



Legislation Text

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Int. No. 1036-A

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A Local Law to amend the administrative code of the city of New York, in relation to requiring correctional health services to provide reports regarding people in custody who have been ordered to undergo a court-ordered forensic psychiatric examination

Be it enacted by the Council as follows:

Section 1. Chapter 1 of title 9 of the administrative code of the city of New York is amended by adding a new section 9-169 to read as follows:

§ 9-169 Reporting on court-ordered forensic psychiatric examinations. a. Definitions. For the purposes of this section, the following terms have the following meanings:

Appropriate institution. The term “appropriate institution” has the same meaning as set forth in section 730 of the criminal procedure law.

Forensic psychiatric examination. The term “forensic psychiatric examination” means an examination performed by a psychiatric examiner pursuant to section 730 of the criminal procedure law.

Incapacitated person. The term “incapacitated person” has the same meaning as set forth in section 730 of the criminal procedure law.

Order of examination. The term “order of examination” has the same meaning as set forth in section 730 of the criminal procedure law.

b. Beginning no later than September 30, 2025 and within 30 days of the end of each quarter year thereafter, correctional health services, in consultation with the department of correction, the office of criminal justice, and other relevant agencies, shall send a report regarding people in custody who have been ordered to

undergo a forensic psychiatric examination during the previous quarter year to the mayor and the speaker of the council and post such report on correctional health services' website. The information required by this section shall be reported in a format capable of automatic processing. Such report shall include the following information in total and disaggregated by the county in which each covered individual's current top charge originated:

1. The number of people in custody with a pending forensic psychiatric examination at any point during the reporting period, further disaggregated by whether the person had a top charge of a felony or misdemeanor offense, and the type of housing area where such persons were detained on the date correctional health services received an order of examination;

2. The number of people admitted to the department's custody during the reporting period with a pending forensic psychiatric examination, further disaggregated by whether the person in custody had a top charge of a felony or misdemeanor offense, and the housing area type where such persons were detained on the date correctional health services received an order of examination;

3. The number of people in custody deemed unfit to stand trial by correctional health services following a forensic psychiatric examination during the reporting period, further disaggregated by whether the person had a top charge of a felony or misdemeanor offense, and the type of housing area where such persons were detained on the date correctional health services received an order of examination;

4. The number of people admitted to the department's custody during the reporting period who were deemed unfit by correctional health services following a forensic psychiatric examination during the reporting period, further disaggregated by whether the person had a top charge of a felony or misdemeanor offense, and the type of housing area where such persons were detained on the date correctional health services received an order of examination;

5. The number and percentage of forensic psychiatric examinations conducted for people in custody virtually as opposed to in person;

6. The average length of time between when correctional health services receives an order of examination and the date the first forensic psychiatric examination is scheduled for orders received during the reporting period;

7. The average length of time between the date correctional health services schedules a forensic psychiatric examination and the date the first forensic psychiatric examination is completed for first examinations completed during the reporting period;

8. The number and percentage of forensic psychiatric examinations not successfully completed on the first scheduled date during the reporting period, further disaggregated by the reason(s) the forensic psychiatric examination was not completed, including but not limited to the department not escorting the person in custody to their forensic psychiatric examination for any reason, which may include the refusal of the person in custody to attend, the restriction of the movement of the person in custody due to a lockdown, search, or alarm in their housing facility; the lack of an available psychiatric examiner; the cancellation of a virtual forensic psychiatric examination due to technical problems; or the absence of the defense counsel;

9. For forensic psychiatric examinations not completed on the first scheduled date during the reporting period, the average length of time between the first scheduled forensic psychiatric examination date and the rescheduled forensic psychiatric examination date;

10. The number and percentage of people in custody with a pending forensic psychiatric examination, who have had more than one rescheduled appointment without completing that forensic psychiatric examination;

11. The average length of time between when correctional health services receives an order of examination and completion of the first forensic psychiatric examination;

12. The percentage of people in custody who completed a forensic psychiatric examination during the current reporting period who were deemed unfit to stand trial by correctional health services;

13. The average length of time between when the department receives notice that a person is to be

discharged to an appropriate institution for competency restoration and such person's discharge from the department's custody to the appropriate institution; and

14. The average length of time between when a person is admitted to the custody of the department and when they are discharged to an appropriate institution for competency restoration.

§2. This local law takes effect immediately

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