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§3–108.

(a) (1) In addition to any other report required under this title, the Health Department shall report to the court that has ordered commitment of a defendant under § 3–106 of this title:

(i) every 6 months from the date of commitment of the defendant; and

(ii) whenever the Health Department determines that:

1. the defendant no longer is incompetent to stand trial;

2. the defendant no longer is, because of mental retardation or a mental disorder, a danger to self or the person or property of others; or

3. there is not a substantial likelihood that the defendant will become competent to stand trial in the foreseeable future.

(2) The Department shall include a supplemental report that provides a plan for services to facilitate the defendant remaining competent to stand trial or not dangerous, as a result of mental retardation or a mental disorder, to self or the person or property of others, if:

(i) a report required under this title states an opinion that the defendant is competent to stand trial or is not dangerous, as a result of mental retardation or a mental disorder, to self or the person or property of others; and

(ii) services are necessary to maintain the defendant safely in the community, to maintain competency, or to restore competency.

(3) If appropriate, the plan required in the report under paragraph (2) of this subsection shall include recommended:

(i) mental health treatment, including providers of care;

(ii) vocational, rehabilitative, or support services;

(iii) housing;

(iv) case management services;

(v) alcohol or substance abuse treatment; and

(vi) other clinical services.

(4) If the report required under paragraph (2) of this subsection recommends community placement for the defendant, the report shall include:

(i) the location of the recommended community placement;

(ii) the names and addresses of the recommended service providers;

(iii) a statement indicating if the service provider is willing and able to serve the defendant; and

(iv) if available, the date of placement or service for the defendant.

(5) If the plan required in the report under paragraph (2) of this subsection is for a defendant committed to a State residential center, the report shall state whether:

(i) the defendant meets the requirements for commitment under § 3–106(d) of this title;

(ii) the services required for the defendant may be provided in a less restrictive setting; and

(iii) the defendant is eligible for services pursuant to § 7–404 of the Health – General Article.

(6) If the report required under paragraph (2) of this subsection states an opinion that there is not a substantial likelihood that the defendant will become competent in the foreseeable future, the report shall contain an opinion regarding whether the defendant meets the criteria for commitment under § 3–106(d) of this title.

(7) A statement made by the defendant in the course of any examination for a report under this section is not admissible as evidence in any criminal proceeding for the purpose of proving the commission of a criminal offense or to enhance the sentence of the defendant.

(8) A report prepared under this section is not admissible in a criminal proceeding for the purpose of proving the commission of a criminal offense or to enhance the sentence of the defendant.

(b) The clerk of court shall give the State's Attorney and the last counsel of record for the defendant a copy of any report received under this section.

(c) The facility of the Health Department that has charge of a person committed as incompetent to stand trial shall notify the Criminal Justice Information System Central Repository if the person escapes.

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