
SENATE COMMITTEE ON APPROPRIATIONS

Senator Anna Caballero, Chair
2025 - 2026 Regular Session

SB 367 (Allen) - Mental health

Version: May 1, 2025

Urgency: No

Hearing Date: May 12, 2025

Policy Vote: HEALTH 11 - 0, JUD. 12 - 1

Mandate: Yes

Consultant: Agnes Lee

Bill Summary: SB 367 would make changes to the process for Lanterman-Petris-Short (LPS) Act conservatorships.

Fiscal Impact:

- Unknown, potentially significant workload costs to the courts to adjudicate conservatorship petitions, by trial if demanded by the petition subject, and review the progress reports for established conservatorships. (Trial Court Trust Fund, General Fund). While the courts are not funded on a workload basis, an increase in workload could result in delayed court services and would put pressure on the General Fund to increase the amount appropriated for trial court operations.
- Unknown, potentially significant costs to county behavioral health departments for LPS assessments, evaluation and treatment services (General Fund). Cost to counties would be potentially reimbursable by the state, subject to a determination by the Commission on State Mandates.

Background:

Lanterman-Petris-Short (LPS) Act. The LPS Act provides for involuntary detentions for varying lengths of time for the purpose of evaluation and treatment, provided certain requirements are met, such as that an individual is taken to a county-designated facility. A county-designated facility is authorized to involuntarily detain an individual for up to 72 hours for evaluation and treatment if they are determined to be, as a result of a mental health disorder, a danger to self or others, or gravely disabled. Current law defines “gravely disabled” to mean a condition in which a person, as a result of a mental health disorder, a severe substance use disorder, or a co-occurring mental health disorder and a severe substance use disorder, is unable to provide for their basic personal needs for food, clothing, shelter, personal safety, or necessary medical care. The professional person in charge of the county-designated facility is required to assess an individual to determine the appropriateness of the involuntary detention prior to admitting the individual. Subject to various conditions, a person who is found to be a danger to self or others, or gravely disabled, can be subsequently involuntarily detained for an initial up-to 14 days for intensive treatment, an additional up-to 14 days (or an additional up-to 30 days in counties that have opted to provide this additional up-to 30-day intensive treatment episode), and ultimately a conservatorship, which is typically for up to a year and may be extended as appropriate.

LPS Conservatorship. Current law allows a conservator of the person, of the estate, or of the person and the estate to be appointed for a person who is gravely disabled or impaired by chronic alcoholism. Current law permits a professional person, who is in charge of an agency providing comprehensive evaluation or a facility providing treatment, to recommend conservatorship for a person in their care they determine is gravely disabled as a result of a mental disorder or impairment by chronic alcoholism, and unwilling to accept or incapable of accepting treatment voluntarily, to the officer providing conservatorship investigation in the individual's county of residence. The professional person in charge of an agency providing comprehensive evaluation or a facility providing intensive treatment, or the professional person in charge of providing mental health treatment at a county jail, or his or her designee, may recommend conservatorship for a person without the person being an inpatient in a facility providing comprehensive evaluation or intensive treatment, if both of the following conditions are met: (a) the professional person or another professional person designated by him or her has examined and evaluated the person and determined that he or she is gravely disabled; (b) the professional person or another professional person designated by him or her has determined that future examination on an inpatient basis is not necessary for a determination that the person is gravely disabled.

Current law requires the officer providing conservatorship investigation to investigate all available alternatives to conservatorship, including, but not limited to, assisted outpatient treatment and the Community Assistance, Recovery, and Empowerment (CARE) Act program, as applicable, and to recommend conservatorship to the court only if no suitable alternatives are available. Current law requires the officer providing conservatorship investigation to render a written report of investigation to the court prior to the hearing that is comprehensive and contains all relevant aspects of the individual's medical, psychological, financial, family, vocational, and social conditions; information obtained from their family members, close friends, social worker, or principal therapist; and all available information concerning their real and personal property.

Current law requires an individualized treatment plan to be developed within 10 days after conservatorship of an individual has been established, unless treatment is specifically found not to be appropriate by the court. The individualized treatment plan specifies goals for the individual's treatment, the criteria by which accomplishment of the goals can be judged, and a plan for review of the progress of treatment. The goals of the treatment plan must be equivalent to reducing or eliminating the behavioral manifestations of grave disability. If a treatment plan is not developed then the matter must be referred to the court by the Short-Doyle Act community mental health service, or the staff of a facility operating under a contract to provide such services, or the conservator, or the attorney of record for the conservatee.

When the progress review determines that the goals have been reached and the person is no longer gravely disabled, a person designated by the county must so report to the court and the conservatorship must be terminated by the court. If the conservator fails to report to the court that the person is no longer gravely disabled, then the matter must be referred to the court by the Short-Doyle Act community mental health service, or the staff of a facility operating under a contract to provide such services, or the attorney of record for the conservatee.

Community Assistance, Recovery, and Empowerment (CARE) Act. The CARE Act provides for community-based behavioral health services and supports to Californians living with schizophrenia spectrum or other psychotic disorders who meet health and safety criteria. It is a new civil court process where certain people, such as family members, first responders, and providers, may file a petition to the court to create a voluntary CARE agreement or a court-ordered CARE plan. A CARE agreement or CARE plan may include treatment, housing resources, and other services. The CARE Act is intended to serve as an upstream intervention for individuals experiencing severe impairment to prevent avoidable psychiatric hospitalizations, incarcerations, and LPS conservatorships.

Proposed Law: Specific provisions of the bill would:

- Require the LPS assessment to consider reasonably available, relevant information including, but not limited to, the history of a person's mental health records and the frequency of prior assessments; and allow assessments to be used to assist the professional person in charge of a facility designated by the county for evaluation and treatment, a member of the attending staff, or a professional person designated by the county in developing an aftercare plan for an individual if they have agreed to an aftercare plan and can be properly served without being detained.
- Add to the list of individuals that may recommend an LPS conservatorship.
- Add to the requirements for the LPS conservatorship treatment plan.
- Make changes to the process for terminating LPS conservatorships.
- Require the officer providing LPS conservatorship investigation to additionally investigate, as an available alternative to LPS conservatorship, probate conservatorship with or without major neurocognitive disorder powers, as specified.
- Provide that after the entry of a CARE agreement or the adoption of a CARE plan, the court may order the respondent to an LPS evaluation without a petition from the county if the court believes the respondent has become gravely disabled.
- Provide that all reports, evaluations, diagnoses, or other information filed with the court related to a CARE Act respondent's health may only be shared by a court order, or as approved by the respondent; and allow this information to be used outside of CARE Act proceedings, such as an LPS conservatorship petition, but must require a court order.

Related Legislation:

SB 331 (Menjivar) would revise the definition of "gravely disabled" and define "mental health disorder" for purposes of the LPS Act and make changes to the permissible role of the original petitioner through the CARE process. The bill is scheduled to be heard in this committee on May 12, 2025.

SB 823 (Stern) would expand eligibility criteria for an individual to qualify for the CARE process to include a diagnosis of bipolar I disorder. The bill is currently on the suspense file in this committee.

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