Report of Law Enforcement Officer Initiating Involuntary Examination

State of Florida, County of _____, Florida

I, _____, am a law enforcement officer certified by the State of Florida.

In my opinion, _____ appears to meet the following criteria for involuntary examination:

1. I have reason to believe said individual has a mental illness as defined by section 394.455, Florida Statutes:

"Mental illness" means an impairment of the mental or emotional processes that exercise conscious control of one's actions or of the ability to perceive or understand reality, which impairment substantially interferes with the individual's ability to meet the ordinary demands of living. For the purposes of this part, the term does not include a developmental disability as defined in chapter 393, intoxication, or conditions manifested only by dementia, traumatic brain injury, antisocial behavior, or substance abuse.

AND because of the mental illness (check all that apply):

☐ a. Individual has refused voluntary examination after conscientious explanation and disclosure of the purpose of the examination; **OR**

☐ b. Individual is unable to determine for himself/herself whether examination is necessary; **AND**

2. Either (check all that apply):

☐ a. Without care or treatment said individual is likely to suffer from neglect or refuse to care for himself/herself, and such neglect or refusal poses a real and present threat of substantial harm to his/her well-being and it is not apparent that such harm may be avoided through the help of willing, able, and responsible family members or friends or the provision of other services; **OR,**

☐ b. There is substantial likelihood that without care or treatment the individual will cause serious bodily harm to (check one or both)

☐ **self** ☐ **others** in the near future, as evidenced by recent behavior.

Please note: Law enforcement officers have discretion to determine if an individual meets the criteria and needs to be examined under the Baker Act. No items in the following table should be construed as restricting law enforcement officers from initiating this involuntary examination. Your responses are required and will be used by the Department to conduct data analyses, per s. 394.463(4), F.S.

This individual was transported directly to a Baker Act Receiving Facility.	☐ Yes	☐ No
This individual was transported from an emergency department (ED) to a Baker Act Receiving Facility.	☐ Yes	☐ No
This individual was first transported to an ED to address a medical issue.	☐ Yes	☐ No
Has the law enforcement officer initiating this examination completed a 40-hour Crisis Intervention Team (CIT) training program?	☐ Yes	☐ No
Was this examination initiated in the officer's capacity as a school resource officer/deputy?	☐ Yes	☐ No

Circumstances supporting the belief the criteria are met, including specific information about the individual's behavioral health issues, threats and actions, and information offered by others. If school personnel are involved, please describe the nature of their involvement.

_____ Signature of Law Enforcement Officer

_____ Date (mm/dd/yyyy)

_____ ☐ am ☐ pm Time (of transfer of custody from law enforcement officer to provider)

_____ Printed Name of Law Enforcement Officer

_____ Full Name of Law Enforcement Agency (printed)

_____ Badge or ID Number

_____ Law Enforcement Case Number