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Workplace Violence Prevention Laws & Regulations

SB - 43 Behavioral Health



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An act to amend Section 1799.111 of the Health and Safety Code, and to amend Sections 5008, 5350, and 5358 of, and to add Section 5122 to, the Welfare and Institutions Code, relating to mental health.

legislative counsel's digest

SB 43, as amended, Eggman. Behavioral health.

Existing law, the Lanterman-Petris-Short Act, provides for the involuntary commitment and treatment of a person who is a danger to themselves or others or who is gravely disabled. Existing law, for purposes of involuntary commitment, defines “gravely disabled” as either a condition in which a person, as a result of a mental health disorder, is unable to provide for their basic personal needs for food, clothing, or shelter or has been found mentally incompetent, as specified.

This bill expands the definition of “gravely disabled” to also include a condition in which a person, due to a mental health disorder or a 95 substance use disorder, or both, is at substantial risk of serious harm, or is currently experiencing serious harm to their physical or mental health. The bill defines “serious harm” for purposes of these provisions to mean significant deterioration, debilitation, or illness due to a person’s failure to meet certain conditions, including, among other things, attend to needed personal or medical care and attend to self-protection or personal safety. The bill specifies circumstances under which substantial risk of serious harm may be evidenced, as specified. The bill would make conforming changes. To the extent that this change increases the level of service required of county mental health departments, the bill would impose a state-mandated local program.



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Existing law also authorizes the appointment of a conservator, in the County of Los Angeles, the County of San Diego, or the City and County of San Francisco, for a person who is incapable of caring for the person's own health and well-being due to a serious mental illness and substance use disorder. Existing law establishes the hearsay rule, under which evidence of a statement is generally inadmissible if it was made other than by a witness while testifying at a hearing and is offered to prove the truth of the matter stated. Existing law sets forth exceptions to the hearsay rule to permit the admission of specified kinds of evidence.

Under this bill, for purposes of an expert witness in any proceeding relating to the appointment or reappointment of a conservator pursuant to the above-described provisions, the statements of specified health practitioners or a licensed clinical social worker included in the medical record would not be hearsay. The bill would authorize the court to grant a reasonable continuance if an expert witness in a proceeding relied on the medical record and the medical record has not been provided to the parties or their counsel.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that, if the Commission on State Mandates determines that the bill contains costs mandated by the state, reimbursement for those costs shall be made pursuant to the statutory provisions noted above.

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



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e 1 SECTION 1. Section 1799.111 of the Health and Safety Code line
2 is amended to read: line
3 1799.111. (a) Subject to subdivision (b), a licensed general line
4 acute care hospital, as defined in subdivision (a) of Section 1250, line
5 that is not a county-designated facility pursuant to Section 5150 line
6 of the Welfare and Institutions Code, a licensed acute psychiatric line
7 hospital, as defined in subdivision (b) of Section 1250, that is not line
8 a county-designated facility pursuant to Section 5150 of the line
9 Welfare and Institutions Code, licensed professional staff of those line
10 hospitals, or any physician and surgeon, providing emergency line
11 medical services in any department of those hospitals to a person line
12 at the hospital is not civilly or criminally liable for detaining a line
13 person if all of the following conditions exist during the detention: line
14 (1) The person cannot be safely released from the hospital line
15 because, in the opinion of the treating physician and surgeon, or line
16 a clinical psychologist with the medical staff privileges, clinical line
17 privileges, or professional responsibilities provided in Section line
18 1316.5, the person, as a result of a mental health disorder, presents line
19 a danger to themselves, or others, or is gravely disabled. For line
20 purposes of this paragraph, “gravely disabled” has the same line
21 definition as in paragraph (1) of subdivision (h) of Section 5008 line
22 of the Welfare and Institutions Code. line
23 (2) The hospital staff, treating physician and surgeon, or line
24 appropriate licensed mental health professional, have made, and line
25 documented, repeated unsuccessful efforts to find appropriate line
26 mental health treatment for the person. line
27 (A) Telephone calls or other contacts required pursuant to this line
28 paragraph shall commence at the earliest possible time when the line
29 treating physician and surgeon has determined the time at which line



30 the person will be medically stable for transfer. line

31 (B) The contacts required pursuant to this paragraph shall not line

32 begin after the time when the person becomes medically stable for line

33 transfer. line

34 (3) The person is not detained beyond 24 hours. line

35 (4) There is probable cause for the detention. line

36 (b) If the person is detained pursuant to subdivision (a) beyond line

37 eight hours, but less than 24 hours, both of the following additional line

38 conditions shall be met:

1 (1) A discharge or transfer for appropriate evaluation or line

2 treatment for the person has been delayed because of the need for line

3 continuous and ongoing care, observation, or treatment that the line

4 hospital is providing. line

5 (2) In the opinion of the treating physician and surgeon, or a line

6 clinical psychologist with the medical staff privileges or line

7 professional responsibilities provided for in Section 1316.5, the line

8 person, as a result of a mental health disorder, is still a danger to line

9 themselves, or others, or is gravely disabled, as defined in line

10 paragraph (1) of subdivision (a). line

11 (c) In addition to the immunities set forth in subdivision (a), a line

12 licensed general acute care hospital, as defined in subdivision (a) line

13 of Section 1250, that is not a county-designated facility pursuant line

14 to Section 5150 of the Welfare and Institutions Code, a licensed line

15 acute psychiatric hospital, as defined by subdivision (b) of Section line

16 1250, that is not a county-designated facility pursuant to Section line

17 5150 of the Welfare and Institutions Code, licensed professional line

18 staff of those hospitals, or a physician and surgeon, providing line

19 emergency medical services in any department of those hospitals line

20 to a person at the hospital shall not be civilly or criminally liable line



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21 for the actions of a person detained up to 24 hours in those hospitals line
22 who is subject to detention pursuant to subdivision (a) after that line
23 person's release from the detention at the hospital, if all of the line
24 following conditions exist during the detention: line
25 (1) The person has not been admitted to a licensed general acute line
26 care hospital or a licensed acute psychiatric hospital for evaluation line
27 and treatment pursuant to Section 5150 of the Welfare and line
28 Institutions Code. line
29 (2) The release from the licensed general acute care hospital or line
30 the licensed acute psychiatric hospital is authorized by a physician line
31 and surgeon or a clinical psychologist with the medical staff line
32 privileges or professional responsibilities provided for in Section line
33 1316.5, who determines, based on a face-to-face examination of line
34 the person detained, that the person does not present a danger to line
35 themselves or others and is not gravely disabled, as defined in line
36 paragraph (1) of subdivision (a). In order for this paragraph to line
37 apply to a clinical psychologist, the clinical psychologist shall have line
38 a collaborative treatment relationship with the physician and line
39 surgeon. The clinical psychologist may authorize the release of line
40 the person from the detention, but only after the clinical



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1 psychologist has consulted with the physician and surgeon. In the line
2 event of a clinical or professional disagreement regarding the line
3 release of a person subject to the detention, the detention shall be line
4 maintained unless the hospital's medical director overrules the line
5 decision of the physician and surgeon opposing the release. Both line
6 the physician and surgeon and the clinical psychologist shall enter line
7 their findings, concerns, or objections in the person's medical line
8 record. line

9 (d) Notwithstanding any other law, an examination, assessment, line
10 or evaluation that provides the basis for a determination or opinion line
11 of a physician and surgeon or a clinical psychologist with the line
12 medical staff privileges or professional responsibilities provided line
13 for in Section 1316.5 that is specified in this section may be line
14 conducted using telehealth. line

15 (e) This section does not affect the responsibility of a general line
16 acute care hospital or an acute psychiatric hospital to comply with line
17 all state laws and regulations pertaining to the use of seclusion and line
18 restraint and psychiatric medications for psychiatric patients. line
19 Persons detained under this section shall retain their legal rights line
20 regarding consent for medical treatment. line

21 (f) A person detained under this section shall be credited for the line
22 time detained, up to 24 hours, if the person is placed on a line
23 subsequent 72-hour hold pursuant to Section 5150 of the Welfare line
24 and Institutions Code. line

25 (g) The amendments to this section made by Chapter 308 of the line
26 Statutes of 2007 do not limit any existing duties for line
27 psychotherapists contained in Section 43.92 of the Civil Code. line



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28 (h) This section does not expand the scope of licensure of line
29 clinical psychologists. line
30 SEC. 2. Section 5008 of the Welfare and Institutions Code is line
31 amended to read: line
32 5008. Unless the context otherwise requires, the following line
33 definitions shall govern the construction of this part: line
34 (a) “Evaluation” consists of multidisciplinary professional line
35 analyses of a person’s medical, psychological, educational, social, line
36 financial, and legal conditions as may appear to constitute a line
37 problem. Persons providing evaluation services shall be properly line
38 qualified professionals and may be full-time employees of an line
39 agency providing face-to-face, which includes telehealth,



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e 1 evaluation services or may be part-time employees or may be line
2 employed on a contractual basis. line

3 (b) “Court-ordered evaluation” means an evaluation ordered by line
4 a superior court pursuant to Article 2 (commencing with Section line
5 5200) or by a superior court pursuant to Article 3 (commencing line
6 with Section 5225) of Chapter 2. line

7 (c) “Intensive treatment” consists of such hospital and other line
8 services as may be indicated. Intensive treatment shall be provided line
9 by properly qualified professionals and carried out in facilities line
10 qualifying for reimbursement under the California Medical line
11 Assistance Program (Medi-Cal) set forth in Chapter 7 (commencing line
12 with Section 14000) of Part 3 of Division 9, or under Title XVIII line
13 of the federal Social Security Act and regulations thereunder. line
14 Intensive treatment may be provided in hospitals of the United line
15 States government by properly qualified professionals. This part line
16 does not prohibit an intensive treatment facility from also providing line
17 72-hour evaluation and treatment. line

18 (d) “Referral” is referral of persons by each agency or facility line
19 providing assessment, evaluation, crisis intervention, or treatment line
20 services to other agencies or individuals. The purpose of referral line
21 shall be to provide for continuity of care, and may include, but line
22 need not be limited to, informing the person of available services, line
23 making appointments on the person’s behalf, discussing the line
24 person’s problem with the agency or individual to which the person line
25 has been referred, appraising the outcome of referrals, and line
26 arranging for personal escort and transportation when necessary. line
27 Referral shall be considered complete when the agency or line
28 individual to whom the person has been referred accepts line
29 responsibility for providing the necessary services. All persons line



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30 shall be advised of available precare services that prevent initial line
31 recourse to hospital treatment or aftercare services that support line
32 adjustment to community living following hospital treatment. line
33 These services may be provided through county or city mental line
34 health departments, state hospitals under the jurisdiction of the line
35 State Department of State Hospitals, regional centers under contract line
36 with the State Department of Developmental Services, or other line
37 public or private entities. line
38 Each agency or facility providing evaluation services shall line
39 maintain a current and comprehensive file of all community line
40 services, both public and private. These files shall contain current



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1 agreements with agencies or individuals accepting referrals, as line
2 well as appraisals of the results of past referrals. line
3 (e) “Crisis intervention” consists of an interview or series of line
4 interviews within a brief period of time, conducted by qualified line
5 professionals, and designed to alleviate personal or family line
6 situations that present a serious and imminent threat to the health line
7 or stability of the person or the family. The interview or interviews line
8 may be conducted in the home of the person or family, or on an line
9 inpatient or outpatient basis with such therapy, or other services, line
10 as may be appropriate. The interview or interviews may include line
11 family members, significant support persons, providers, or other line
12 entities or individuals, as appropriate and as authorized by law. line
13 Crisis intervention may, as appropriate, include suicide prevention, line
14 psychiatric, welfare, psychological, legal, or other social services. line
15 (f) “Prepetition screening” is a screening of all petitions for line
16 court-ordered evaluation as provided in Article 2 (commencing line
17 with Section 5200) of Chapter 2, consisting of a professional line
18 review of all petitions; an interview with the petitioner and, line
19 whenever possible, the person alleged, as a result of a mental health line
20 disorder, to be a danger to others, or to themselves, or to be gravely line
21 disabled, to assess the problem and explain the petition; when line
22 indicated, efforts to persuade the person to receive, on a voluntary line
23 basis, comprehensive evaluation, crisis intervention, referral, and line
24 other services specified in this part. line
25 (g) “Conservatorship investigation” means investigation by an line
26 agency appointed or designated by the governing body of cases in line
27 which conservatorship is recommended pursuant to Chapter 3 line
28 (commencing with Section 5350). line
29 (h) (1) For purposes of Article 1 (commencing with Section line
30 5150), Article 2 (commencing with Section 5200), and Article 4 line
31 (commencing with Section 5250) of Chapter 2, and for the purposes line



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32 of Chapter 3 (commencing with Section 5350), “gravely disabled” line 33
means any of the following: line

34 (A) A condition in which a person, as a result of a mental health line
35 disorder, is unable to provide for their basic personal needs for line
36 food, clothing, or shelter. line

37 (B) A condition in which a person has been found mentally line
38 incompetent under Section 1370 of the Penal Code and all of the line
39 following facts exist:



- 1 (i) The complaint, indictment, or information pending against line
2 the person at the time of commitment charges a felony involving line
3 death, great bodily harm, or a serious threat to the physical line
4 well-being of another person. line
- 5 (ii) There has been a finding of probable cause on a complaint line
6 pursuant to paragraph (2) of subdivision (a) of Section 1368.1 of line
7 the Penal Code, a preliminary examination pursuant to Section line
8 859b of the Penal Code, or a grand jury indictment, and the line
9 complaint, indictment, or information has not been dismissed. line
- 10 (iii) As a result of a mental health disorder, the person is unable line
11 to understand the nature and purpose of the proceedings taken line
12 against them and to assist counsel in the conduct of their defense line
13 in a rational manner. line
- 14 (iv) The person represents a substantial danger of physical harm line
15 to others by reason of a mental disease, defect, or disorder. line
- 16 (C) (i) A condition in which a person, as a result of a mental line
17 health disorder or a substance use disorder, or both, is at substantial line
18 risk of serious harm or is currently experiencing serious harm to line
19 their physical or mental health. line
- 20 (ii) “Serious harm” means significant deterioration, debilitation, line
21 or illness due to the person’s failure to meet one or more of the line
22 following conditions: line
- 23 (I) Satisfy the need for nourishment. line
- 24 (II) Attend to necessary personal or medical care. line
- 25 (III) Utilize adequate shelter. line
- 26 (IV) Be appropriately or adequately clothed. line
- 27 (V) Attend to self-protection or personal safety. line
- 28 (iii) A substantial risk of serious harm to the physical or mental line
29 health of the person may be evidenced by the fact that they line



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30 previously suffered serious harm to their physical or mental health line
31 in the historical course of their mental health disorder or substance line
32 use disorder, their condition is again deteriorating, they are unable line
33 to understand their disorder, and their decision making is impaired line
34 due to their lack of insight into their disorder. line

35 (iv) The existence of a mental health disorder or substance use line
36 disorder diagnosis does not alone establish serious harm or a line
37 substantial risk of serious harm to the physical or mental health of line
38 a person. line

39 (2) For purposes of Article 3 (commencing with Section 5225) line
40 and Article 4 (commencing with Section 5250), of Chapter 2, and



1 for the purposes of Chapter 3 (commencing with Section 5350),

2 “gravely disabled” means a person described in subparagraph (C)

3 of paragraph (1).

4 (3) The term “gravely disabled” does not include persons with

5 intellectual disabilities by reason of that disability alone.

6 (i) “Peace officer” means a duly sworn peace officer as that

7 term is defined in Chapter 4.5 (commencing with Section 830) of

8 Title 3 of Part 2 of the Penal Code who has completed the basic

9 training course established by the Commission on Peace Officer

10 Standards and Training, or any parole officer or probation officer

11 specified in Section 830.5 of the Penal Code when acting in relation

12 to cases for which the officer has a legally mandated responsibility.

13 (j) “Postcertification treatment” means an additional period of

14 treatment pursuant to Article 6 (commencing with Section 5300)

15 of Chapter 2.

16 (k) “Court,” unless otherwise specified, means a court of record.

17 (l) “Antipsychotic medication” means any medication

18 customarily prescribed for the treatment of symptoms of psychoses

19 and other severe mental and emotional disorders.

20 (m) “Emergency” means a situation in which action to impose

21 treatment over the person’s objection is immediately necessary

22 for the preservation of life or the prevention of serious bodily harm

23 to the patient or others, and it is impracticable to first gain consent.

24 It is not necessary for harm to take place or become unavoidable

25 prior to treatment.

26 (n) “Designated facility” or “facility designated by the county

27 for evaluation and treatment” means a facility that is licensed or

28 certified as a mental health treatment facility or a hospital, as

29 defined in subdivision (a) or (b) of Section 1250 of the Health and



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30 Safety Code, by the State Department of Public Health, and may
31 include, but is not limited to, a licensed psychiatric hospital, a
32 licensed psychiatric health facility, and a certified crisis
33 stabilization unit.

34 SEC. 3. Section 5122 is added to the Welfare and Institutions
35 Code, to read:

36 5122. (a) For purposes of an expert witness in a proceeding
37 relating to the appointment or reappointment of a conservator
38 pursuant to Chapter 3 (commencing with Section 5350) or Chapter
39 5 (commencing with Section 5450), the statements of a health
40 practitioner described in paragraphs (21) to (25), inclusive, of



1 subdivision (a) of Section 11165.7 of the Penal Code, or a social
2 worker licensed pursuant to Chapter 14 (commencing with Section
3 4991) of Division 2 of the Business and Professions Code,
4 practitioner, as defined in subdivision (d), included in the medical
5 record are not hearsay.

6 (b) This section does not prevent a party from calling as a
7 witness the author of any statement contained in the medical record,
8 whether or not the author was relied on by the expert witness.

9 (c) The court may grant a reasonable continuance if an expert
10 witness in a proceeding relied on the medical record and the
11 medical record has not been provided to the parties or their counsel.

12 (d) “Health practitioner” means a physician and surgeon,
13 psychiatrist, psychologist, resident, intern, registered nurse,
14 licensed clinical social worker or associate clinical social worker,
15 marriage and family therapist, licensed professional clinical
16 counselor, any emergency medical technician I or II, paramedic,
17 or person certified pursuant to Division 2.5 (commencing with
18 Section 1797) of the Health and Safety Code, a psychological
19 associate registered pursuant to Section 2913 of the Business and
20 Professions Code, and an unlicensed marriage and family therapist
21 registered under Section 4980.44 of the Business and Professions
22 Code.

23 SEC. 4. Section 5350 of the Welfare and Institutions Code is
24 amended to read:

25 5350. A conservator of the person, of the estate, or of the person
26 and the estate may be appointed for a person who is gravely
27 disabled as a result of a mental health disorder or impairment by
28 chronic alcoholism.

29 The procedure for establishing, administering, and terminating
30 a conservatorship under this chapter shall be the same as that



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31 provided in Division 4 (commencing with Section 1400) of the
32 Probate Code, except as follows:

33 (a) A conservator may be appointed for a gravely disabled
34 minor.

35 (b) (1) Appointment of a conservator under this part, including
36 the appointment of a conservator for a person who is gravely
37 disabled, as defined in subparagraph (A) or (C) of paragraph (1)
38 of subdivision (h) of Section 5008, shall be subject to the list of
39 priorities in Section 1812 of the Probate Code unless the officer



e 1 providing conservatorship investigation recommends otherwise
2 to the superior court.

3 (2) In appointing a conservator, as defined in subparagraph (B)
4 of paragraph (1) of subdivision (h) of Section 5008, the court shall
5 consider the purposes of protection of the public and the treatment
6 of the conservatee. Notwithstanding any other provision of this
7 section, the court shall not appoint the proposed conservator if the
8 court determines that appointment of the proposed conservator
9 will not result in adequate protection of the public.

10 (c) A conservatorship of the estate pursuant to this chapter shall
11 not be established if a conservatorship or guardianship of the estate
12 exists under the Probate Code. When a gravely disabled person
13 already has a guardian or conservator of the person appointed
14 under the Probate Code, the proceedings under this chapter shall
15 not terminate the prior proceedings but shall be concurrent with
16 and superior thereto. The superior court may appoint the existing
17 guardian or conservator of the person or another person as
18 conservator of the person under this chapter.

19 (d) (1) The person for whom conservatorship is sought shall
20 have the right to demand a court or jury trial on the issue of whether
21 the person is gravely disabled. Demand for court or jury trial shall
22 be made within five days following the hearing on the

23 conservatorship petition. If the proposed conservatee demands a
24 court or jury trial before the date of the hearing as provided for in
25 Section 5365, the demand shall constitute a waiver of the hearing.

26 (2) Court or jury trial shall commence within 10 days of the
27 date of the demand, except that the court shall continue the trial
28 date for a period not to exceed 15 days upon the request of counsel
29 for the proposed conservatee. Failure to commence the trial within



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30 that period of time is grounds for dismissal of the conservatorship
31 proceedings.

32 (3) This right shall also apply in subsequent proceedings to
33 reestablish conservatorship.

34 (e) (1) Notwithstanding subparagraphs (A) and (C) of paragraph
35 (1) of subdivision (h) of Section 5008, a person is not “gravely
36 disabled” if that person can survive safely without involuntary
37 detention with the help of responsible family, friends, or others
38 who are both willing and able to help provide for the person’s
39 basic personal needs.



1 (2) However, unless they specifically indicate in writing their
2 willingness and ability to help, family, friends, or others shall not
3 be considered willing or able to provide this help.

4 (3) The purpose of this subdivision is to avoid the necessity for,
5 and the harmful effects of, requiring family, friends, and others to
6 publicly state, and requiring the court to publicly find, that no one
7 is willing or able to assist a person with a mental health disorder
8 in providing for the person's basic needs for food, clothing, or
9 shelter.

10 (4) This subdivision does not apply to a person who is gravely
11 disabled, as defined in subparagraph (B) of paragraph (1) of
12 subdivision (h) of Section 5008.

13 (f) Conservatorship investigation shall be conducted pursuant
14 to this part and shall not be subject to Section 1826 or Chapter 2
15 (commencing with Section 1850) of Part 3 of Division 4 of the
16 Probate Code.

17 (g) Notice of proceedings under this chapter shall be given to
18 a guardian or conservator of the person or estate of the proposed
19 conservatee appointed under the Probate Code.

20 (h) As otherwise provided in this chapter.

21 SEC. 5. Section 5358 of the Welfare and Institutions Code is
22 amended to read:

23 5358. (a) (1) When ordered by the court after the hearing
24 required by this section, a conservator appointed pursuant to this
25 chapter shall place their conservatee as follows:

26 (A) For a conservatee who is gravely disabled, as defined in
27 subparagraph (A) or (C) of paragraph (1) of subdivision (h) of
28 Section 5008, in the least restrictive alternative placement, as
29 designated by the court.



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30 (B) For a conservate who is gravely disabled, as defined in
31 subparagraph (B) of paragraph (1) of subdivision (h) of Section
32 5008, in a placement that achieves the purposes of treatment of
33 the conservate and protection of the public.

34 (2) The placement may include a medical, psychiatric, nursing,
35 or other state-licensed facility, or a state hospital, county hospital,
36 hospital operated by the Regents of the University of California,
37 a United States government hospital, or other nonmedical facility
38 approved by the State Department of Health Care Services or an
39 agency accredited by the State Department of Health Care Services,



1 or in addition to any of the foregoing, in cases of chronic

2 alcoholism, to a county alcoholic treatment center.

3 (b) A conservator shall also have the right, if specified in the
4 court order, to require the conservatee to receive treatment related
5 specifically to remedying or preventing the recurrence of the
6 conservatee's being gravely disabled, or to require the conservatee
7 to receive routine medical treatment unrelated to remedying or
8 preventing the recurrence of the conservatee's being gravely
9 disabled. Except in emergency cases in which the conservatee
10 faces loss of life or serious bodily injury, surgery shall not be
11 performed upon the conservatee without the conservatee's prior
12 consent or a court order obtained pursuant to Section 5358.2
13 specifically authorizing that surgery.

14 (c) (1) For a conservatee who is gravely disabled, as defined
15 in subparagraph (A) or (C) of paragraph (1) of subdivision (h) of
16 Section 5008, if the conservatee is not to be placed in the
17 conservatee's own home or the home of a relative, first priority
18 shall be to placement in a suitable facility as close as possible to
19 the conservatee's home or the home of a relative. For the purposes
20 of this section, suitable facility means the least restrictive
21 residential placement available and necessary to achieve the
22 purpose of treatment. At the time that the court considers the report
23 of the officer providing conservatorship investigation specified in
24 Section 5356, the court shall consider available placement
25 alternatives. After considering all the evidence, the court shall
26 determine the least restrictive and most appropriate alternative
27 placement for the conservatee. The court shall also determine those
28 persons to be notified of a change of placement. The fact that a
29 person for whom conservatorship is recommended is not an



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30 inpatient shall not be construed by the court as an indication that
31 the person does not meet the criteria of grave disability.

32 (2) For a conservatee who is gravely disabled, as defined in
33 subparagraph (B) of paragraph (1) of subdivision (h) of Section
34 5008, first priority shall be placement in a facility that achieves
35 the purposes of treatment of the conservatee and protection of the
36 public. The court shall determine the most appropriate placement
37 for the conservatee. The court shall also determine those persons
38 to be notified of a change of placement, and additionally require
39 the conservator to notify the district attorney or attorney



1 representing the originating county prior to any change of
2 placement.

3 (3) For any conservatee, if requested, the local mental health
4 director shall assist the conservator or the court in selecting a
5 placement facility for the conservatee. When a conservatee who
6 is receiving services from the local mental health program is
7 placed, the conservator shall inform the local mental health director
8 of the facility's location and any movement of the conservatee to
9 another facility.

10 (d) (1) Except for a conservatee who is gravely disabled, as
11 defined in subparagraph (B) of paragraph (1) of subdivision (h)
12 of Section 5008, the conservator may transfer the conservatee to
13 a less restrictive alternative placement without a further hearing
14 and court approval. When a conservator has reasonable cause to
15 believe that their conservatee is in need of immediate more
16 restrictive placement because the condition of the conservatee has
17 so changed that the conservatee poses an immediate and substantial
18 danger to themselves or others, the conservator shall have the right
19 to place the conservatee in a more restrictive facility or hospital.
20 Notwithstanding Section 5328, if the change of placement is to a
21 placement more restrictive than the court-determined placement,
22 the conservator shall provide written notice of the change of
23 placement and the reason therefor to the court, the conservatee's
24 attorney, the county patient's rights advocate, and any other persons
25 designated by the court pursuant to subdivision (c).

26 (2) For a conservatee who is gravely disabled, as defined in
27 subparagraph (B) of paragraph (1) of subdivision (h) of Section
28 5008, the conservator may not transfer the conservatee without
29 providing written notice of the proposed change of placement and



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30 the reason therefor to the court, the conservatee's attorney, the
31 county patient's rights advocate, the district attorney of the county
32 that made the commitment, and any other persons designated by
33 the court to receive notice. If any person designated to receive
34 notice objects to the proposed transfer within 10 days after
35 receiving notice, the matter shall be set for a further hearing and
36 court approval. The notification and hearing is not required for the
37 transfer of persons between state hospitals.

38 (3) At a hearing where the conservator is seeking placement to
39 a less restrictive alternative placement pursuant to paragraph (2),
40 the placement shall not be approved if it is determined by a



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e 1 preponderance of the evidence that the placement poses a threat
2 to the safety of the public, the conservatee, or any other individual.
3 (4) A hearing as to placement to a less restrictive alternative
4 placement, whether requested pursuant to paragraph (2) or pursuant
5 to Section 5358.3, shall be granted no more frequently than is
6 provided for in Section 5358.3.

7 SEC. 6. If the Commission on State Mandates determines that
8 this act contains costs mandated by the state, reimbursement to
9 local agencies and school districts for those costs shall be made
10 pursuant to Part 7 (commencing with Section 17500) of Division
11 4 of Title 2 of the Government Code.