino; Asian American, Native Hawaiian, and Pacific Islander; American Indian and Alaska Native; lesbian, gay, bisexual, transgender, queer, and intersex(LGBTQI+) communities[2][3]—through inclusive and responsive community engagement.

TOPICS Professional Training 988 System Suicide Prevention



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Making a pledge to "align for progress"

- One sentence organizational goal that highlights how partners are contributing to transforming our country's MH/SUD system of care.
- of organizations across the nation who are committed to change.
- Roughly 100 to date
- We will be asking all participants to make a commitment today!





We are gathering these goals to publicly demonstrate the depth and breadth







## Examples from the 120 commitments to date

## ALIGNMENT FOR **PRGRESS**

### THE KENNEDY FORUM







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Kristina M. Schiller, Director, Digital Marketing & Engagement, Sheppard Pratt KSchiller@sheppardpratt.org



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Megan Pacheco, Executive Director, Challenge Success, mpacheco@challengesuccess.org

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Michael Durchslag, President, Association of Recovery High Schools & Director MTS-P.E.A.S.E. Academy, mdurchslag@emailmtcs.org



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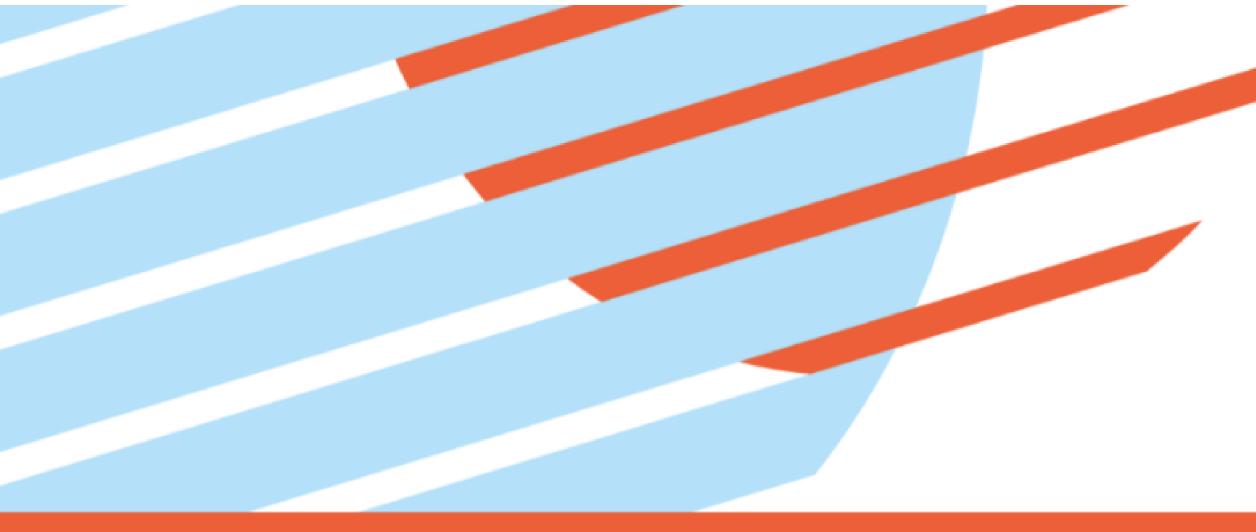
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## **State Attorney Addiction Recovery Task Force**



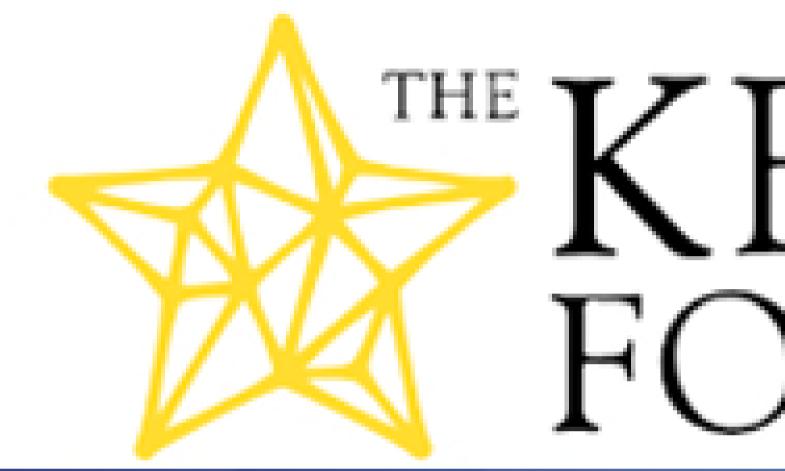
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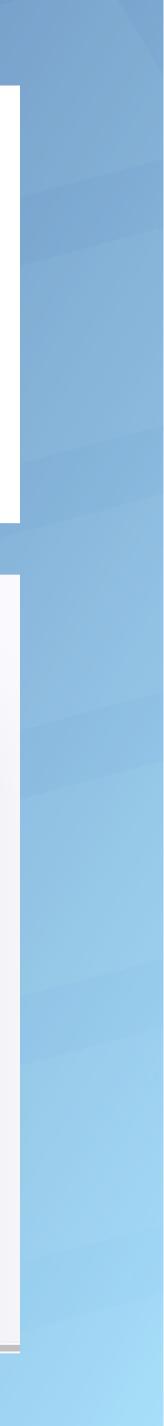
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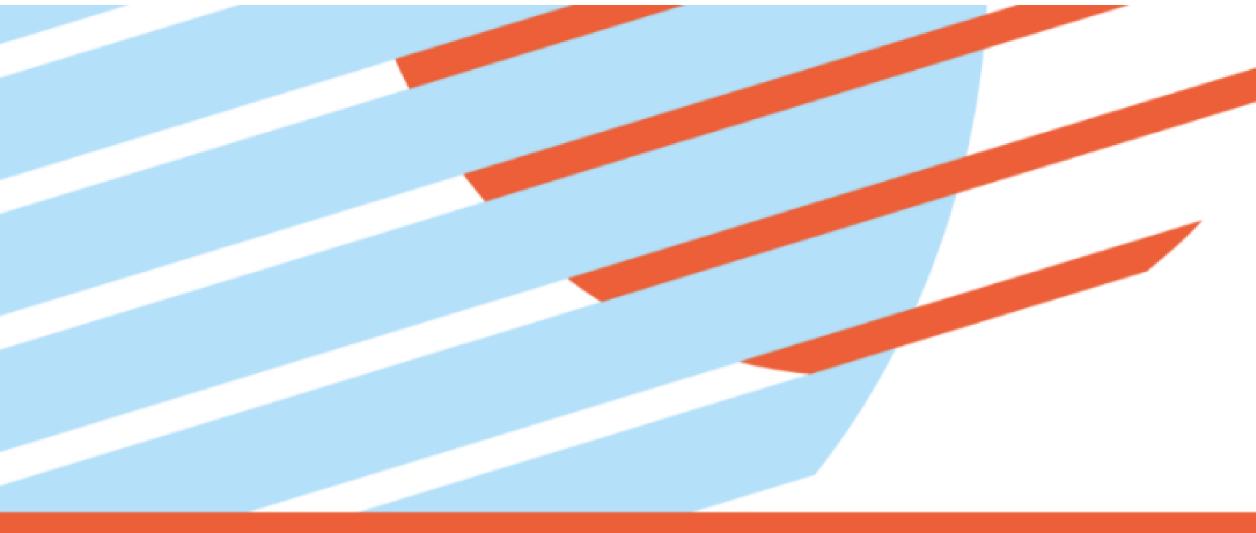


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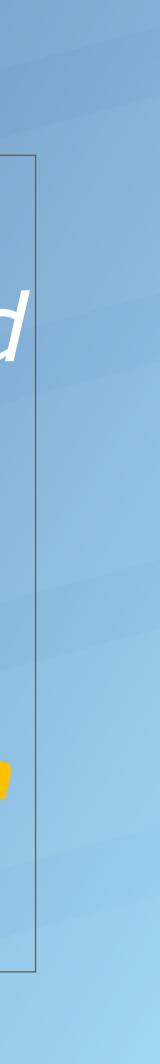
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**U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT** OFFICE OF FAIR HOUSING AND EQUAL OPPORTUNITY



**U.S. DEPARTMENT OF JUSTICE** CIVIL RIGHTS DIVISION

> Washington, D.C. November 10, 2016

#### JOINT STATEMENT OF THE DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT AND THE DEPARTMENT OF JUSTICE

#### STATE AND LOCAL LAND USE LAWS AND PRACTICES AND THE APPLICATION OF THE FAIR HOUSING ACT

#### **INTRODUCTION**

The Department of Justice ("DOJ") and the Department of Housing and Urban Development ("HUD") are jointly responsible for enforcing the Federal Fair Housing Act ("the Act"),<sup>1</sup> which prohibits discrimination in housing on the basis of race, color, religion, sex, disability, familial status (children under 18 living with a parent or guardian), or national origin.<sup>2</sup> The Act prohibits housing-related policies and practices that exclude or otherwise discriminate against individuals because of protected characteristics.

The regulation of land use and zoning is traditionally reserved to state and local governments, except to the extent that it conflicts with requirements imposed by the Fair Housing Act or other federal laws. This Joint Statement provides an overview of the Fair Housing Act's requirements relating to state and local land use practices and zoning laws, including conduct related to group homes. It updates and expands upon DOJ's and HUD's Joint

<sup>&</sup>lt;sup>1</sup> The Fair Housing Act is codified at 42 U.S.C. §§ 3601–19.

<sup>&</sup>lt;sup>2</sup> The Act uses the term "handicap" instead of "disability." Both terms have the same legal meaning. *See Bragdon v. Abbott*, 524 U.S. 624, 631 (1998) (noting that the definition of "disability" in the Americans with Disabilities Act

Statement on Group Homes, Local Land Use, and the Fair Housing Act, issued on August 18, 1999. The first section of the Joint Statement, Questions 1–6, describes generally the Act's requirements as they pertain to land use and zoning. The second and third sections, Questions 7–25, discuss more specifically how the Act applies to land use and zoning laws affecting housing for persons with disabilities, including guidance on regulating group homes and the requirement to provide reasonable accommodations. The fourth section, Questions 26–27, addresses HUD's and DOJ's enforcement of the Act in the land use and zoning context.

This Joint Statement focuses on the Fair Housing Act, not on other federal civil rights laws that prohibit state and local governments from adopting or implementing land use and zoning practices that discriminate based on a protected characteristic, such as Title II of the Americans with Disabilities Act ("ADA"),<sup>3</sup> Section 504 of the Rehabilitation Act of 1973 ("Section 504"),<sup>4</sup> and Title VI of the Civil Rights Act of 1964.<sup>5</sup> In addition, the Joint Statement does not address a state or local government's duty to affirmatively further fair housing, even though state and local governments that receive HUD assistance are subject to this duty. For additional information provided by DOJ and HUD regarding these issues, see the list of resources provided in the answer to Question 27.

#### Questions and Answers on the Fair Housing Act and State and Local Land Use Laws and Zoning

#### 1. How does the Fair Housing Act apply to state and local land use and zoning?

The Fair Housing Act prohibits a broad range of housing practices that discriminate against individuals on the basis of race, color, religion, sex, disability, familial status, or national origin (commonly referred to as protected characteristics). As established by the Supremacy Clause of the U.S. Constitution, federal laws such as the Fair Housing Act take precedence over conflicting state and local laws. The Fair Housing Act thus prohibits state and local land use and zoning laws, policies, and practices that discriminate based on a characteristic protected under the Act. Prohibited practices as defined in the Act include making unavailable or denying housing because of a protected characteristic. Housing includes not only buildings intended for occupancy as residences, but also vacant land that may be developed into residences.

is drawn almost verbatim "from the definition of 'handicap' contained in the Fair Housing Amendments Act of 1988"). This document uses the term "disability," which is more generally accepted.

<sup>&</sup>lt;sup>3</sup> 42 U.S.C. §12132.

<sup>&</sup>lt;sup>4</sup> 29 U.S.C. § 794.

<sup>&</sup>lt;sup>5</sup> 42 U.S.C. § 2000d.

### 2. What types of land use and zoning laws or practices violate the Fair Housing Act?

Examples of state and local land use and zoning laws or practices that may violate the Act include:

- Prohibiting or restricting the development of housing based on the belief that the residents will be members of a particular protected class, such as race, disability, or familial status, by, for example, placing a moratorium on the development of multifamily housing because of concerns that the residents will include members of a particular protected class.
- Imposing restrictions or additional conditions on group housing for persons with disabilities that are not imposed on families or other groups of unrelated individuals, by, for example, requiring an occupancy permit for persons with disabilities to live in a single-family home while not requiring a permit for other residents of single-family homes.
- Imposing restrictions on housing because of alleged public safety concerns that are based on stereotypes about the residents' or anticipated residents' membership in a protected class, by, for example, requiring a proposed development to provide additional security measures based on a belief that persons of a particular protected class are more likely to engage in criminal activity.
- Enforcing otherwise neutral laws or policies differently because of the residents' protected characteristics, by, for example, citing individuals who are members of a particular protected class for violating code requirements for property upkeep while not citing other residents for similar violations.
- Refusing to provide reasonable accommodations to land use or zoning policies when such accommodations may be necessary to allow persons with disabilities to have an equal opportunity to use and enjoy the housing, by, for example, denying a request to modify a setback requirement so an accessible sidewalk or ramp can be provided for one or more persons with mobility disabilities.

# **3.** When does a land use or zoning practice constitute intentional discrimination in violation of the Fair Housing Act?

Intentional discrimination is also referred to as disparate treatment, meaning that the action treats a person or group of persons differently because of race, color, religion, sex, disability, familial status, or national origin. A land use or zoning practice may be intentionally discriminatory even if there is no personal bias or animus on the part of individual government officials. For example, municipal zoning practices or decisions that reflect acquiescence to community bias may be intentionally discriminatory, even if the officials themselves do not personally share such bias. (See Q&A 5.) Intentional discrimination does not require that the

decision-makers were hostile toward members of a particular protected class. Decisions motivated by a purported desire to benefit a particular group can also violate the Act if they result in differential treatment because of a protected characteristic.

A land use or zoning practice may be discriminatory on its face. For example, a law that requires persons with disabilities to request permits to live in single-family zones while not requiring persons without disabilities to request such permits violates the Act because it treats persons with disabilities differently based on their disability. Even a law that is seemingly neutral will still violate the Act if enacted with discriminatory intent. In that instance, the analysis of whether there is intentional discrimination will be based on a variety of factors, all of which need not be satisfied. These factors include, but are not limited to: (1) the "impact" of the municipal practice, such as whether an ordinance disproportionately impacts minority residents compared to white residents or whether the practice perpetuates segregation in a neighborhood or particular geographic area; (2) the "historical background" of the action, such as whether there is a history of segregation or discriminatory conduct by the municipality; (3) the "specific sequence of events," such as whether the city adopted an ordinance or took action only after significant, racially-motivated community opposition to a housing development or changed course after learning that a development would include non-white residents; (4) departures from the "normal procedural sequence," such as whether a municipality deviated from normal application or zoning requirements; (5) "substantive departures," such as whether the factors usually considered important suggest that a state or local government should have reached a different result; and (6) the "legislative or administrative history," such as any statements by members of the state or local decision-making body.<sup>6</sup>

### 4. Can state and local land use and zoning laws or practices violate the Fair Housing Act if the state or locality did not intend to discriminate against persons on a prohibited basis?

Yes. Even absent a discriminatory intent, state or local governments may be liable under the Act for any land use or zoning law or practice that has an unjustified discriminatory effect because of a protected characteristic. In 2015, the United States Supreme Court affirmed this interpretation of the Act in *Texas Department of Housing and Community Affairs v. Inclusive Communities Project, Inc.*<sup>7</sup> The Court stated that "[t]hese unlawful practices include zoning laws and other housing restrictions that function unfairly to exclude minorities from certain neighborhoods without any sufficient justification."<sup>8</sup>

<sup>&</sup>lt;sup>6</sup> Vill. of Arlington Heights v. Metro. Hous. Dev. Corp., 429 U.S. 252, 265–68 (1977).

<sup>&</sup>lt;sup>7</sup> \_\_\_\_ U.S. \_\_\_\_, 135 S. Ct. 2507 (2015).

 $<sup>^{8}</sup>$  *Id.* at 2521–22.

A land use or zoning practice results in a discriminatory effect if it caused or predictably will cause a disparate impact on a group of persons or if it creates, increases, reinforces, or perpetuates segregated housing patterns because of a protected characteristic. A state or local government still has the opportunity to show that the practice is necessary to achieve one or more of its substantial, legitimate, nondiscriminatory interests. These interests must be supported by evidence and may not be hypothetical or speculative. If these interests could not be served by another practice that has a less discriminatory effect, then the practice does not violate the Act. The standard for evaluating housing-related practices with a discriminatory effect are set forth in HUD's Discriminatory Effects Rule, 24 C.F.R § 100.500.

Examples of land use practices that violate the Fair Housing Act under a discriminatory effects standard include minimum floor space or lot size requirements that increase the size and cost of housing if such an increase has the effect of excluding persons from a locality or neighborhood because of their membership in a protected class, without a legally sufficient justification. Similarly, prohibiting low-income or multifamily housing may have a discriminatory effect on persons because of their membership in a protected class and, if so, would violate the Act absent a legally sufficient justification.

# 5. Does a state or local government violate the Fair Housing Act if it considers the fears or prejudices of community members when enacting or applying its zoning or land use laws respecting housing?

When enacting or applying zoning or land use laws, state and local governments may not act because of the fears, prejudices, stereotypes, or unsubstantiated assumptions that community members may have about current or prospective residents because of the residents' protected characteristics. Doing so violates the Act, even if the officials themselves do not personally share such bias. For example, a city may not deny zoning approval for a low-income housing development that meets all zoning and land use requirements because the development may house residents of a particular protected class or classes whose presence, the community fears, will increase crime and lower property values in the surrounding neighborhood. Similarly, a local government may not block a group home or deny a requested reasonable accommodation in response to neighbors' stereotypical fears or prejudices about persons with disabilities or a particular type of disability. Of course, a city council or zoning board is not bound by everything that is said by every person who speaks at a public hearing. It is the record as a whole that will be determinative.

# 6. Can state and local governments violate the Fair Housing Act if they adopt or implement restrictions against children?

Yes. State and local governments may not impose restrictions on where families with children may reside unless the restrictions are consistent with the "housing for older persons" exemption of the Act. The most common types of housing for older persons that may qualify for this exemption are: (1) housing intended for, and solely occupied by, persons 62 years of age or older; and (2) housing in which 80% of the occupied units have at least one person who is 55 years of age or older that publishes and adheres to policies and procedures demonstrating the intent to house older persons. These types of housing must meet all requirements of the exemption, including complying with HUD regulations applicable to such housing, such as verification procedures regarding the age of the occupants. A state or local government that zones an area to exclude families with children under 18 years of age must continually ensure that housing in that zone meets all requirements of the exemption. If all of the housing in that zone does not continue to meet all such requirements, that state or local government violates the Act.

### Questions and Answers on the Fair Housing Act and Local Land Use and Zoning Regulation of Group Homes

### 7. Who qualifies as a person with a disability under the Fair Housing Act?

The Fair Housing Act defines a person with a disability to include (1) individuals with a physical or mental impairment that substantially limits one or more major life activities; (2) individuals who are regarded as having such an impairment; and (3) individuals with a record of such an impairment.

The term "physical or mental impairment" includes, but is not limited to, diseases and conditions such as orthopedic, visual, speech and hearing impairments, cerebral palsy, autism, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes, HIV infection, developmental disabilities, mental illness, drug addiction (other than addiction caused by current, illegal use of a controlled substance), and alcoholism.

The term "major life activity" includes activities such as seeing, hearing, walking breathing, performing manual tasks, caring for one's self, learning, speaking, and working. This list of major life activities is not exhaustive.

Being regarded as having a disability means that the individual is treated as if he or she has a disability even though the individual may not have an impairment or may not have an impairment that substantially limits one or more major life activities. For example, if a landlord refuses to rent to a person because the landlord believes the prospective tenant has a disability, then the landlord violates the Act's prohibition on discrimination on the basis of disability, even if the prospective tenant does not actually have a physical or mental impairment that substantially limits one or more major life activities.

Having a record of a disability means the individual has a history of, or has been misclassified as having, a mental or physical impairment that substantially limits one or more major life activities.

### 8. What is a group home within the meaning of the Fair Housing Act?

The term "group home" does not have a specific legal meaning; land use and zoning officials and the courts, however, have referred to some residences for persons with disabilities as group homes. The Fair Housing Act prohibits discrimination on the basis of disability, and persons with disabilities have the same Fair Housing Act protections whether or not their housing is considered a group home. A household where two or more persons with disabilities choose to live together, as a matter of association, may not be subjected to requirements or conditions that are not imposed on households consisting of persons without disabilities.

In this Statement, the term "group home" refers to a dwelling that is or will be occupied by unrelated persons with disabilities. Sometimes group homes serve individuals with a particular type of disability, and sometimes they serve individuals with a variety of disabilities. Some group homes provide residents with in-home support services of varying types, while others do not. The provision of support services is not required for a group home to be protected under the Fair Housing Act. Group homes, as discussed in this Statement, may be opened by individuals or by organizations, both for-profit and not-for-profit. Sometimes it is the group home operator or developer, rather than the individuals who live or are expected to live in the home, who interacts with a state or local government agency about developing or operating the group home, and sometimes there is no interaction among residents or operators and state or local governments.

In this Statement, the term "group home" includes homes occupied by persons in recovery from alcohol or substance abuse, who are persons with disabilities under the Act. Although a group home for persons in recovery may commonly be called a "sober home," the term does not have a specific legal meaning, and the Act treats persons with disabilities who reside in such homes no differently than persons with disabilities who reside in other types of group homes. Like other group homes, homes for persons in recovery are sometimes operated by individuals or organizations, both for-profit and not-for-profit, and support services or supervision are sometimes, but not always, provided. The Act does not require a person who resides in a home for persons in recovery to have participated in or be currently participating in a

substance abuse treatment program to be considered a person with a disability. The fact that a resident of a group home may currently be illegally using a controlled substance does not deprive the other residents of the protection of the Fair Housing Act.

### 9. In what ways does the Fair Housing Act apply to group homes?

The Fair Housing Act prohibits discrimination on the basis of disability, and persons with disabilities have the same Fair Housing Act protections whether or not their housing is considered a group home. State and local governments may not discriminate against persons with disabilities who live in group homes. Persons with disabilities who live in or seek to live in group homes are sometimes subjected to unlawful discrimination in a number of ways, including those discussed in the preceding Section of this Joint Statement. Discrimination may be intentional; for example, a locality might pass an ordinance prohibiting group homes in singlefamily neighborhoods or prohibiting group homes for persons with certain disabilities. These ordinances are facially discriminatory, in violation of the Act. In addition, as discussed more fully in Q&A 10 below, a state or local government may violate the Act by refusing to grant a reasonable accommodation to its zoning or land use ordinance when the requested accommodation may be necessary for persons with disabilities to have an equal opportunity to use and enjoy a dwelling. For example, if a locality refuses to waive an ordinance that limits the number of unrelated persons who may live in a single-family home where such a waiver may be necessary for persons with disabilities to have an equal opportunity to use and enjoy a dwelling, the locality violates the Act unless the locality can prove that the waiver would impose an undue financial and administrative burden on the local government or fundamentally alter the essential nature of the locality's zoning scheme. Furthermore, a state or local government may violate the Act by enacting an ordinance that has an unjustified discriminatory effect on persons with disabilities who seek to live in a group home in the community. Unlawful actions concerning group homes are discussed in more detail throughout this Statement.

### 10. What is a reasonable accommodation under the Fair Housing Act?

The Fair Housing Act makes it unlawful to refuse to make "reasonable accommodations" to rules, policies, practices, or services, when such accommodations may be necessary to afford persons with disabilities an equal opportunity to use and enjoy a dwelling. A "reasonable accommodation" is a change, exception, or adjustment to a rule, policy, practice, or service that may be necessary for a person with a disability to have an equal opportunity to use and enjoy a dwelling, including public and common use spaces. Since rules, policies, practices, and services may have a different effect on persons with disabilities than on other persons, treating persons with disabilities exactly the same as others may sometimes deny them an equal opportunity to use and enjoy a dwelling.

Even if a zoning ordinance imposes on group homes the same restrictions that it imposes on housing for other groups of unrelated persons, a local government may be required, in individual cases and when requested to do so, to grant a reasonable accommodation to a group home for persons with disabilities. What constitutes a reasonable accommodation is a case-bycase determination based on an individualized assessment. This topic is discussed in detail in Q&As 20–25 and in the HUD/DOJ Joint Statement on Reasonable Accommodations under the Fair Housing Act.

# **11.** Does the Fair Housing Act protect persons with disabilities who pose a "direct threat" to others?

The Act does not allow for the exclusion of individuals based upon fear, speculation, or stereotype about a particular disability or persons with disabilities in general. Nevertheless, the Act does not protect an individual whose tenancy would constitute a "direct threat" to the health or safety of other individuals or whose tenancy would result in substantial physical damage to the property of others unless the threat or risk to property can be eliminated or significantly reduced by reasonable accommodation. A determination that an individual poses a direct threat must rely on an individualized assessment that is based on reliable objective evidence (for example, current conduct or a recent history of overt acts). The assessment must consider: (1) the nature, duration, and severity of the risk of injury; (2) the probability that injury will actually occur; and (3) whether there are any reasonable accommodations that will eliminate or significantly reduce the direct threat. See Q&A 10 for a general discussion of reasonable accommodations. Consequently, in evaluating an individual's recent history of overt acts, a state or local government must take into account whether the individual has received intervening treatment or medication that has eliminated or significantly reduced the direct threat (in other words, significant risk of substantial harm). In such a situation, the state or local government may request that the individual show how the circumstances have changed so that he or she no longer poses a direct threat. Any such request must be reasonable and limited to information necessary to assess whether circumstances have changed. Additionally, in such a situation, a state or local government may obtain satisfactory and reasonable assurances that the individual will not pose a direct threat during the tenancy. The state or local government must have reliable, objective evidence that the tenancy of a person with a disability poses a direct threat before excluding him or her from housing on that basis, and, in making that assessment, the state or local government may not ignore evidence showing that the individual's tenancy would no longer pose a direct threat. Moreover, the fact that one individual may pose a direct threat does not mean that another individual with the same disability or other individuals in a group home may be denied housing.

# **12.** Can a state or local government enact laws that specifically limit group homes for individuals with specific types of disabilities?

No. Just as it would be illegal to enact a law for the purpose of excluding or limiting group homes for individuals with disabilities, it is illegal under the Act for local land use and zoning laws to exclude or limit group homes for individuals with specific types of disabilities. For example, a government may not limit group homes for persons with mental illness to certain neighborhoods. The fact that the state or local government complies with the Act with regard to group homes for persons with some types of disabilities will not justify discrimination against individuals with another type of disability, such as mental illness.

# **13.** Can a state or local government limit the number of individuals who reside in a group home in a residential neighborhood?

Neutral laws that govern groups of unrelated persons who live together do not violate the Act so long as (1) those laws do not intentionally discriminate against persons on the basis of disability (or other protected class), (2) those laws do not have an unjustified discriminatory effect on the basis of disability (or other protected class), and (3) state and local governments make reasonable accommodations when such accommodations may be necessary for a person with a disability to have an equal opportunity to use and enjoy a dwelling.

Local zoning and land use laws that treat groups of unrelated persons with disabilities less favorably than similar groups of unrelated persons without disabilities violate the Fair Housing Act. For example, suppose a city's zoning ordinance defines a "family" to include up to a certain number of unrelated persons living together as a household unit, and gives such a group of unrelated persons the right to live in any zoning district without special permission from the city. If that ordinance also prohibits a group home having the same number of persons with disabilities in a certain district or requires it to seek a use permit, the ordinance would violate the Fair Housing Act. The ordinance violates the Act because it treats persons with disabilities less favorably than families and unrelated persons without disabilities.

A local government may generally restrict the ability of groups of unrelated persons to live together without violating the Act as long as the restrictions are imposed on all such groups, including a group defined as a family. Thus, if the definition of a family includes up to a certain number of unrelated individuals, an ordinance would not, on its face, violate the Act if a group home for persons with disabilities with more than the permitted number for a family were not allowed to locate in a single-family-zoned neighborhood because any group of unrelated people without disabilities of that number would also be disallowed. A facially neutral ordinance, however, still may violate the Act if it is intentionally discriminatory (that is, enacted with discriminatory intent or applied in a discriminatory manner), or if it has an unjustified discriminatory effect on persons with disabilities. For example, an ordinance that limits the number of unrelated persons who may constitute a family may violate the Act if it is enacted for the purpose of limiting the number of persons with disabilities who may live in a group home, or if it has the unjustified discriminatory effect of excluding or limiting group homes in the jurisdiction. Governments may also violate the Act if they enforce such restrictions more strictly against group homes than against groups of the same number of unrelated persons without disabilities who live together in housing. In addition, as discussed in detail below, because the Act prohibits the denial of reasonable accommodations to rules and policies for persons with disabilities that exceeds the number allowed under the family definition has the right to seek an exception or waiver. If the criteria for a reasonable accommodation are met, the permit must be given in that instance, but the ordinance would not be invalid.<sup>9</sup>

### 14. How does the Supreme Court's ruling in *Olmstead* apply to the Fair Housing Act?

In *Olmstead v. L.C.*,<sup>10</sup> the Supreme Court ruled that the Americans with Disabilities Act (ADA) prohibits the unjustified segregation of persons with disabilities in institutional settings where necessary services could reasonably be provided in integrated, community-based settings. An integrated setting is one that enables individuals with disabilities to live and interact with individuals without disabilities to the fullest extent possible. By contrast, a segregated setting includes congregate settings populated exclusively or primarily by individuals with disabilities. Although Olmstead did not interpret the Fair Housing Act, the objectives of the Fair Housing Act and the ADA, as interpreted in Olmstead, are consistent. The Fair Housing Act ensures that persons with disabilities have an equal opportunity to choose the housing where they wish to live. The ADA and *Olmstead* ensure that persons with disabilities also have the option to live and receive services in the most integrated setting appropriate to their needs. The integration mandate of the ADA and *Olmstead* can be implemented without impairing the rights protected by the Fair Housing Act. For example, state and local governments that provide or fund housing, health care, or support services must comply with the integration mandate by providing these programs, services, and activities in the most integrated setting appropriate to the needs of individuals with disabilities. State and local governments may comply with this requirement by adopting standards for the housing, health care, or support services they provide or fund that are reasonable, individualized, and specifically tailored to enable individuals with disabilities to live and interact with individuals without disabilities to the fullest extent possible. Local governments should be aware that ordinances and policies that impose additional restrictions on housing or residential services for persons with disabilities that are not imposed on housing or

<sup>&</sup>lt;sup>9</sup> Laws that limit the number of occupants per unit do not violate the Act as long as they are reasonable, are applied to all occupants, and do not operate to discriminate on the basis of disability, familial status, or other characteristics protected by the Act.

<sup>&</sup>lt;sup>10</sup> 527 U.S. 581 (1999).

residential services for persons without disabilities are likely to violate the Act. In addition, a locality would violate the Act and the integration mandate of the ADA and *Olmstead* if it required group homes to be concentrated in certain areas of the jurisdiction by, for example, restricting them from being located in other areas.

# **15.** Can a state or local government impose spacing requirements on the location of group homes for persons with disabilities?

A "spacing" or "dispersal" requirement generally refers to a requirement that a group home for persons with disabilities must not be located within a specific distance of another group home. Sometimes a spacing requirement is designed so it applies only to group homes and sometimes a spacing requirement is framed more generally and applies to group homes and other types of uses such as boarding houses, student housing, or even certain types of businesses. In a community where a certain number of unrelated persons are permitted by local ordinance to reside together in a home, it would violate the Act for the local ordinance to impose a spacing requirement on group homes that do not exceed that permitted number of residents because the spacing requirement would be a condition imposed on persons with disabilities that is not imposed on persons without disabilities. In situations where a group home seeks a reasonable accommodation to exceed the number of unrelated persons who are permitted by local ordinance to reside together, the Fair Housing Act does not prevent state or local governments from taking into account concerns about the over-concentration of group homes that are located in close proximity to each other. Sometimes compliance with the integration mandate of the ADA and Olmstead requires government agencies responsible for licensing or providing housing for persons with disabilities to consider the location of other group homes when determining what housing will best meet the needs of the persons being served. Some courts, however, have found that spacing requirements violate the Fair Housing Act because they deny persons with disabilities an equal opportunity to choose where they will live. Because an across-the-board spacing requirement may discriminate against persons with disabilities in some residential areas, any standards that state or local governments adopt should evaluate the location of group homes for persons with disabilities on a case-by-case basis.

Where a jurisdiction has imposed a spacing requirement on the location of group homes for persons with disabilities, courts may analyze whether the requirement violates the Act under an intent, effects, or reasonable accommodation theory. In cases alleging intentional discrimination, courts look to a number of factors, including the effect of the requirement on housing for persons with disabilities; the jurisdiction's intent behind the spacing requirement; the existence, size, and location of group homes in a given area; and whether there are methods other than a spacing requirement for accomplishing the jurisdiction's stated purpose. A spacing requirement enacted with discriminatory intent, such as for the purpose of appeasing neighbors' stereotypical fears about living near persons with disabilities, violates the Act. Further, a neutral spacing requirement that applies to all housing for groups of unrelated persons may have an unjustified discriminatory effect on persons with disabilities, thus violating the Act. Jurisdictions must also consider, in compliance with the Act, requests for reasonable accommodations to any spacing requirements.

# 16. Can a state or local government impose health and safety regulations on group home operators?

Operators of group homes for persons with disabilities are subject to applicable state and local regulations addressing health and safety concerns unless those regulations are inconsistent with the Fair Housing Act or other federal law. Licensing and other regulatory requirements that may apply to some group homes must also be consistent with the Fair Housing Act. Such regulations must not be based on stereotypes about persons with disabilities or specific types of disabilities. State or local zoning and land use ordinances may not, consistent with the Fair Housing Act, require individuals with disabilities to receive medical, support, or other services or supervision that they do not need or want as a condition for allowing a group home to operate. State and local governments' enforcement of neutral requirements regarding safety, licensing, and other regulatory requirements governing group homes do not violate the Fair Housing Act so long as the ordinances are enforced in a neutral manner, they do not specifically target group homes, and they do not have an unjustified discriminatory effect on persons with disabilities who wish to reside in group homes.

Governments must also consider requests for reasonable accommodations to licensing and regulatory requirements and procedures, and grant them where they may be necessary to afford individuals with disabilities an equal opportunity to use and enjoy a dwelling, as required by the Act.

# **17.** Can a state or local government address suspected criminal activity or fraud and abuse at group homes for persons with disabilities?

The Fair Housing Act does not prevent state and local governments from taking nondiscriminatory action in response to criminal activity, insurance fraud, Medicaid fraud, neglect or abuse of residents, or other illegal conduct occurring at group homes, including reporting complaints to the appropriate state or federal regulatory agency. States and localities must ensure that actions to enforce criminal or other laws are not taken to target group homes and are applied equally, regardless of whether the residents of housing are persons with disabilities. For example, persons with disabilities residing in group homes are entitled to the same constitutional protections against unreasonable search and seizure as those without disabilities.

# **18.** Does the Fair Housing Act permit a state or local government to implement strategies to integrate group homes for persons with disabilities in particular neighborhoods where they are not currently located?

Yes. Some strategies a state or local government could use to further the integration of group housing for persons with disabilities, consistent with the Act, include affirmative marketing or offering incentives. For example, jurisdictions may engage in affirmative marketing or offer variances to providers of housing for persons with disabilities to locate future homes in neighborhoods where group homes for persons with disabilities are not currently located. But jurisdictions may not offer incentives for a discriminatory purpose or that have an unjustified discriminatory effect because of a protected characteristic.

# **19.** Can a local government consider the fears or prejudices of neighbors in deciding whether a group home can be located in a particular neighborhood?

In the same way a local government would violate the law if it rejected low-income housing in a community because of neighbors' fears that such housing would be occupied by racial minorities (see Q&A 5), a local government violates the law if it blocks a group home or denies a reasonable accommodation request because of neighbors' stereotypical fears or prejudices about persons with disabilities. This is so even if the individual government decision-makers themselves do not have biases against persons with disabilities.

Not all community opposition to requests by group homes is necessarily discriminatory. For example, when a group home seeks a reasonable accommodation to operate in an area and the area has limited on-street parking to serve existing residents, it is not a violation of the Fair Housing Act for neighbors and local government officials to raise concerns that the group home may create more demand for on-street parking than would a typical family and to ask the provider to respond. A valid unaddressed concern about inadequate parking facilities could justify denying the requested accommodation, if a similar dwelling that is not a group home or similarly situated use would ordinarily be denied a permit because of such parking concerns. If, however, the group home shows that the home will not create a need for more parking spaces than other dwellings or similarly-situated uses located nearby, or submits a plan to provide any needed off-street parking, then parking concerns would not support a decision to deny the home a permit.

### Questions and Answers on the Fair Housing Act and Reasonable Accommodation Requests to Local Zoning and Land Use Laws

# **20.** When does a state or local government violate the Fair Housing Act by failing to grant a request for a reasonable accommodation?

A state or local government violates the Fair Housing Act by failing to grant a reasonable accommodation request if (1) the persons requesting the accommodation or, in the case of a group home, persons residing in or expected to reside in the group home are persons with a disability under the Act; (2) the state or local government knows or should reasonably be expected to know of their disabilities; (3) an accommodation in the land use or zoning ordinance or other rules, policies, practices, or services of the state or locality was requested by or on behalf of persons with disabilities; (4) the requested accommodation may be necessary to afford one or more persons with a disability an equal opportunity to use and enjoy the dwelling; (5) the state or local government refused to grant, failed to act on, or unreasonably delayed the accommodation would impose an undue financial and administrative burden on the local government or that it would fundamentally alter the local government's zoning scheme. A requested accommodation may be necessary if there is an identifiable relationship between the requested accommodation and the group home residents' disability. Further information is provided in Q&A 10 above and the HUD/DOJ Joint Statement on Reasonable Accommodations under the Fair Housing Act.

# **21.** Can a local government deny a group home's request for a reasonable accommodation without violating the Fair Housing Act?

Yes, a local government may deny a group home's request for a reasonable accommodation if the request was not made by or on behalf of persons with disabilities (by, for example, the group home developer or operator) or if there is no disability-related need for the requested accommodation because there is no relationship between the requested accommodation and the disabilities of the residents or proposed residents.

In addition, a group home's request for a reasonable accommodation may be denied by a local government if providing the accommodation is not reasonable—in other words, if it would impose an undue financial and administrative burden on the local government or it would fundamentally alter the local government's zoning scheme. The determination of undue financial and administrative burden must be decided on a case-by-case basis involving various factors, such as the nature and extent of the administrative burden and the cost of the requested accommodation to the local government, the financial resources of the local government, and the benefits that the accommodation would provide to the persons with disabilities who will reside in the group home.

When a local government refuses an accommodation request because it would pose an undue financial and administrative burden, the local government should discuss with the requester whether there is an alternative accommodation that would effectively address the disability-related needs of the group home's residents without imposing an undue financial and administrative burden. This discussion is called an "interactive process." If an alternative accommodation would effectively meet the disability-related needs of the residents of the group home and is reasonable (that is, it would not impose an undue financial and administrative burden or fundamentally alter the local government's zoning scheme), the local government must grant the alternative accommodation. An interactive process in which the group home and the local government discuss the disability-related need for the requested accommodation and possible alternative accommodations is both required under the Act and helpful to all concerned, because it often results in an effective accommodation for the group home that does not pose an undue financial and administrative burden or fundamental alteration for the local government.

### 22. What is the procedure for requesting a reasonable accommodation?

The reasonable accommodation must actually be requested by or on behalf of the individuals with disabilities who reside or are expected to reside in the group home. When the request is made, it is not necessary for the specific individuals who would be expected to live in the group home to be identified. The Act does not require that a request be made in a particular manner or at a particular time. The group home does not need to mention the Fair Housing Act or use the words "reasonable accommodation" when making a reasonable accommodation request. The group home must, however, make the request in a manner that a reasonable person would understand to be a disability-related request for an exception, change, or adjustment to a rule, policy, practice, or service. When making a request for an exception, change, or adjustment to a local land use or zoning regulation or policy, the group home should explain what type of accommodation is being requested and, if the need for the accommodation is not readily apparent or known by the local government, explain the relationship between the accommodation and the disabilities of the group home residents.

A request for a reasonable accommodation can be made either orally or in writing. It is often helpful for both the group home and the local government if the reasonable accommodation request is made in writing. This will help prevent misunderstandings regarding what is being requested or whether or when the request was made.

Where a local land use or zoning code contains specific procedures for seeking a departure from the general rule, courts have decided that these procedures should ordinarily be followed. If no procedure is specified, or if the procedure is unreasonably burdensome or intrusive or involves significant delays, a request for a reasonable accommodation may,

nevertheless, be made in some other way, and a local government is obligated to grant it if the requested accommodation meets the criteria discussed in Q&A 20, above.

Whether or not the local land use or zoning code contains a specific procedure for requesting a reasonable accommodation or other exception to a zoning regulation, if local government officials have previously made statements or otherwise indicated that an application for a reasonable accommodation would not receive fair consideration, or if the procedure itself is discriminatory, then persons with disabilities living in a group home, and/or its operator, have the right to file a Fair Housing Act complaint in court to request an order for a reasonable accommodation to the local zoning regulations.

# **23.** Does the Fair Housing Act require local governments to adopt formal reasonable accommodation procedures?

The Act does not require a local government to adopt formal procedures for processing requests for reasonable accommodations to local land use or zoning codes. DOJ and HUD nevertheless strongly encourage local governments to adopt formal procedures for identifying and processing reasonable accommodation requests and provide training for government officials and staff as to application of the procedures. Procedures for reviewing and acting on reasonable accommodation requests will help state and local governments meet their obligations under the Act to respond to reasonable accommodation requests and implement reasonable accommodations promptly. Local governments are also encouraged to ensure that the procedures to request a reasonable accommodation or other exception to local zoning regulations are well known throughout the community by, for example, posting them at a readily accessible location and in a digital format accessible to persons with disabilities on the government's website. If a jurisdiction chooses to adopt formal procedures for reasonable accommodation requests, the procedures cannot be onerous or require information beyond what is necessary to show that the individual has a disability and that the requested accommodation is related to that disability. For example, in most cases, an individual's medical record or detailed information about the nature of a person's disability is not necessary for this inquiry. In addition, officials and staff must be aware that any procedures for requesting a reasonable accommodation must also be flexible to accommodate the needs of the individual making a request, including accepting and considering requests that are not made through the official procedure. The adoption of a reasonable accommodation procedure, however, will not cure a zoning ordinance that treats group homes differently than other residential housing with the same number of unrelated persons.

# 24. What if a local government fails to act promptly on a reasonable accommodation request?

A local government has an obligation to provide prompt responses to reasonable accommodation requests, whether or not a formal reasonable accommodation procedure exists. A local government's undue delay in responding to a reasonable accommodation request may be deemed a failure to provide a reasonable accommodation.

# 25. Can a local government enforce its zoning code against a group home that violates the zoning code but has not requested a reasonable accommodation?

The Fair Housing Act does not prohibit a local government from enforcing its zoning code against a group home that has violated the local zoning code, as long as that code is not discriminatory or enforced in a discriminatory manner. If, however, the group home requests a reasonable accommodation when faced with enforcement by the locality, the locality still must consider the reasonable accommodation request. A request for a reasonable accommodation may be made at any time, so at that point, the local government must consider whether there is a relationship between the disabilities of the residents of the group home and the need for the requested accommodation. If so, the locality must grant the requested accommodation unless doing so would pose a fundamental alteration to the local government's zoning scheme or an undue financial and administrative burden to the local government.

### Questions and Answers on Fair Housing Act Enforcement of Complaints Involving Land Use and Zoning

# 26. How are Fair Housing Act complaints involving state and local land use laws and practices handled by HUD and DOJ?

The Act gives HUD the power to receive, investigate, and conciliate complaints of discrimination, including complaints that a state or local government has discriminated in exercising its land use and zoning powers. HUD may not issue a charge of discrimination pertaining to "the legality of any State or local zoning or other land use law or ordinance." Rather, after investigating, HUD refers matters it believes may be meritorious to DOJ, which, in its discretion, may decide to bring suit against the state or locality within 18 months after the practice at issue occurred or terminated. DOJ may also bring suit by exercising its authority to initiate litigation alleging a pattern or practice of discrimination or a denial of rights to a group of persons which raises an issue of general public importance.

If HUD determines that there is no reasonable cause to believe that there may be a violation, it will close an investigation without referring the matter to DOJ. But a HUD or DOJ

decision not to proceed with a land use or zoning matter does not foreclose private plaintiffs from pursuing a claim.

Litigation can be an expensive, time-consuming, and uncertain process for all parties. HUD and DOJ encourage parties to land use disputes to explore reasonable alternatives to litigation, including alternative dispute resolution procedures, like mediation or conciliation of the HUD complaint. HUD attempts to conciliate all complaints under the Act that it receives, including those involving land use or zoning laws. In addition, it is DOJ's policy to offer prospective state or local governments the opportunity to engage in pre-suit settlement negotiations, except in the most unusual circumstances.

### 27. How can I find more information?

For more information on reasonable accommodations and reasonable modifications under the Fair Housing Act:

- HUD/DOJ Joint Statement on Reasonable Accommodations under the Fair Housing Act, *available at* <u>https://www.justice.gov/crt/fair-housing-policy-statements-and-guidance-0</u> or <u>http://www.hud.gov/offices/fheo/library/huddojstatement.pdf</u>.
- HUD/DOJ Joint Statement on Reasonable Modifications under the Fair Housing Act, *available at* <u>https://www.justice.gov/crt/fair-housing-policy-statements-and-guidance-0</u> or <u>http://www.hud.gov/offices/fheo/disabilities/reasonable\_modifications\_mar08.pdf</u>.

For more information on state and local governments' obligations under Section 504:

• HUD website at <u>http://portal.hud.gov/hudportal/HUD?src=/program\_offices/</u> <u>fair\_housing\_equal\_opp/disabilities/sect504</u>.

For more information on state and local governments' obligations under the ADA and Olmstead:

- U.S. Department of Justice website, <u>www.ADA.gov</u>, or call the ADA information line at (800) 514-0301 (voice) or (800) 514-0383 (TTY).
- Statement of the Department of Justice on Enforcement of the Integration Mandate of Title II of the Americans with Disabilities Act and *Olmstead v. L.C., available at* <u>http://www.ada.gov./olmstead/q&a\_olmstead.htm</u>.
- Statement of the Department of Housing and Urban Development on the Role of Housing in Accomplishing the Goals of *Olmstead*, *available at* <u>http://portal.hud.gov/hudportal/documents/huddoc?id=OlmsteadGuidnc060413.pdf</u>.

For more information on the requirement to affirmatively further fair housing:

- Affirmatively Furthering Fair Housing, 80 Fed. Reg. 42,272 (July 16, 2015) (to be codified at 24 C.F.R. pts. 5, 91, 92, 570, 574, 576, and 903).
- U.S. Department of Housing and Urban Development, Version 1, Affirmatively Furthering Fair Housing Rule Guidebook (2015), *available at* <u>https://www.hudexchange.info/resources/documents/AFFH-Rule-Guidebook.pdf</u>.
- Office of Fair Housing and Equal Opportunity, U.S. Department of Housing and Urban Development, Vol. 1, Fair Housing Planning Guide (1996), *available at* <u>http://www.hud.gov/offices/fheo/images/fhpg.pdf</u>.

For more information on nuisance and crime-free ordinances:

 Office of General Counsel Guidance on Application of Fair Housing Act Standards to the Enforcement of Local Nuisance and Crime-Free Housing Ordinances Against Victims of Domestic Violence, Other Crime Victims, and Others Who Require Police or Emergency Services (Sept. 13, 2016), *available at* <u>http://portal.hud.gov/hudportal/documents/</u> <u>huddoc?id=FinalNuisanceOrdGdnce.pdf</u>.

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West's Florida Statutes Annotated Title XXX. Social Welfare (Chapters 409-434) Chapter 419. Community Residential Homes (Refs & Annos)

### West's F.S.A. § 419.001

419.001. Site selection of community residential homes

Effective: July 1, 2020 Currentness

(1) For the purposes of this section, the term:

(a) "Community residential home" means a dwelling unit licensed to serve residents who are clients of the Department of Elderly Affairs, the Agency for Persons with Disabilities, the Department of Juvenile Justice, or the Department of Children and Families or licensed by the Agency for Health Care Administration which provides a living environment for 7 to 14 unrelated residents who operate as the functional equivalent of a family, including such supervision and care by supportive staff as may be necessary to meet the physical, emotional, and social needs of the residents.

(b) "Licensing entity" or "licensing entities" means the Department of Elderly Affairs, the Agency for Persons with Disabilities, the Department of Juvenile Justice, the Department of Children and Families, or the Agency for Health Care Administration, all of which are authorized to license a community residential home to serve residents.

(c) "Local government" means a county as set forth in chapter 7 or a municipality incorporated under the provisions of chapter 165.

(d) "Planned residential community" means a local government-approved, planned unit development that is under unified control, is planned and developed as a whole, has a minimum gross lot area of 8 acres, and has amenities that are designed to serve residents with a developmental disability as defined in s. 393.063 but that shall also provide housing options for other individuals. The community shall provide choices with regard to housing arrangements, support providers, and activities. The residents' freedom of movement within and outside the community may not be restricted. For the purposes of this paragraph, local government approval must be based on criteria that include, but are not limited to, compliance with appropriate land use, zoning, and building codes. A planned residential community may not be located within a 10-mile radius of any other planned residential community.

(e) "Resident" means any of the following: a frail elder as defined in s. 429.65; a person who has a disability as defined in s. 760.22(3)(a); a person who has a developmental disability as defined in s. 393.063; a nondangerous person who has a mental illness as defined in s. 394.455; or a child who is found to be dependent as defined in s. 39.01 or s. 984.03, or a child in need of services as defined in s. 984.03 or s. 985.03.

(f) "Sponsoring agency" means an agency or unit of government, a profit or nonprofit agency, or any other person or organization which intends to establish or operate a community residential home.

(2) Homes of six or fewer residents which otherwise meet the definition of a community residential home shall be deemed a single-family unit and a noncommercial, residential use for the purpose of local laws and ordinances. Homes of six or fewer residents which otherwise meet the definition of a community residential home shall be allowed in single-family or multifamily zoning without approval by the local government, provided that such homes are not located within a radius of 1,000 feet of another existing such home with six or fewer residents or within a radius of 1,200 feet of another existing community residential home. Such homes with six or fewer residents are not required to comply with the notification provisions of this section; provided that, before licensure, the sponsoring agency provides the local government with the most recently published data compiled from the licensing entities that identifies all community residential homes within the jurisdictional limits of the local government in which the proposed site is to be located in order to show that there is not a home of six or fewer residents which otherwise meets the definition of a community residential home within a radius of 1,000 feet and not a community residential home within a radius of 1,200 feet of the proposed home. At the time of home occupancy, the sponsoring agency must notify the local government that the home is licensed by the licensing entity. For purposes of local land use and zoning determinations, this subsection does not affect the legal nonconforming use status of any community residential home lawfully permitted and operating as of July 1, 2016.

(3)(a) When a site for a community residential home has been selected by a sponsoring agency in an area zoned for multifamily, the agency shall notify the chief executive officer of the local government in writing and include in such notice the specific address of the site, the residential licensing category, the number of residents, and the community support requirements of the program. Such notice shall also contain a statement from the licensing entity indicating the licensing status of the proposed community residential home and specifying how the home meets applicable licensing criteria for the safe care and supervision of the clients in the home. The sponsoring agency shall also provide to the local government the most recently published data compiled from the licensing entities that identifies all community residential homes within the jurisdictional limits of the local government in which the proposed site is to be located. The local government shall review the notification of the sponsoring agency in accordance with the zoning ordinance of the jurisdiction.

(b) Pursuant to such review, the local government may:

1. Determine that the siting of the community residential home is in accordance with local zoning and approve the siting. If the siting is approved, the sponsoring agency may establish the home at the site selected.

2. Fail to respond within 60 days. If the local government fails to respond within such time, the sponsoring agency may establish the home at the site selected.

3. Deny the siting of the home.

(c) The local government shall not deny the siting of a community residential home unless the local government establishes that the siting of the home at the site selected:

1. Does not otherwise conform to existing zoning regulations applicable to other multifamily uses in the area.

2. Does not meet applicable licensing criteria established and determined by the licensing entity, including requirements that the home be located to assure the safe care and supervision of all clients in the home.

3. Would result in such a concentration of community residential homes in the area in proximity to the site selected, or would result in a combination of such homes with other residences in the community, such that the nature and character of the area would be substantially altered. A home that is located within a radius of 1,200 feet of another existing community residential home in a multifamily zone shall be an overconcentration of such homes that substantially alters the nature and character of the area. A home that is located within a radius of 500 feet of an area of single-family zoning substantially alters the nature and character of the area.

(4) Community residential homes, including homes of six or fewer residents which would otherwise meet the definition of a community residential home, which are located within a planned residential community are not subject to the proximity requirements of this section and may be contiguous to each other. A planned residential community must comply with the applicable local government's land development code and other local ordinances. A local government may not impose proximity limitations between homes within a planned residential community if such limitations are based solely on the types of residents anticipated to be living in the community.

(5) All distance requirements in this section shall be measured from the nearest point of the existing home or area of single-family zoning to the nearest point of the proposed home.

(6) If agreed to by both the local government and the sponsoring agency, a conflict may be resolved through informal mediation. The local government shall arrange for the services of an independent mediator. Mediation shall be concluded within 45 days of a request therefor. The resolution of any issue through the mediation process shall not alter any person's right to a judicial determination of any issue if that person is entitled to such a determination under statutory or common law.

(7) The licensing entity shall not issue a license to a sponsoring agency for operation of a community residential home if the sponsoring agency does not notify the local government of its intention to establish a program, as required by subsection (3). A license issued without compliance with the provisions of this section shall be considered null and void, and continued operation of the home may be enjoined.

(8) A dwelling unit housing a community residential home established pursuant to this section shall be subject to the same local laws and ordinances applicable to other noncommercial, residential family units in the area in which it is established.

(9) Nothing in this section shall be deemed to affect the authority of any community residential home lawfully established prior to October 1, 1989, to continue to operate.

(10) Nothing in this section shall permit persons to occupy a community residential home who would constitute a direct threat to the health and safety of other persons or whose residency would result in substantial physical damage to the property of others.

(11) The siting of community residential homes in areas zoned for single family shall be governed by local zoning ordinances. Nothing in this section prohibits a local government from authorizing the development of community residential homes in areas zoned for single family.

(12) Nothing in this section requires any local government to adopt a new ordinance if it has in place an ordinance governing the placement of community residential homes that meet the criteria of this section. State law on community residential homes controls over local ordinances, but nothing in this section prohibits a local government from adopting more liberal standards for siting such homes.

### Credits

Added by Laws 1989, c. 89-372, § 1; Laws 1993, c. 93-206, § 36; Laws 1995, c. 95-152, § 6; Laws 1996, c. 96-169, § 42; Laws 1997, c. 97-101, § 222. Amended by Laws 1998, c. 98-280, § 46, eff. June 30, 1998; Laws 1998, c. 98-338, § 14, eff. Oct. 1, 1998; Laws 1999, c. 99-193, § 53, eff. July 1, 1999; Laws 1999, c. 99-284, § 23, eff. July 1, 1999; Laws 2000, c. 2000-135, § 7, eff. July 1, 2000; Laws 2004, c. 2004-267, § 93, eff. July 1, 2004; Laws 2006, c. 2006-86, § 34, eff. July 1, 2006; Laws 2006, c. 2006-120, § 110, eff. Jan. 1, 2007; Laws 2006, c. 2006-177, § 1, eff. July 1, 2006; Laws 2007, c. 2007-5, § 99, eff. July 3, 2007; Laws 2008, c. 2008-245, § 30, eff. July 1, 2008; Laws 2010, c. 2010-193, § 3, eff. July 1, 2010; Laws 2014, c. 2014-19, § 237, eff. July 1, 2014; Laws 2015, c. 2015-30, § 29, eff. May 14, 2015; Laws 2016, c. 2016-74, § 1, eff. July 1, 2016; Laws 2020, c. 2020-76, § 3, eff. July 1, 2020.

### Notes of Decisions (4)

### West's F. S. A. § 419.001, FL ST § 419.001

Current with laws, joint and concurrent resolutions and memorials through May 2, 2024, in effect from the 2024 first regular session. Some statute sections may be more current, see credits for details. The statutes are subject to change as determined by the Florida Revisor of Statutes. (These changes will be incorporated later this year.)

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# **Opioid settlement cash being used for existing programs and salaries, sparking complaints**

Aneri Pattani KFF Health News Published 6:03 a.m. ET April 15, 2024 | Updated 6:03 a.m. ET April 15, 2024

State and local governments are receiving billions of dollars in opioid settlements to address the drug crisis that has ravaged America for decades. But instead of spending the money on new addiction treatment and prevention services they couldn't afford before, some jurisdictions are using it to replace existing funding and stretch tight budgets.

Scott County, Indiana, for example, has spent more than \$250,000 of opioid settlement dollars on salaries for its health director and emergency medical services staff. The money usually budgeted for those salaries was freed to buy an ambulance and create a financial cushion for the health department.

In Blair County, Pennsylvania, about \$320,000 went to a drug court the county has been operating with other sources of money for more than two decades.

And in New York, some lawmakers and treatment advocates say the governor's proposed budget substitutes millions of opioid settlement dollars for a portion of the state addiction agency's normal funding.

The national opioid settlements don't prohibit the use of money for initiatives already supported by other means. But families affected by addiction, recovery advocates, and legal and public health experts say doing so squanders a rare opportunity to direct additional resources toward saving lives.

"To think that replacing what you're already spending with settlement funds is going to make things better — it's not," said Robert Kent, former general counsel for the Office of National Drug Control Policy. "Certainly, the spirit of the settlements wasn't to keep doing what you're doing. It was to do more." Settlement money is a new funding stream, separate from tax dollars. It comes from more than a dozen companies that were accused of aggressively marketing and distributing prescription painkillers. States are required to spend at least 85% of the funds on addressing the opioid crisis. Now, with illicit fentanyl flooding the drug market and killing tens of thousands of Americans annually, the need for treatment and social services is more urgent.

Thirteen states and Washington, D.C., have restricted the practice of substituting opioid settlement funds for existing dollars, according to state guides created by OpioidSettlementTracker.com and the public health organization Vital Strategies. A national set of principles created by Johns Hopkins University also advises against the practice, known as supplantation.

### **Paying Staff Salaries**

Scott County, Indiana — a small, rural place known nationally as the site of an HIV outbreak in 2015 sparked by intravenous drug use — received more than \$570,000 in opioid settlement funds in 2022.

From August 2022 to July 2023, the county reported using roughly \$191,000 for the salaries of its EMS director, deputy director, and training officer/clinical coordinator, as well as about \$60,000 for its health administrator. The county also awarded about \$151,000 total to three community organizations that address addiction and related issues.

In a public meeting discussing the settlement dollars, county attorney Zachary Stewart voiced concerns. "I don't know whether or not we're supposed to be using that money to add, rather than supplement, already existing resources," he said.

But a couple of months later, the county council approved the allocations.

Council President Lyndi Hughbanks did not respond to repeated requests to explain this decision. But council members and county commissioners said in public meetings that they hoped to compensate county departments for resources expended during the HIV outbreak.

Their conversations echoed the struggles of many rural counties nationwide, which have tight budgets, in part because they poured money into addressing the opioid crisis for years. Now as they receive settlement funds, they want to recoup some of those expenses.

The Scott County Health Department did not respond to questions about how the funds typically allocated for salary were used instead. But at the public meeting, it was suggested

they could be used at the department's discretion.

EMS Chief Nick Oleck told KFF Health News the money saved on salaries was put toward loan payments for a new ambulance, purchased in spring 2023.

Unlike other departments, which are funded from local tax dollars and start each year with a full budget, the county EMS is mostly funded through insurance reimbursements for transporting patients, Oleck said. The opioid settlement funds provided enough cash flow to make payments on the new ambulance while his department waited for reimbursements.

Oleck said this use of settlement dollars will save lives. His staff needs vehicles to respond to overdose calls, and his department regularly trains area emergency responders on overdose response.

"It can be played that it was just money used to buy an ambulance, but there's a lot more behind the scenes," Oleck said.

Still, Jonathan White — the only council member to vote against using settlement funds for EMS salaries — said he felt the expense did not fit the money's intended purpose.

The settlement "was written to pay for certain things: helping people get off drugs," White told KFF Health News. "We got drug rehab facilities and stuff like that that I believe could have used that money more."

Phil Stucky, executive director of a local nonprofit called Thrive, said his organization could have used the money too. Founded in the wake of the HIV outbreak, Thrive employs people in recovery to provide support to peers with mental health and substance use disorders.

Stucky, who is in recovery himself, asked Scott County for \$300,000 in opioid settlement funds to hire three peer specialists and purchase a vehicle to transport people to treatment. He ultimately received one-sixth of that amount — enough to hire one person.

In Blair County, Pennsylvania, Marianne Sinisi was frustrated to learn her county used about \$322,000 of opioid settlement funds to pay for a drug court that has existed for decades.

"This is an opioid epidemic, which is not being treated enough as it is now," said Sinisi, who lost her 26-year-old son to an overdose in 2018. The county received extra money to help people, but instead it pulled back its own money, she said. "How do you expect that to change? Isn't that the definition of insanity?" Blair County Commissioner Laura Burke told KFF Health News that salaries for drug court probation officers and aides were previously covered by a state grant and parole fees. But in recent years that funding has been inadequate, and the county general fund has picked up the slack. Using opioid settlement funds provides a small reprieve since the general fund is overburdened, she said. The county's most recent budget faces a \$2 million deficit.

### **Forfeited Federal Dollars**

Supplantation can take many forms, said Shelly Weizman, project director of the addiction and public policy initiative at Georgetown University's O'Neill Institute. Replacing general funds with opioid settlement dollars is an obvious one, but there are subtler approaches.

The federal government pours billions of dollars into addiction-related initiatives annually. But some states forfeit federal grants or decline to expand Medicaid, which is the largest payer of mental health and addiction treatment.

If those jurisdictions then use opioid settlement funds for activities that could have been covered with federal money, Weizman considers it supplantation.

"It's really letting down the citizens of their state," she said.

Officials in Bucks County, Pennsylvania, forfeited more than \$1 million in federal funds from September 2022 to September 2023, the bulk of which was meant to support the construction of a behavioral health crisis stabilization center.

"We were probably overly optimistic" about spending the money by the grant deadline, said Diane Rosati, executive director of the Bucks County Drug and Alcohol Commission.

Now the county plans to use \$3.9 million in local and state opioid settlement funds to support the center.

Susan Ousterman finds these developments difficult to stomach. Her 24-year-old son died of an overdose in 2020, and she later joined the Bucks County Opioid Settlement Advisory Committee, which developed a plan to spend the funds.

In a September 2022 email to other committee members, she expressed disappointment in the suggested uses: "Please keep in mind, the settlement funds are not meant to fund existing programs or programs that can be funded by other sources, such as federal grants."

But Rosati said the county is maximizing its resources. Settlement funds will create a host of services, including grief groups for families and transportation to treatment facilities.

"We're determined to utilize every bit of funding that's available to Bucks County, using every funding source, every stream, and frankly every grant opportunity that comes our way," Rosati said.

The county's guiding principles for settlement funds demand as much. They say, "Whenever possible, use existing resources in order that Opioid Settlement funds can be directed to addressing gaps in services."

Ed Mahon of Spotlight PA contributed to this report.

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Dr. Nora Volkow, director of the National Institute on Drug Abuse said children who lose a parent to an overdose face a higher risk of health and social issues such as substance abuse and mental health challenges. OLIVIER DOULIERY/AFP VIA GETTY IMAGES

# Alarming number of parents lost to overdose

### Ken Alltucker

More than 321,000 children lost a parent to a drug overdose between 2011 and 2021, a daunting blow that reflects the impact of the nation's addiction crisis on a generation of children.

The rate of children who lost a parent more than doubled over the decade. The average leaped from about 27 to 63 children per 100,000, according to a study published Wednesday in the medical journal JAMA Psychiatry.

Dr. Nora Volkow, director of the National Institute on Drug Abuse, or NI-DA, said federal researchers wanted to provide a comprehensive look at the number of children who have been orphaned or lost at least one parent to overdose during the long-running addiction crisis in the U.S.

Researchers at NIDA, the Substance Abuse and Mental Health Services Administration, and the Centers for Disease Control and Prevention used data from the National Surveys on Drug Use and Health to complete the study. The study examined 649,599 adults, aged 18 to 64, who died of an overdose between 2011 and 2021.

Researchers estimated that 321,566

children lost a parent to a drug overdose.

Native American or Alaska Native families had the highest rate of parental overdoses at 187.1 deaths per 100,000 in 2021. That was more than double the rate of 76.5 deaths per 100,000 among children of white parents. Black parents had an overdose rate of 73.2 deaths per 100,000.

Volkow said children who lose a parent to an overdose face a higher risk of health and social issues such as substance abuse and mental health challenges. The study cited a "critical need" for policies that address substances abuse, including treatment and recovery services for parents, young families and people of childbearing age.

Even as the nation has expanded the use of harm-reduction strategies and availability of the overdose-reversal medication naloxone, the study noted there has been a lack of focus on parents. Researchers said interventions such as peer-to-peer parenting training often aren't included in drug treatment.

When a child loses a parent, "that person is no longer there providing the support for the family and that leaves the children very unprotected," Volkow said.