

1 [Health Code - Assisted Outpatient Treatment (“Laura’s Law”)]

2  
3 **Ordinance amending the Health Code to authorize the implementation of court-ordered**  
4 **Assisted Outpatient Treatment (AOT) for individuals with mental illness who meet the**  
5 **criteria established by California Welfare and Institutions Code, Sections 5345-5349.5**  
6 **(“Laura’s Law”), to require the County Mental Health Officer to create a Care Team to**  
7 **try to engage individuals referred for AOT in voluntary treatment prior to the imposition**  
8 **of court-ordered treatment; and making a finding that this authorization will not result**  
9 **in a reduction of current adult and juvenile mental health programs.**

10 NOTE: **Unchanged Code text and uncodified text** are in plain Arial font.  
11 **Additions to Codes** are in *single-underline italics Times New Roman font*.  
12 **Deletions to Codes** are in ~~*strikethrough italics Times New Roman font*~~.  
13 **Board amendment additions** are in double-underlined Arial font.  
14 **Board amendment deletions** are in ~~strikethrough Arial font~~.  
15 **Asterisks (\* \* \* \*)** indicate the omission of unchanged Code  
16 subsections or parts of tables.

17 Be it ordained by the People of the City and County of San Francisco:

18 Section 1. The Health Code is hereby amended by adding to Article 41 a Division II,  
19 consisting of Sections 4111-4117~~9~~, to read as follows:

20 **ARTICLE 41. MENTAL HEALTH**

21 **\*\*\*\***

22 **DIVISION II: ASSISTED OUTPATIENT TREATMENT.**

23 **SEC. 4111. FINDINGS REGARDING ASSISTED OUTPATIENT TREATMENT.**

1           (a) California Welfare and Institutions Code §§5345-5349.5, also known as “Laura’s  
2 Law,” authorizes counties to implement Assisted Outpatient Treatment (“AOT”) to obtain  
3 court-ordered mental health treatment for individuals with mental illness for whom other  
4 methods of entering and maintaining treatment have been unsuccessful.

5           (b) AOT provides treatment through community-based, mobile, recovery-oriented,  
6 multidisciplinary, highly trained mental health teams with a staff-to-client ratio of no more than  
7 10 clients per team member.

8           (c) Several independent studies of similar programs in other states cited in a  
9 background paper prepared by the Treatment Advocacy Center show that AOT promotes  
10 long-term treatment compliance, and reduces the incidence and duration of hospitalizations,  
11 homelessness, arrests, incarcerations, violent episodes, and the victimization of individuals  
12 with mental illness by others, while also relieving caregiver stress.

13           (d) These same studies show that states and municipalities that have successfully  
14 implemented AOT realized cost savings in their respective mental health, criminal justice, and  
15 emergency care systems.

16           (e) According to research cited in The Resident’s Journal, a publication of The  
17 American Journal of Psychiatry, almost half of the individuals with a severe mental illness in  
18 the United States are untreated, and almost half of those individuals suffer from anosognosia  
19 (the inability to recognize one’s own mental illness) and possess significant deficits in self-  
20 awareness.

21           (f) This same research also finds a clear link between lack of insight regarding one’s  
22 own mental illness and the inability to adhere to treatment, which results in poorer clinical  
23 outcomes, illness relapse, hospitalization, and suicide attempts.

1           (g) For severely mentally ill individuals who are unable to maintain a consistent  
2 voluntary treatment regime, AOT provides a means to assist and support them through a  
3 structured treatment program.

4           (h) Before an AOT program may be implemented in a county under California Welfare  
5 and Institutions Code §§5345-5349.5, the county must authorize the application of the  
6 program in the county by appropriate legislation and make a finding that no voluntary mental  
7 health program serving adults, and no children’s mental health program will be reduced as a  
8 result of implementing AOT.

9           **SEC. 4112. AUTHORIZING ASSISTED OUTPATIENT TREATMENT; REQUIRED**  
10 **PROGRAMS.**

11           (a) The City and County of San Francisco (“City”) authorizes the implementation of  
12 California Welfare and Institutions Code §§5345-5349.5 through court-ordered Assisted  
13 Outpatient Treatment (“AOT”) within the City as provided in this Division II. The City finds that  
14 no voluntary mental health program serving adults, and no children’s mental health program  
15 within the City will be reduced as a result of implementing AOT.

16           (b) As part of AOT, the City shall provide services that will conform to the requirements  
17 of California Welfare and Institutions Code §5348, or any successor provisions. These  
18 services shall include, but are not limited to, community-based comprehensive individual  
19 service and delivery plans, which plans shall be gender, age, disability, linguistically and  
20 culturally appropriate. The plans shall provide access to housing, and be designed to allow  
21 the person subject to petition (“Subject”) individual referred to AOT (“Referred Individual”) to  
22 live in the most independent, least restrictive setting possible. The City shall provide AOT  
23 services in each case through a community-based multidisciplinary and highly trained mental  
24 health team (“AOT Team”) with a staff-to-client ratio of no more than 10 clients per team  
25 member.

1           (c) The County Mental Health Director (“Director”) shall create a Care Team. The Care  
2 Team shall work closely with the Referred Individual and the individual requesting the AOT  
3 petition to maximize all opportunities within AOT to engage individuals who meet AOT criteria  
4 into voluntary treatment.

5           **SEC. 4113. Definitions.**

6           For the purposes of this Division II, the following words or phrases shall mean:

7           “Care Team” means a group of program staff charged with implementing AOT and  
8 shall consist of: 1) A forensic psychologist, who shall be the designated licensed mental  
9 health treatment provider responsible for clinical evaluation of the Referred Individual; 2) A  
10 peer specialist, who shall be a person who has lived experience with mental health recovery  
11 and has been trained to provide peer support to help the Referred Individual engage into  
12 treatment; and 3) A family liaison, who shall be a person who has had a family member with  
13 mental illness, and has been trained to provide lived experience to educate the referring  
14 source on the eligibility, benefits, limitations, and opportunities that AOT provides.

15           “City” means the City and County of San Francisco.

16           “Full Service Partnership (“FSP”)” means the collaborative relationship between the  
17 City and the Referred Individual and, when appropriate, the Referred Individual’s family,  
18 through which the City plans for, and provides, the full spectrum of community services so that  
19 the Referred Individual can achieve the identified goals. The City shall provide FSP services  
20 that conform to the requirements of California Code of Regulations Title 9, Section 3200.13c,  
21 defining FSP, or any successor provisions.

22           “Referred Individual” means the person on whose behalf an AOT petition is requested.

23           **SEC. 4114. Maximizing Engagement in Voluntary Treatment**

24           (a) Referral to AOT provides two key opportunities for voluntary engagement of  
25 individuals meeting AOT criteria prior to a court hearing:

1 (1) Immediately after the request for petition and before the filing of a petition  
2 with the court; and

3 (2) After the filing of a petition and before the conclusion of the court hearing on  
4 the petition.

5 (b) At each of the two opportunity points listed in Subsection 4114(a), the Care Team  
6 shall make every attempt to engage the Referred Individual into voluntary treatment.

7 (c) The Referred Individual shall at all times have the opportunity to voluntarily  
8 participate in a FSP. The Care Team shall work closely with the Referred Individual and the  
9 individual initiating the petition in an effort to engage the Referred Individual into a FSP as a  
10 preferred alternative to court-ordered treatment.

11 (d) All evaluations of the Referred Individual shall be conducted in the least restrictive  
12 setting.

13 (e) The Referred Individual may not be transported for evaluation by a peace, probation  
14 or parole officer, unless there is probable cause to believe that the individual meets the criteria  
15 required by California Welfare and Institutions Code § 5150, or there is no other means to  
16 safely transport the Referred Individual.

17 (f) The AOT Team shall also ensure that individuals referred for AOT who do not meet  
18 AOT criteria are evaluated for, and connected to, the appropriate level of mental health  
19 treatment.

20 **SEC. 41134115 PETITION.**

21 (a) The following persons may request the County Mental Health Director (“Director”),  
22 or the Director’s designee, to file a petition with the Superior Court for AOT:

23 (1) Any person 18 years or older with whom the Subject Referred Individual  
24 resides;

1                   (2) Any person who is the parent, spouse, adult sibling, or adult child of the  
2 Subject Referred Individual;

3                   (3) The director of a facility providing mental health services where the Subject  
4 Referred Individual resides, the director of a hospital where the Subject Referred Individual is  
5 hospitalized, or a licensed mental health treatment provider who treats the Subject Referred  
6 Individual or supervises the treatment of the Subject Referred Individual; or;

7                   (4) A peace, probation or parole officer assigned to supervise the Subject  
8 Referred Individual.

9                   (b) If the Director or designee finds that good cause supports the request, he or she  
10 may file a verified petition with the Superior Court that sets forth all of the following elements:

11                   (1) That the Subject Referred Individual is at least 18 years old and is present in  
12 the City;

13                   (2) That the Subject Referred Individual is suffering from a mental illness as  
14 defined in California Welfare and Institutions Code §§5600.3(b)(2) and (3), or any successor  
15 provisions;

16                   (3) That there has been a clinical determination that the Subject Referred  
17 Individual is unlikely to survive safely in the community without supervision;

18                   (4) That there is a history of the Subject's Referred Individual's lack of  
19 compliance with treatment, based on at least one of the following:

20                   (A) twice within the last 36 months, mental illness was a substantial factor  
21 in the Subject's Referred Individual's hospitalization or receipt of mental health services in jail,  
22 not including any period during which the Subject Referred Individual was hospitalized or  
23 incarcerated immediately preceding the filing of the petition, or

24                   (B) within the last 48 months, the Subject's Referred Individual's mental  
25 illness resulted in one or more acts of serious violent behavior toward himself or herself or

1 others, or the Subject Referred Individual threatened or attempted to cause serious physical  
2 harm to himself or herself or others, not including any period in which the Subject Referred  
3 Individual was hospitalized or incarcerated immediately preceding the filing of the petition;

4 (5) That the Subject Referred Individual has been offered the opportunity to  
5 participate in a treatment plan that includes all of the services set forth in Section 4112, but  
6 continues to fail to engage in treatment;

7 (6) That the Subject's Referred Individual's condition is substantially  
8 deteriorating;

9 (7) That participation in AOT would be the least restrictive placement necessary  
10 to ensure the Subject's Referred Individual's recovery and stability;

11 (8) That the Subject's Referred Individual's treatment history and current  
12 behavior indicate that the Subject Referred Individual needs AOT to prevent relapse or  
13 deterioration that would likely result in grave disability or serious harm to himself or herself or  
14 in a civil commitment under California Welfare and Institutions Code §§5150, et seq.; and,

15 (9) That it is likely that the Subject Referred Individual would benefit from AOT.

16 (c) The Director or designee shall submit with the petition the supporting affidavit of a  
17 licensed mental health treatment provider, or providers, testifying as to all of the elements  
18 identified in subsection (b). The provider must be willing and able to testify at the hearing and  
19 must base the affidavit on his or her personal examination of the Subject Referred Individual  
20 occurring no more than 10 days prior to the filing of the petition, unless the provider attempted  
21 to examine the Subject Referred Individual during that time, but the Subject Referred  
22 Individual refused to be examined, in which case the affidavit shall so state.

23 (d) After the Director or designee files the petition, but before the conclusion of the  
24 court hearing on the petition, the Subject Referred Individual or with the Subject's Referred  
25 Individual's consent, the Subject's Referred Individual's legal counsel, may waive the

1 Subject's Referred Individual's right to the hearing, and agree to obtain treatment under a  
2 written settlement agreement, provided an examining licensed mental health treatment  
3 provider states that the Subject Referred Individual could survive safely in the community.  
4 The term of the settlement agreement may not exceed 180 days, and the agreement shall be  
5 subject to the provisions of California Welfare and Institutions Code §5347.

6 (e) The Superior Court may order AOT for the Subject Referred Individual if the court  
7 finds that all of the elements of the petition, as required in subsection (b), have been  
8 established by clear and convincing evidence.

9 **SEC. 41144116. SUBJECT'S REFERRED INDIVIDUAL'S RIGHTS.**

10 (a) The Subject of the petition Referred Individual shall have the following rights:

11 (1) To receive personal service of all notices of hearings, as well as notice to  
12 parties designated by the Subject Referred Individual;

13 (2) To receive a copy of the court ordered evaluation;

14 (3) To be represented by counsel, and if the Subject Referred Individual cannot  
15 afford counsel, to be represented by the Public Defender;

16 (4) To be present at all hearings, unless the Subject Referred Individual  
17 knowingly waives such right;

18 (5) To be informed of the right to judicial review by habeas corpus;

19 (6) To present evidence, call and examine witnesses, and cross-examine  
20 witnesses, at the AOT hearing; and

21 (7) To be informed of the right to appeal the court's decisions.

22 (b) If Subject Referred Individual is not present at the AOT hearing, and the court  
23 orders AOT for the Subject Referred Individual, the Subject Referred Individual may file a  
24 habeas corpus petition challenging the court's imposition of AOT on the Subject Referred  
25 Individual, and AOT may not commence until that petition is resolved.



1           (c) During each 60-day period of AOT, the Subject Referred Individual may file a  
2 habeas corpus petition to require the Director, or the Director's designee, to prove that the  
3 Subject Referred Individual still meets all the criteria for AOT, as set forth in Section 4113(b).

4           (d) If the Subject Referred Individual refuses to participate in AOT, the court may order  
5 the Subject Referred Individual to meet with the AOT Team designated by the Director. The  
6 AOT Team shall attempt to gain the Subject's Referred Individual cooperation with the  
7 treatment plan ordered by the court. If the Subject Referred Individual is still not cooperative,  
8 he or she may be subject to a 72- hour hold pursuant to the requirements of California  
9 Welfare and Institutions Code §5346(f).

10           (e) Except as stated in subsection (d), failure by the Subject Referred Individual to  
11 comply with AOT is not a basis for involuntary civil commitment, or contempt of court.

12           (f) Involuntary medication is not authorized under AOT without a separate and specific  
13 court order.

14           (g) The court may order no more than six months of AOT. If the Director, or Director's  
15 designee, determines that further AOT for the Subject Referred Individual is appropriate, the  
16 Director must, prior to the expiration of the initial period, apply to the court for authorization to  
17 extend the time for a period not to exceed an additional 180 days.

18           (h) Every 60 days, the Director, or Director's designee must file an affidavit with the  
19 court affirming that the Subject Referred Individual continues to meet the criteria for AOT, as  
20 set forth in Section 4113(b). If the Subject Referred Individual disagrees with this affidavit, he  
21 or she has shall have the right to a hearing, at which the Director shall have the burden of  
22 proving that the Subject Referred Individual continues to meet the criteria for AOT.

23           **SEC. 41154117. TRAINING AND REGULATIONS.**

24           (a) The Director of Public Health shall, develop a training and education program as  
25 required by California Welfare and Institutions Code §5349.1. in consultation with the State

1 Department of Health Care Services, client and family advocacy organizations, and other  
2 stakeholders, develop a training and education program for purposes of improving the delivery  
3 of services to individuals with mental illness who are, or who are at risk of being, involuntarily  
4 committed to AOT. This training shall be provided to mental health treatment providers and to  
5 other individuals, including, but not limited to, mental health professionals, law enforcement  
6 officials, and certification hearing officers involved in making treatment and involuntary  
7 commitment decisions.

8 (b) The training shall include both of the following:

9 (1) Information relative to legal requirements for detaining a person for  
10 involuntary inpatient and outpatient treatment, including criteria to be considered with respect  
11 to determining if a person is considered to be gravely disabled.

12 (2) Methods for ensuring that decisions regarding involuntary treatment as  
13 provided for in this part direct patients toward the most effective treatment. Training shall  
14 include an emphasis on each patient's right to provide informed consent to assistance.

15 (c) The Director of Public Health is authorized to promulgate regulations to implement  
16 this Division II.

17 **SEC. 41164118. REPORTS.**

18 (a) The Department of Public Health shall comply with the reporting requirements as  
19 set forth in California Welfare & Institutions Code §5348(d).

20 (b) The Department of Public Health shall provide an annual report to the Board of  
21 Supervisors on the number of participants in AOT, the length of their treatment, the outcome  
22 of their treatment, and other matters the Department deems relevant.

23 (c) The Department of Public Health shall retain an external consultant to evaluate the  
24 efficacy of the AOT program, including but not limited to collecting and analyzing information  
25 regarding the demographics of Referred Individuals and the cost of the program. By no later

1 than three years after the effective date of this Section 4118, the Department of Public Health  
2 shall provide a copy of this external evaluation to the Board of Supervisors.

3 **SEC. 41174119. UNDERTAKING FOR THE GENERAL WELFARE.**

4 In enacting and implementing this Division II, the City is assuming an undertaking only  
5 to promote the general welfare. It is not assuming, nor is it imposing on its officers and  
6 employees, an obligation for breach of which it is liable in money damages to any person who  
7 claims that such breach proximately caused injury.

8  
9 Section 2. Effective Date. This ordinance shall become effective 30 days after  
10 enactment. Enactment occurs when the Mayor signs the ordinance, the Mayor returns the  
11 ordinance unsigned or does not sign the ordinance within ten days of receiving it, or the Board  
12 of Supervisors overrides the Mayor's veto of the ordinance.

13  
14 APPROVED AS TO FORM:  
15 DENNIS J. HERRERA, City Attorney

16 By: \_\_\_\_\_  
17 VIRGINIA DARIO ELIZONDO  
Deputy City Attorney

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