No. 1227

Introduced by Senator Eggman

February 17, 2022

An act to amend Section 5150 Sections 5270.35 and 5270.55 of the Welfare and Institutions Code, relating to mental health.

LEGISLATIVE COUNSEL'S DIGEST

SB 1227, as amended, Eggman. Involuntary—commitment. *commitment: intensive treatment.*

Existing law, the Lanterman-Petris-Short Act, provides for the involuntary commitment and treatment of persons with specified mental disorders for the protection of the persons committed. Under the act, when a person, as a result of a mental health disorder, is a danger to others, or to themselves, or gravely disabled, the person may, upon probable cause, be taken into custody and placed in a facility designated by the county and approved by the State Department of Health Care Services for up to 72 hours for evaluation and treatment. Under existing law, if a person is detained for 72 hours under those provisions, and has received an evaluation, the person may be certified for not more than 14 days of intensive treatment, as specified. Existing law further authorizes a person to be certified for an additional period of not more than 30 days of intensive treatment if the person remains gravely disabled and is unwilling or unable to accept treatment voluntarily. Existing law requires the person to be released at the end of the 30 days, except under specified circumstances, including, but not limited to, when the patient is subject to a conservatorship petition filed pursuant to specified provisions. Existing law requires an evaluation to be made when a gravely disabled person may need to be detained

beyond the initial 14-day period, as to whether the person is likely to qualify for appointment of a conservator, and, if so, requires that referral to be made, as specified.

This bill would authorize an additional 30-day period of treatment if the patient is still in need of intensive treatment and the certification for the additional 30-day treatment period has begun. The bill also would make conforming changes to the evaluation requirements for determining whether the patient is likely to qualify for appointment of a conservator.

This bill would make technical, nonsubstantive changes to those provisions.

Vote: majority. Appropriation: no. Fiscal committee: no. State-mandated local program: no.

The people of the State of California do enact as follows:

SECTION 1. Section 5270.35 of the Welfare and Institutions
 Code is amended to read:

3 5270.35. (a) A certification pursuant to this article shall be for no more than 30 days of intensive treatment, except as provided 4 5 in paragraph (4) of subdivision (b), and shall terminate only as 6 soon as the psychiatrist directly responsible for the person's 7 treatment believes, as a result of the psychiatrist's personal 8 observations, that the person no longer meets the criteria for the 9 certification, or is prepared to voluntarily accept treatment on a referral basis or to remain on a voluntary basis in the facility 10 11 providing intensive treatment. However, in those situations in 12 which both a psychiatrist and psychologist have personally evaluated or examined a person who is undergoing intensive 13 14 treatment and there is a collaborative treatment relationship 15 between the psychiatrist and the psychologist, either the psychiatrist 16 or psychologist may authorize the release of the person but only after they have consulted with one another. In the event of a clinical 17 18 or professional disagreement regarding the early release of a person 19 who is undergoing intensive treatment, the person may not be 20 released unless the facility's medical director overrules the decision of the psychiatrist or psychologist opposing the release. Both the 21 22 psychiatrist and psychologist shall enter their findings, concerns, 23 or objections into the person's medical record. If any other 24 professional person who is authorized to release the person believes

1 the person should be released before 30 days have elapsed, and

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2 the psychiatrist directly responsible for the person's treatment3 objects, the matter shall be referred to the medical director of the

4 facility for the final decision. However, if the medical director is

5 not a psychiatrist, he or she *they* shall appoint a designee who is

6 a psychiatrist. If the matter is referred, the person shall be released

before 30 days have elapsed only if the psychiatrist believes, as a

8 result of the psychiatrist's personal observations, that the person

9 no longer meets the criteria for certification, or is prepared to

10 voluntarily accept treatment on referral or to remain on a voluntary

11 basis in the facility providing intensive treatment.

(b) Any person who has been certified for 30 days of intensive
treatment under this article, shall be released at the end of 30 days
unless one or more of the following is applicable:

15 (1) The patient agrees to receive further treatment on a voluntary 16 basis.

17 (2) The patient is the subject of a conservatorship petition filed18 pursuant to Chapter 3 (commencing with Section 5350).

(3) The patient is the subject of a petition for postcertification
treatment of a dangerous person filed pursuant to Article 6
(commencing with Section 5300).

22 (4) The patient is still in need of intensive services and the 23 certification for an additional 30 days has begun. Under no 24 circumstance shall a person be certified under this article for more

25 than two consecutive periods of 30 days.

(c) The amendments to this section made by Assembly Bill 348
of the 2003–04 Regular Session shall not be construed to revise

28 or expand the scope of practice of psychologists, as defined in

29 Chapter 6.6 (commencing with Section 2900) of Division 2 of the30 Business and Professions Code.

31 SEC. 2. Section 5270.55 of the Welfare and Institutions Code 32 is amended to read:

33 5270.55. (a) Whenever it is contemplated that a gravely 34 disabled person may need to be detained beyond the end of the

35 14-day period of intensive treatment and prior to proceeding with

an additional 30-day certification, *or beyond the end of an initial*

37 *30-day period of intensive treatment and prior to proceeding with*

38 *a second consecutive 30-day certification*, the professional person

39 in charge of the facility shall cause an evaluation to be made, based

40 on the patient's current condition and past history, as to whether

it appears that the person, even after up to 30 days of additional
treatment, is likely to qualify for appointment of a conservator. If
the appointment of a conservator appears likely, the
conservatorship referral shall be made during the 14-day current
period of intensive treatment.

6 (b) If it appears that with up to 30 days additional treatment a 7 person is likely to reconstitute sufficiently to obviate the need for 8 appointment of a conservator, then the person may be certified for 9 the additional 30 days.

(c) Where no conservatorship referral has been When a 10 conservatorship referral has not been made during the 14-day 11 12 period and-where it appears during the 30-day certification-it appears that the person is likely to require the appointment of a 13 14 conservator, or when a conservatorship referral has not been made 15 during the initial 30-day period and it appears during the second consecutive 30-day certification that the person is likely to require 16 17 the appointment of a conservator, then the conservatorship referral shall be made to allow sufficient time for conservatorship 18 19 investigation and other related procedures. If a temporary 20 conservatorship is obtained, it shall run concurrently with and not 21 consecutively to the 30-day certification period. The conservatorship hearing shall be held by the 30th day of the 22 certification period. The maximum involuntary detention period 23 for gravely disabled persons pursuant to Sections 5150, 5250 and 24 25 5270.15 shall be limited to-47 77 days. Nothing in this section 26 shall This section does not prevent a person from exercising his 27 or her their right to a hearing as stated in Sections 5275 and 5353.

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All matter omitted in this version of the bill appears in the bill as introduced in the Senate, February 17, 2022. (JR11)

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