

ADMINISTRATIVE ORDER  
NO. 2018-06-01

IN THE CIRCUIT COURT OF THE  
NINTH JUDICIAL CIRCUIT, IN AND  
FOR ORANGE AND OSCEOLA  
COUNTIES, FLORIDA

**AMENDED ADMINISTRATIVE ORDER GOVERNING  
BATTERERS' INTERVENTION PROGRAM PROVIDERS, NINTH JUDICIAL CIRCUIT**

**WHEREAS**, pursuant to Article V, section 2(d) of the Florida Constitution and section 43.26, Florida Statutes, the chief judge of each judicial circuit is charged with the authority and the power to do everything necessary to promote the prompt and efficient administration of justice; and

**WHEREAS**, pursuant to the chief judge's constitutional and statutory responsibility for administrative supervision of the courts within the circuit and to create and maintain an organization capable of effecting the efficient, prompt, and proper administration of justice for the citizens of this State, the chief judge is required to exercise direction, *see* Fla. R. Jud. Admin. 2.215(b)(2), (b)(3); and

**WHEREAS**, per section 741.32, Florida Statutes, the Legislature has found that there should be standardized programming available to the justice system to protect victims and their children and to hold the perpetrators of domestic violence accountable for their acts; and

**WHEREAS**, batterers' intervention programs are an integral component to a comprehensive approach to domestic violence. Strong communication between providers of such programs and the criminal justice system is paramount to making sure perpetrators of domestic violence are held accountable and a change in behavior is attainable; and

**WHEREAS**, effective July 1, 2012, HB 7093 amended section 741.32, Florida Statutes, and other related statutes, terminating the Department of Children and Family Services Office for Certification and Monitoring of batterers' intervention programs with no further specification as to certification and oversight of said programs; and

**WHEREAS**, section 741.325, Florida Statutes, establishes the requirements batterers' intervention programs must meet in order to be included on the circuit court's list of batterers' intervention programs, pursuant to section 741.30(6)(a)5, Florida Statutes;

**NOW, THEREFORE, I**, Donald A. Myers, Jr., in order to facilitate the efficient operation of the administration of justice, and pursuant to the authority vested in me as Chief Judge of the Ninth

Judicial Circuit of Florida under Florida Rule of Judicial Administration 2.215, hereby order that, **effective immediately** unless otherwise provided herein, to continue until further order, and superseding any provisions in prior Administrative Orders which may be inconsistent:

1. In order to be included on the Ninth Judicial Circuit's list of batterers' intervention programs, such program must provide to BIP PROVIDER LIST c/o Court Administration, Orange County Courthouse, 425 North Orange Avenue, Suite 2130, Orlando, Florida 32801 the following:

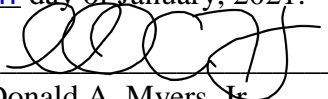
1. The program schedule;
2. Program content;
3. Fee schedule, including sliding scale or reduced fee options;
4. Locations where programs are offered;
5. Contact information;
6. The program model, and if it is other than the Duluth Model, proof that the model is accepted by the domestic violence prevention community as an effective model and complies with the requirements of section 741.325(1), Florida Statutes; and
7. A completed "Affidavit to be placed on the Batterers' Intervention Program Provider List in the Ninth Circuit" as attached hereto.

All batterers' intervention programs currently on the Ninth Judicial Circuit list of batterers' intervention programs shall have 30 days from the date of this Order to submit the required information identified above to remain on the list.

Any changes to the information provided by a batterers' intervention program in 1 through 7 above, must be provided to Court Administration immediately.

Administrative Order No. 2015-07 and No. 2018-06 are vacated and set aside except to the extent that each has been incorporated and/or amended herein. Vacating an Administrative Order that vacates a prior Order does not revive the prior Order.

**DONE AND ORDERED** at Orlando, Florida, this 5th day of January, 2021.

  
\_\_\_\_\_  
Donald A. Myers, Jr.  
Chief Judge

Copies provided to:

Clerk of Court, Orange County  
Clerk of Court, Osceola County  
General E-Mail Distribution List  
<http://www.ninthcircuit.org>

**Ninth Judicial Circuit – Court Administration – Orange & Osceola Counties  
Batterers’ Intervention Program Provider Affidavit and Application for Inclusion in the  
Ninth Judicial Circuit Registry of Approved Batterers’ Intervention Program Providers**

I, \_\_\_\_\_ (Authorized Representative’s Name), being duly sworn, hereby certify, swear and/or affirm that the following information is true and correct:

1. I am over 18 years of age, having full legal rights or capacity, and am otherwise competent to make this affidavit.
2. I make this affidavit based upon my personal knowledge.
3. I am the \_\_\_\_\_ (Title or Position through which affiant is authorized) of \_\_\_\_\_ (Legal Name of Batterers’ Intervention Program Provider - BIP Provider)
4. I have the authority to act on behalf of and to bind the BIP Provider.
5. The BIP Provider provides a batterer’s intervention program course for individuals who have been ordered to attend a batterer’s intervention program by the court.
6. I am aware that pursuant to section 741.30(6)(a)5, Florida Statutes, when the court orders the respondent to participate in a batterer’s intervention program, the court, or any entity designated by the court, must provide the respondent with a list of batterers’ intervention programs from which the respondent must choose a program in which to participate. I am submitting this affidavit in order to have the BIP Provider placed on the list of eligible programs in the Ninth Judicial Circuit Court.

(Please provide the physical address and phone number of the facility)

_____	_____	_____
(address)	(county)	(phone)

Other location(s), if any:

_____	_____	_____
(address)	(county)	(phone)

_____	_____	_____
(address)	(county)	(phone)

7. I understand that I must have a physical place of business in at least one of the two counties in the Ninth Judicial Circuit (Orange or Osceola county).
8. I understand that I must accept participants regardless of what county in the Ninth Circuit they reside and/or were court ordered to attend the program.

9. The BIP Provider program meets each of the following requirements:
  - A. The primary purpose of the program is victim safety and the safety of children, if present.
  - B. The batterer is held accountable for acts of domestic violence.
  - C. The program is at least 29 weeks in length and includes 24 weekly sessions, plus appropriate intake, assessment, and orientation programming.
  - D. The program content is based on the below listed psychoeducational model that addresses tactics of power and control by one person over another.  
Model Name or Description: \_\_\_\_\_
  - E. The program is funded by a user fee in the amount of \_\_\_\_\_ paid by the batterers who attend the program, which allows them to take responsibility for their acts of violence. An exception is made for local, state, or federal programs that fund batterers' intervention programs in whole or in part.
  
10. Except in cases of actual conflict of interest, the BIP Providers cannot reject a referral on the basis of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status. In providing services the BIP Provider must comply with the Americans with Disabilities Act and provide reasonable accommodations for disabled participants.
  
11. The BIP Provider currently and will continue to satisfy all criteria to be included on the list of batterer's interventions programs, and that the BIP Provider should be included on the Court's list of providers.
  
12. I understand that the BIP Provider is responsible for continuously meeting the statutory requirements for batterer intervention programs.
  
13. The Court may audit the BIP Provider's program as necessary to ensure compliance with the Florida Statutes. I understand that such audit may include a survey of participants of the BIP Provider's program, observation of actual program classes, and/or written or verbal requests for additional information. The BIP Provider will fully cooperate with any efforts to conduct such audit. Failure to comply with these audit requirements and procedure may result in immediate removal from the Ninth Judicial Circuit registry of approved providers.
  
14. I understand that it is my responsibility to **IMMEDIATELY** notify the Court if the BIP Provider no longer meets any of the statutory requirements. This notification must be sent to: BIP PROVIDER LIST c/o Court Administration, Orange County Courthouse, 425 North Orange Avenue, Suite 2130, Orlando, Florida 32801, at which time the BIP Provider's name will be immediately removed from the court's list of providers.
  
15. I further understand that failure to notify the Court when the BIP Provider is no longer in compliance with the statute may constitute fraud for which I and/or the BIP Provider may be subject to liability.

16. I understand that if I no longer am employed by or represent the BIP Provider, I or the BIP provider must contact the Court immediately and the BIP Provider must issue an affidavit by the new legal representative or the BIP Provider in order to remain on the list of eligible providers.
17. I understand that my inclusion on the Ninth Circuit Registry of Approved BIP may be rescinded by the Chief Judge or Administrative Judge of the Family Law Courts and Divisions of the Ninth Judicial Circuit at will.

**I DECLARE UNDER PENALTY OR PERJURY**, under the laws of the State of Florida that the statements and facts indicated in this Affidavit are true and correct.

\_\_\_\_\_  
 (Name) (Date)

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email address: \_\_\_\_\_

STATE OF FLORIDA  
 COUNTY OF

The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization, this day of , (year), by (name of person acknowledging).

(Signature of Notary Public - State of Florida)  
(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known OR Produced Identification  
 Type of Identification Produced

**Please submit applications to:**  
 BIP PROVIDER LIST c/o  
 Court Administration, Orange County Courthouse  
 425 North Orange Avenue, Suite 2130, Orlando, Florida 32801