

**Mental Health Issues Implementation Task Force**  
**Pending Legislation of Interest: 2015**  
**\*\*As of May 4, 2015\*\***  
**(Provided by the Judicial Council's Office of Governmental Affairs)**

*Forensic bills:*

**AB 1006 (Levine), as amended April 21, 2015 – Prisoners: mental health treatment**  
[http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab\\_1001-1050/ab\\_1006\\_bill\\_20150421\\_amended\\_asm\\_v98.pdf](http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab_1001-1050/ab_1006_bill_20150421_amended_asm_v98.pdf)

This bill, which is sponsored by the Steinberg Institute:

- 1) Allows the defendant or the prosecutor to submit evidence that the defendant suffers from a diagnosable mental illness that was a substantial factor that contributed to the defendant's criminal conduct, when a defendant has pled guilty or no contest to, or been convicted of, an offense that will result in a sentence to state prison or county jail.
- 2) Requires the evidence of diagnosable mental illness be submitted to the court after the defendant's plea or conviction but before his or her sentencing.
- 3) Requires the court to consider the above-referenced evidence in conjunction with the defendant's sentencing.
- 4) Allows the court, upon consideration such evidence *and* a determination that it is in the best interests of public safety, to order one or more of the following:
  - a) That the defendant serve, if the defendant agrees, all or a part of his or her sentence in a residential mental health treatment facility instead of in the state prison or county jail, unless that placement would pose an unreasonable risk of danger to public safety. Specifies that this option does *not* apply to a defendant that has a prior conviction for certain serious or violent felonies.
  - b) The California Department of Corrections and Rehabilitation (CDCR) or county jail authority to place the defendant in a mental health program within the state prison or county jail system, respectively, at a level of care determined to be appropriate by the department's mental staff or county mental health staff, within 30 days of the defendant's placement in the state prison or county jail.
  - c) The CDCR or the county jail authority, as applicable, regardless of the type of crime committed, to prepare a postrelease mental health treatment plan six months prior to the defendant's release to parole or postrelease community supervision. Provides that the treatment plan must specify the manner in which the defendant will receive mental health treatment services following that release, and must address, if applicable and in the discretion of the court, medication management, housing, and substance abuse treatment.

5) Allows the defendant or prosecutor to, at any time, petition the court for approval to transfer the defendant from a residential mental health treatment facility to a mental health program within the state prison or county jail for the remainder of the defendant's sentence.

6) Allows the defendant, prosecutor, CDCR or county jail authority, as applicable, to at any time, petition the court for permission to remove the defendant from a mental health program within the state prison or county jail authority.

7) Permits the defendant, prosecutor, CDCR or county jail authority, as applicable, to at any time, petition the court for dismissal of the requirement that CDCR or the county jail authority, as applicable, prepare a postrelease mental health treatment plan.

8) Provides that the defendant shall have the right to counsel for all proceedings under the bill.

*Status:* Assembly Appropriations Committee

**AB 1237 (Brown), as introduced – State hospitals: placement evaluations**

[http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab\\_1201-1250/ab\\_1237\\_bill\\_20150227\\_introduced.pdf](http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab_1201-1250/ab_1237_bill_20150227_introduced.pdf)

This bill, which is cosponsored by AFSCME and the Union of American Physicians and Dentists, would require the Department of State Hospitals (DSH) to establish a pool of psychiatrists and psychologists with forensic skills who are employees of the department. The bill also would require DSH to create evaluation panels from this pool of psychiatrists and psychologists, with each panel consisting of three to five, inclusive, forensic psychiatrists or psychologists for the purpose of determining whether a defendant who has been found incompetent to stand trial should be placed on outpatient status or confined in a state hospital or other treatment facility. In addition, the bill specifies that when a defendant pleads guilty by reason of insanity or the question of mental competence is before the court, the court must select an evaluation panel established by DSH to examine the defendant and investigate his or her mental status. [Note: This bill is virtually identical to the April 23, 2014 version of last year's AB 2543 (Levine), which the MHIITF opposed.]

*Status:* Assembly Public Safety Committee (2-yr bill)

**SB 453 (Pan), as amended April 28, 2015 – Prisons: involuntary medication**

[http://www.leginfo.ca.gov/pub/15-16/bill/sen/sb\\_0451-0500/sb\\_453\\_bill\\_20150428\\_amended\\_sen\\_v97.pdf](http://www.leginfo.ca.gov/pub/15-16/bill/sen/sb_0451-0500/sb_453_bill_20150428_amended_sen_v97.pdf)

This bill, which is sponsored by the Union of American Physicians and Dentists, would amend the provisions in Penal Code section 1370 governing involuntary medication of persons found incompetent to stand trial by authorizing the treating psychiatrist, if he or she determines that there is a need, based on factors such as preserving rapport with the patient, to request that the facility medical director designate another psychiatrist to act in the place of the treating psychiatrist for purposes of the involuntary medication

procedures. The bill specifies further that if the medical director of the facility designates another psychiatrist to act, the treating psychiatrist must brief the acting psychiatrist of the relevant facts of the case and the acting psychiatrist must examine the patient prior to the hearing.

*Status:* Senate Appropriations Committee

*LPS bills:*

**AB 59 (Waldron), as amended March 20, 2015 – Mental health services: assisted outpatient treatment**

[http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab\\_0051-0100/ab\\_59\\_bill\\_20150420\\_amended\\_asm\\_v96.pdf](http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab_0051-0100/ab_59_bill_20150420_amended_asm_v96.pdf)

This bill would expand the application of the Assisted Outpatient Treatment (AOT) Demonstration Project Act of 2002 (“Laura’s Law”) by: (1) deleting the January 1, 2017, repeal date for, thereby extending the program indefinitely; (2) eliminating the requirement for any county that elects to offer AOT to make a finding, prior to authorizing the program, that other mental health programs, including but not limited to children’s mental health services, will not be reduced as a result of implementation of AOT; and, (3) authorizing the professional staff of the agency or facility which has provided a person with intensive inpatient treatment to request that the county mental health director file a petition in the superior court requiring the person to participate in AOT.

*Status:* Failed passage in Assembly Judiciary Committee; reconsideration granted

**AB 193 (Maienschein), as amended April 14, 2015 - Mental health: conservatorship hearings**

[http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab\\_0151-0200/ab\\_193\\_bill\\_20150414\\_amended\\_asm\\_v98.pdf](http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab_0151-0200/ab_193_bill_20150414_amended_asm_v98.pdf)

This bill, which is sponsored by the Conference of California Bar Associations (CCBA): (1) permits a court, after a hearing attended by the proposed conservatee or the proposed conservatee's counsel, or both, to recommend an LPS conservatorship to the county officer providing conservatorship investigations when the court, in consultation with a physician providing comprehensive evaluation or intensive treatment, in a probate conservatorship hearing determines, based on evidence presented to the court, including medical evidence, that a person for whom a probate conservatorship has been established, may be gravely disabled as a result of mental disorder or chronic alcoholism and is unwilling to accept, or incapable of accepting treatment voluntarily; (2) specifies that if the probate conservatee cannot afford counsel, the court shall appoint counsel for him or her; (3) permits the officer, if the officer providing the conservatorship investigation concurs with the recommendation of the court, to petition the appropriate superior court to establish the LPS conservatorship; (4) requires the officer providing the conservatorship investigation to file his or her report with the court that made the conservatorship investigation within 30 days of receiving a recommendation; and, (5) requires an existing probate conservator, if the conservatorship is recommended by the court, to disclose any records or information that may facilitate the investigation.

*Status:* Assembly Appropriations Committee

**AB 1193 (Eggman), as amended April 30, 2015 – Mental health services: assisted outpatient treatment**

[http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab\\_1151-1200/ab\\_1193\\_bill\\_20150430\\_amended\\_asm\\_v98.pdf](http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab_1151-1200/ab_1193_bill_20150430_amended_asm_v98.pdf)

This bill would delete the provisions that authorize a county to elect to participate in the AOT (“Laura’s Law”) program, and instead would require each county to implement the provisions of Laura’s Law unless the county elects not to participate in the program by enacting a resolution passed by the county board of supervisors. The bill also would extend the January 1, 2017, repeal date of those provisions until January 1, 2022. In addition, the bill would authorize a superior court judge to request a petition be filed for involuntary outpatient commitment pursuant to Laura’s Law for a person meeting specified criteria who appears before the judge. [Note: the bill was amended in the Assembly Judiciary Committee to reformulate the county “opt-out” requirements, and to limit which superior court judges can request a petition be filed under Laura’s Law.

*Status:* Assembly Appropriations Committee

**AB 1194 (Eggman), as introduced – Mental health: involuntary commitment**

[http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab\\_1151-1200/ab\\_1194\\_bill\\_20150227\\_introduced.pdf](http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab_1151-1200/ab_1194_bill_20150227_introduced.pdf)

This bill would amend WIC section 5150 (i.e., 72-hour holds under the LPS Act) to provide that, for purposes of determining whether a person, as a result of a mental health disorder, is a danger to others, or a danger to himself or herself, danger constitutes a present risk of harm that requires consideration of the historical course of a person’s mental health disorder pursuant to Section 5150.05, and shall not be limited to imminent or immediate risk of harm to others or to himself or herself. The bill would also require the application for a 72-hour hold to include whether the historical course of a person’s mental disorder was considered in the applicant’s determination of probable cause.

*Status:* Assembly Appropriations Committee

**AB 1300 (Ridley-Thomas), as introduced – Mental health: involuntary commitment**

[http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab\\_1251-1300/ab\\_1300\\_bill\\_20150430\\_amended\\_asm\\_v96.pdf](http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab_1251-1300/ab_1300_bill_20150430_amended_asm_v96.pdf)

This bill, among other things, would reorganize and make changes to the provisions relating to the detention for evaluation and treatment of a person who may be subject to the LPS Act, including specifying procedures for delivery of those individuals to various facilities; evaluation of the person for probable cause for detention for evaluation and treatment; terms and length of detention, where appropriate, in various types of facilities; and criteria for release from defined designated facilities and non-designated hospitals. The bill would also authorize a provider of ambulance services to transfer a person who is voluntarily transferring to a designated facility for evaluation and treatment. In addition, the bill would make changes to the methods by which law enforcement is notified of the release of a person detained for evaluation and treatment.

*Status:* Assembly Appropriations Committee

*Dependent children/juveniles – psychotropic medication bills:*

**AB 1067 (Gipson), as amended March 26, 2015 – Foster children: psychotropic medication**

[http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab\\_1051-1100/ab\\_1067\\_bill\\_20150326\\_amended\\_asm\\_v98.pdf](http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab_1051-1100/ab_1067_bill_20150326_amended_asm_v98.pdf)

This bill would specify that all minors and non-minors in foster care have certain rights relating to the administration of psychotropic medication, including the right to: be informed of the risks and benefits of the medication; appear before the judge determining if psychotropic medication should be administered, with an advocate of his or her choice, and state that he or she objects to any recommendation to prescribe psychotropic medication; refuse the administration of psychotropic and other medications consistent with applicable law or unless immediately necessary for the preservation of life or the prevention of serious bodily harm; and have a prescribing doctor disclose any financial ties he or she may have to pharmaceutical companies.

*Status:* Assembly Human Services Committee

**SB 238 (Mitchell), as amended April 7, 2015 – Foster care: psychotropic medication**

[http://www.leginfo.ca.gov/pub/15-16/bill/sen/sb\\_0201-0250/sb\\_238\\_bill\\_20150407\\_amended\\_sen\\_v97.pdf](http://www.leginfo.ca.gov/pub/15-16/bill/sen/sb_0201-0250/sb_238_bill_20150407_amended_sen_v97.pdf)

Among other things, this bill would require the Judicial Council, on or before July 1, 2016, to, in consultation with the State Department of Social Services, the State Department of Health Care Services, and stakeholders, develop updates to the rules and forms for implementation of the provisions governing court orders regarding the administration of psychotropic medications for certain wards or dependent children. The bill would require the updates to ensure, among other things, that the child and his or her caregiver and court-appointed special advocate, if any, have an opportunity to provide meaningful input on the medications being prescribed, and would require the updates to include a process for periodic oversight by the court of orders regarding the administration of psychotropic medications.

*Status:* Senate Appropriations Committee

**SB 253 (Monning), as amended April 22, 2015 – Dependent children: psychotropic medication**

[http://www.leginfo.ca.gov/pub/15-16/bill/sen/sb\\_0251-0300/sb\\_253\\_bill\\_20150422\\_amended\\_sen\\_v97.pdf](http://www.leginfo.ca.gov/pub/15-16/bill/sen/sb_0251-0300/sb_253_bill_20150422_amended_sen_v97.pdf)

This bill would require that an order of the juvenile court authorizing psychotropic medication shall require clear and convincing evidence that the administration of the drug is in the best interest of the child, as specified, and granted only if the court makes certain findings. This bill would also prohibit the authorizing of psychotropic medication without a second opinion under specified circumstances, including for a child who is under five years of age or where the request would result in the administration of three or more psychotropic medications concurrently. This bill would also prohibit the

authorization of psychotropic medications unless the court is provided documentation that appropriate lab screenings, measurements, or tests have been completed no more than 30 days prior to submission of the request to the court. This bill would require the court, no later than 45 days following an authorization for psychotropic medication, to conduct a review to determine specified information regarding the efficacy of the child's treatment plan, and would make other conforming changes. Finally, the bill would require the Judicial Council, on or before July 1, 2016, to adopt rules and forms to implement these provisions.

*Status:* Senate Appropriations Committee

**SB 484 (Beall), as amended April 22, 2015 – Juveniles: psychotropic medications**

[http://www.leginfo.ca.gov/pub/15-16/bill/sen/sb\\_0451-0500/sb\\_484\\_bill\\_20150422\\_amended\\_sen\\_v98.pdf](http://www.leginfo.ca.gov/pub/15-16/bill/sen/sb_0451-0500/sb_484_bill_20150422_amended_sen_v98.pdf)

Among other things, this bill would require the director of the State Department of Social Services to include in the annual list of licensed community care facilities specified information regarding administering psychotropic medications to children in those facilities. The bill would also require the department, if it determines based on that information that a facility is administering psychotropic medications to children at a rate exceeding the average authorization for all group homes, to inspect that facility at least once a year to examine specified factors that contribute to the high utilization of psychotropic medications. In addition, the bill would require an inspected facility to submit to the department, within 60 days of that inspection, a corrective action plan including steps the facility shall take to reduce the utilization of psychotropic medications.

*Status:* Senate Appropriations Committee

*Peace officer training bills:*

**AB 1227 (Cooper), as amended March 26, 2015 – Peace officer training: mental health**

[http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab\\_1201-1250/ab\\_1227\\_bill\\_20150326\\_amended\\_asm\\_v98.pdf](http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab_1201-1250/ab_1227_bill_20150326_amended_asm_v98.pdf)

This bill would require the Commission on Peace Officer Standards and Training (POST), in collaboration with relevant stakeholders, to study and submit a report to the Legislature, on or before December 31, 2017, that assesses the statuses of the training courses described above, assesses whether the courses cover all appropriate topics, and identifies areas where additional training may be needed.

*Status:* Assembly Appropriations Committee (suspense)

**SB 11 (Beall), as amended April 15, 2015 - Peace officer training: mental health**

[http://www.leginfo.ca.gov/pub/15-16/bill/sen/sb\\_0001-0050/sb\\_11\\_bill\\_20150415\\_amended\\_sen\\_v96.pdf](http://www.leginfo.ca.gov/pub/15-16/bill/sen/sb_0001-0050/sb_11_bill_20150415_amended_sen_v96.pdf)

This bill would require POST to include in its basic training course a promising or evidence-based behavioral health classroom training course and instructor-led active learning, such as scenario-based training, to train law enforcement officers to recognize,

deescalate, and refer persons with mental illness or intellectual disability who are in crisis. The bill would require that this promising or evidence-based behavioral health classroom training course and instructor-led active learning take place in the academy, be at least 20 hours long, and be in addition to the current hour requirement leading to the basic certificate issued by POST. The bill would also require POST to establish and keep updated a promising or evidence-based behavioral health continuing training course that is equivalent in importance to the perishable skills training provided by POST. The bill would require that this promising or evidence-based behavioral health continuing training course be a minimum of 4 consecutive hours. The bill would require each law enforcement officer with a rank of supervisor or below and who is assigned to patrol duties or to supervise officers who are assigned to patrol duties to complete this course every 4 years.

*Status:* Senate Appropriations Committee

**SB 29 (Beall), as amended April 15, 2015 - Peace officer training: mental health**

[http://www.leginfo.ca.gov/pub/15-16/bill/sen/sb\\_0001-0050/sb\\_29\\_bill\\_20150415\\_amended\\_sen\\_v96.pdf](http://www.leginfo.ca.gov/pub/15-16/bill/sen/sb_0001-0050/sb_29_bill_20150415_amended_sen_v96.pdf)

This bill would require POST to require field training officers who are instructors for the field training program to have 40 hours of promising or evidence-based behavioral health training, as specified. The bill would also require POST to require as part of its field training program 20 hours of field training relating to law enforcement interaction with persons with mental illness or intellectual disability, to be completed as specified.

*Status:* Senate Appropriations Committee

*SVP bills:*

**AB 1003 (Nazarian), as amended April 22, 2015 – Mental health: Sexually violent predators**

[http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab\\_1001-1050/ab\\_1003\\_bill\\_20150422\\_amended\\_asm\\_v97.pdf](http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab_1001-1050/ab_1003_bill_20150422_amended_asm_v97.pdf)

This bill would require the Department of State Hospitals (DSH) to consult, on or before January 30, 2016, with a committee comprised of representatives of specified organizations to make recommendations regarding possible changes to the standardized assessment protocol. The bill would require DSH, on or before March 1, 2016, to initiate the regulatory process to update the standardized assessment protocol, as specified. The bill would also create a 7-member oversight board to advise the Governor and the Legislature regarding the civil commitment of sexually violent predators comprised of representatives selected by the DSH and other organizations, as specified. The bill would require the oversight board to meet at least 6 times per year and, beginning January 1, 2017, to make an annual report to the Governor and the Legislature including the board's recommendations, as specified.

*Status:* Assembly Appropriations Committee

**SB 507 (Pavley), as amended April 30, 2015 – Sexually violent predators**

[http://www.leginfo.ca.gov/pub/15-16/bill/sen/sb\\_0501-0550/sb\\_507\\_bill\\_20150430\\_amended\\_sen\\_v98.pdf](http://www.leginfo.ca.gov/pub/15-16/bill/sen/sb_0501-0550/sb_507_bill_20150430_amended_sen_v98.pdf)

This bill would require the evaluator performing an updated evaluation of a sexually violent predator (SVP) to include a statement listing the medical and psychological records reviewed by the evaluator, and would direct the court to issue a subpoena, upon the request of either party to the civil commitment proceeding, for a certified copy of these records. The bill would authorize the attorneys to use the records in the SVP commitment proceeding, but would prohibit disclosure of the records for any other purpose. The bill would also prohibit the attorney petitioning for an SVP commitment from providing access to these records to any third party, including an expert retained or sought to be retained by that attorney, without the consent of the court upon noticed motion.

*Status:* Senate Appropriations Committee

*Other bills of general interest:*

**AB 253 (Hernandez), as amended April 30, 2015 – Mental Health**

[http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab\\_0251-0300/ab\\_253\\_bill\\_20150430\\_amended\\_asm\\_v97.pdf](http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab_0251-0300/ab_253_bill_20150430_amended_asm_v97.pdf)

Among other things, this bill would expand the membership of the Mental Health Services Oversight and Accountability Commission (created under Prop. 63) to include a person with knowledge and experience in reducing mental health disparities, and a veteran with knowledge about veteran's mental health issues.

*Status:* Assembly Appropriations Committee

**AB 468 (Jones), as introduced - Wards and conservatees: mental health**

[http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab\\_0451-0500/ab\\_468\\_bill\\_20150223\\_introduced.pdf](http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab_0451-0500/ab_468_bill_20150223_introduced.pdf)

This technical bill, which is sponsored by the Conference of California Bar Associations, would delete an obsolete provision that requires the Director of the Department of State Hospitals to adopt and issue regulations defining "mental health treatment facility" for the purposes of Probate Code section 2356 (which generally prohibits the involuntary commitment of a ward or conservatee to a mental health treatment facility).

*Status:* Senate Rules Committee

**AB 745 (Chau), as amended April 6, 2015- Mental Health Services Oversight and Accountability Commission**

[http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab\\_0701-0750/ab\\_745\\_bill\\_20150406\\_amended\\_asm\\_v98.pdf](http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab_0701-0750/ab_745_bill_20150406_amended_asm_v98.pdf)

The bill would require the Governor to appoint an additional member to the Mental Health Services Oversight and Accountability Commission (created under Prop. 63) who has experience providing supportive housing to persons with a severe mental illness. The bill also states the findings and declarations of the Legislature that this change is consistent with and furthers the intent of the act.

*Status:* Assembly Floor



**AB 847 (Mullin and Ridley-Thomas), as amended April 30, 2015 – Mental health: community-based services**

[http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab\\_0801-0850/ab\\_847\\_bill\\_20150430\\_amended\\_asm\\_v97.pdf](http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab_0801-0850/ab_847_bill_20150430_amended_asm_v97.pdf)

This bill would require the State Department of Health Care Services to apply to the U.S. Secretary of Health and Human Services for a specified planning grant that is designed to improve mental health services provided by certified community behavioral health clinics to certain Medi-Cal beneficiaries. The bill would also declare that it is to take effect immediately as an urgency statute.

*Status:* Assembly Appropriations Committee

**AB 861 (Maienschein), as amended April 30, 2015 – Mental health: community-based services**

[http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab\\_0851-0900/ab\\_861\\_bill\\_20150430\\_amended\\_asm\\_v97.pdf](http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab_0851-0900/ab_861_bill_20150430_amended_asm_v97.pdf)

This bill would require the State Department of Health Care Services to apply for a specified grant administered by the U.S. Secretary of Health and Human Services that is designed to improve mental health services provided by certified community behavioral health clinics to certain Medi-Cal beneficiaries. This bill would also require the department to work with counties and other stakeholders in developing its proposal. In addition, the bill would require the proposal to include plans for counties to redirect a portion of the funds currently used to match federal funds to providing increased housing opportunities for individuals with severe mental illnesses, as specified. The bill would also declare that it is to take effect immediately as an urgency statute.

*Status:* Assembly Appropriations Committee

**AB 918 (Stone), as amended April 6, 2015– Health and care facilities: seclusion and behavioral restraints**

[http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab\\_0901-0950/ab\\_918\\_bill\\_20150406\\_amended\\_asm\\_v98.pdf](http://www.leginfo.ca.gov/pub/15-16/bill/asm/ab_0901-0950/ab_918_bill_20150406_amended_asm_v98.pdf)

The bill would require, on or before January 1, 2017, the state Secretary of Health and Human Services to take steps to establish a system of mandatory, consistent, timely, and publicly accessible data collection regarding the use of seclusion and behavioral restraints in specified facilities, including adult residential facilities, that utilize seclusion or behavioral restraints. The bill would require these facilities to report to the protection and advocacy agency designated by the Governor each death or serious injury of a person occurring during, or related to, the use of seclusion or behavioral restraints.

*Status:* Assembly Appropriations Committee (suspense)

**SB 130 (Roth), as amended April 16, 2015 – Veterans: mental health**

[http://www.leginfo.ca.gov/pub/15-16/bill/sen/sb\\_0101-0150/sb\\_130\\_bill\\_20150416\\_amended\\_sen\\_v98.pdf](http://www.leginfo.ca.gov/pub/15-16/bill/sen/sb_0101-0150/sb_130_bill_20150416_amended_sen_v98.pdf)

This bill would require specified state departments to establish and implement a grant process that will fund certain mental health supportive services for veterans who reside

in housing provided by the State via the Veterans Housing and Homelessness Prevention Act.

*Status:* Senate Rules Committee

**SB 621(Hertzberg), as introduced – Mentally ill offender crime reduction grants**

[http://www.leginfo.ca.gov/pub/15-16/bill/sen/sb\\_0601-0650/sb\\_621\\_bill\\_20150227\\_introduced.pdf](http://www.leginfo.ca.gov/pub/15-16/bill/sen/sb_0601-0650/sb_621_bill_20150227_introduced.pdf)

This bill would expand the authorized use of funds from the Mentally Ill Offender Crime Reduction (MIOCR) grant program to include diversion programs that offer appropriate mental health treatment and services.

*Status:* Senate Appropriations Committee (suspense)