

AMENDED IN SENATE JUNE 21, 2016

AMENDED IN SENATE JUNE 16, 2016

AMENDED IN SENATE APRIL 27, 2016

AMENDED IN SENATE MARCH 15, 2016

AMENDED IN ASSEMBLY JANUARY 25, 2016

AMENDED IN ASSEMBLY MAY 20, 2015

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AMENDED IN ASSEMBLY APRIL 23, 2015

AMENDED IN ASSEMBLY APRIL 13, 2015

CALIFORNIA LEGISLATURE—2015–16 REGULAR SESSION

## ASSEMBLY BILL

**No. 1300**

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**Introduced by Assembly Member Ridley-Thomas**

February 27, 2015

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An act to amend Sections ~~5008, 5113, and 5270.50~~ of, *5008 and 5150 of, and* to add Sections 5014, ~~5025, 5113.5, and 5150.3~~ to, ~~and to add Article 1.1 (commencing with Section 5160) to Chapter 2 of Part 1 of Division 5 of, 5150.3, and 5150.7 to,~~ the Welfare and Institutions Code, relating to mental health.

### LEGISLATIVE COUNSEL'S DIGEST

AB 1300, as amended, Ridley-Thomas. Mental health: involuntary commitment.

Under existing law, when a person, as a result of a mental disorder, is a danger to others, or to himself or herself, or *is* gravely disabled, he

or she may, upon probable cause, be taken into custody by a peace officer, member of the attending staff of an evaluation facility, designated members of a mobile crisis team, or other designated professional person, and placed in a facility designated by the county and approved by the State Department of Health Care Services as a facility for 72-hour treatment and evaluation. *Existing law requires that a written application be submitted to a facility before a person may be detained for evaluation and treatment on this basis, as specified.*

~~This bill would specify, among other things, procedures for delivery of individuals to various facilities for mental health evaluation and treatment; procedures for probable cause determinations for detention and evaluation for treatment; terms and length of detention, when appropriate, in various types of facilities; and criteria for release from nondesignated hospitals, as defined. The bill would exempt specified providers of health services and peace officers from criminal or civil liability for the actions of a person after his or her release from detention, subject to specified exceptions. The bill would authorize certain providers of ambulance services to continue the detention of an individual for the purpose of transporting the individual to a designated facility. The bill would require a designated facility to accept, within its clinical capability and capacity, all persons for whom it is designated, without regard to insurance or financial status. The bill would also make changes to the methods by which the county is notified of the release of a person detained for evaluation and treatment, including notification through the 24-hour toll-free telephone number established by the county's mental health program.~~

*This bill would additionally authorize a nondesignated emergency physician or psychiatric professional, upon probable cause, to take the person into custody for a period of up to 72 hours for the purpose of obtaining evaluation and treatment from a designated professional person or to arrange the transfer of the person to a designated facility. The bill would provide that an application for detention for evaluation and treatment is valid in all counties in which there is a designated facility to which the person may be taken. The bill would require a designated facility to accept, within its clinical capability and capacity, all categories of persons for whom it is designated, without regard to insurance or financial status. The bill would authorize the communication of patient information amongst peace officers, specified medical personnel, and qualified professionals during an emergency,*

*for purposes of providing emergency services, referral, and placement for the person.*

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

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

1 SECTION 1. Section 5008 of the Welfare and Institutions Code  
2 is amended to read:

3 5008. Unless the context otherwise requires, the following  
4 definitions shall govern the construction of this part:

5 (a) "Evaluation" consists of multidisciplinary professional  
6 analyses of a person's medical, psychological, educational, social,  
7 financial, and legal conditions as may appear to constitute a  
8 problem. Persons providing evaluation services shall be properly  
9 qualified professionals and may be full-time employees of an  
10 agency providing face-to-face, which includes telehealth,  
11 evaluation services or may be part-time employees or may be  
12 employed on a contractual basis.

13 (b) "Court-ordered evaluation" means an evaluation ordered by  
14 a superior court pursuant to Article 2 (commencing with Section  
15 5200) or by a superior court pursuant to Article 3 (commencing  
16 with Section 5225) of Chapter 2.

17 (c) "Intensive treatment" consists of hospital and other services  
18 as may be indicated. Intensive treatment shall be provided by  
19 properly qualified professionals and carried out in facilities  
20 qualifying for reimbursement under the California Medical  
21 Assistance Program (Medi-Cal) set forth in Chapter 7 (commencing  
22 with Section 14000) of Part 3 of Division 9, or under Title XVIII  
23 of the federal Social Security Act and regulations thereunder.  
24 Intensive treatment may be provided in hospitals of the United  
25 States government by properly qualified professionals. Nothing  
26 in this part shall be construed to prohibit an intensive treatment  
27 facility from also providing 72-hour evaluation and treatment.

28 (d) "Referral" is referral of persons by each agency or facility  
29 providing assessment, evaluation, crisis intervention, or treatment  
30 services to other agencies or individuals. The purpose of referral  
31 shall be to provide for continuity of care, and may include, but  
32 need not be limited to, informing the person of available services,  
33 making appointments on the person's behalf, discussing the

1 person's problem with the agency or individual to which the person  
2 has been referred, appraising the outcome of referrals, and  
3 arranging for personal escort and transportation when necessary.  
4 Referral shall be considered complete when the agency or  
5 individual to whom the person has been referred accepts  
6 responsibility for providing the necessary services. All persons  
7 shall be advised of available precare services that prevent initial  
8 recourse to hospital treatment or aftercare services that support  
9 adjustment to community living following hospital treatment.  
10 These services may be provided through county or city mental  
11 health departments, state hospitals under the jurisdiction of the  
12 State Department of State Hospitals, regional centers under contract  
13 with the State Department of Developmental Services, or other  
14 public or private entities.

15 Each agency or facility providing evaluation services shall  
16 maintain a current and comprehensive file of all community  
17 services, both public and private. These files shall contain current  
18 agreements with agencies or individuals accepting referrals, as  
19 well as appraisals of the results of past referrals.

20 (e) "Crisis intervention" consists of an interview or series of  
21 interviews within a brief period of time, conducted by qualified  
22 professionals, and designed to alleviate personal or family  
23 situations which present a serious and imminent threat to the health  
24 or stability of the person or the family. The interview or interviews  
25 may be conducted in the home of the person or family, or on an  
26 inpatient or outpatient basis with such therapy, or other services,  
27 as may be appropriate. The interview or interviews may include  
28 family members, significant support persons, providers, or other  
29 entities or individuals, as appropriate and as authorized by law.  
30 Crisis intervention may, as appropriate, include suicide prevention,  
31 psychiatric, welfare, psychological, legal, or other social services.

32 (f) "Prepetition screening" is a screening of all petitions for  
33 court-ordered evaluation as provided in Article 2 (commencing  
34 with Section 5200) of Chapter 2, consisting of a professional  
35 review of all petitions; an interview with the petitioner and,  
36 whenever possible, the person alleged, as a result of a mental health  
37 disorder, to be a danger to others, or to himself or herself, or to be  
38 gravely disabled, to assess the problem and explain the petition;  
39 when indicated, efforts to persuade the person to receive, on a

1 voluntary basis, comprehensive evaluation, crisis intervention,  
2 referral, and other services specified in this part.

3 (g) “Conservatorship investigation” means investigation by an  
4 agency appointed or designated by the governing body of cases in  
5 which conservatorship is recommended pursuant to Chapter 3  
6 (commencing with Section 5350).

7 (h) (1) For purposes of Article 1 (commencing with Section  
8 5150), Article 2 (commencing with Section 5200), and Article 4  
9 (commencing with Section 5250) of Chapter 2, and for the purposes  
10 of Chapter 3 (commencing with Section 5350), “gravely disabled”  
11 means either of the following:

12 (A) A condition in which a person, as a result of a mental health  
13 disorder, is unable to provide for his or her basic personal needs  
14 for food, clothing, or shelter.

15 (B) A condition in which a person has been found mentally  
16 incompetent under Section 1370 of the Penal Code and all of the  
17 following facts exist:

18 (i) The indictment or information pending against the person at  
19 the time of commitment charges a felony involving death, great  
20 bodily harm, or a serious threat to the physical well-being of  
21 another person.

22 (ii) The indictment or information has not been dismissed.

23 (iii) As a result of a mental health disorder, the person is unable  
24 to understand the nature and purpose of the proceedings taken  
25 against him or her and to assist counsel in the conduct of his or  
26 her defense in a rational manner.

27 (2) For purposes of Article 3 (commencing with Section 5225)  
28 and Article 4 (commencing with Section 5250), of Chapter 2, and  
29 for the purposes of Chapter 3 (commencing with Section 5350),  
30 “gravely disabled” means a condition in which a person, as a result  
31 of impairment by chronic alcoholism, is unable to provide for his  
32 or her basic personal needs for food, clothing, or shelter.

33 (3) The term “gravely disabled” does not include persons with  
34 intellectual disabilities by reason of that disability alone.

35 (i) “Peace officer” means a duly sworn peace officer as that  
36 term is defined in Chapter 4.5 (commencing with Section 830) of  
37 Title 3 of Part 2 of the Penal Code who has completed the basic  
38 training course established by the Commission on Peace Officer  
39 Standards and Training, or any parole officer or probation officer

1 specified in Section 830.5 of the Penal Code when acting in relation  
2 to cases for which he or she has a legally mandated responsibility.

3 (j) “Postcertification treatment” means an additional period of  
4 treatment pursuant to Article 6 (commencing with Section 5300)  
5 of Chapter 2.

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

7 (l) “Antipsychotic medication” means any medication  
8 customarily prescribed for the treatment of symptoms of psychoses  
9 and other severe mental and emotional disorders.

10 (m) “Emergency” means a situation in which action to impose  
11 treatment over the person’s objection is immediately necessary  
12 for the preservation of life or the prevention of serious bodily harm  
13 to the patient or others, and it is impracticable to first gain consent.  
14 It is not necessary for harm to take place or become unavoidable  
15 prior to treatment.

16 (n) “Emergency department” means a basic, comprehensive,  
17 or standby emergency medical service that is approved by the State  
18 Department of Public Health as a special or supplemental service  
19 of a general acute care hospital licensed under Chapter 2  
20 (commencing with Section 1250) of Division 2 of the Health and  
21 Safety Code. For purposes of this part, an emergency department  
22 shall include an observation or similar unit of the hospital that  
23 meets both of the following criteria:

24 (1) The unit is operated under the direction and policies of the  
25 emergency department.

26 (2) The unit provides continuing emergency services and care  
27 to patients prior to an inpatient admission, transfer, or discharge.

28 (o) “Emergency physician” means a physician and surgeon  
29 during any scheduled period that he or she is on duty to provide  
30 medical screening and treatment of patients in the emergency  
31 department. This term does not include an emergency physician  
32 who is a professional person designated by a county pursuant to  
33 paragraph (1) of subdivision (a) of Section 5150.

34 ~~(n)~~

35 (p) “Designated facility” or “facility designated by the county  
36 for evaluation and treatment” means a facility that is licensed or  
37 certified as a mental health treatment facility or a hospital, as  
38 defined in subdivision (a) or (b) of Section 1250 of the Health and  
39 Safety Code, by the State Department of Public Health, and may  
40 include, but is not limited to, a licensed psychiatric hospital, a

1 licensed psychiatric health facility, and a certified crisis  
2 stabilization unit.

3 ~~(e) “Authorized professional” means any of the following:~~

4 ~~(1) A mental health professional or category of mental health~~  
5 ~~professionals, excluding peace officers, who are authorized in~~  
6 ~~writing by a county to provide services described in Article 1~~  
7 ~~(commencing with Section 5150) of Chapter 2. An authorized~~  
8 ~~professional shall have appropriate training in mental health~~  
9 ~~disorders and determination of probable cause, and shall have~~  
10 ~~relevant experience in providing services to persons with mental~~  
11 ~~health disorders.~~

12 ~~(2) An authorized professional as described in paragraph (1)~~  
13 ~~who is a member of the staff of a designated facility and who is~~  
14 ~~authorized by the facility to provide services described in this part.~~

15 ~~(3) A member of a mobile crisis team who is authorized in~~  
16 ~~writing by a county to provide services described in Article 1~~  
17 ~~(commencing with Section 5150) of Chapter 2.~~

18 ~~(q) “Psychiatric professional” means a physician and surgeon~~  
19 ~~licensed by the Medical Board of California who has completed~~  
20 ~~an approved psychiatric residency training program and who~~  
21 ~~provides specialty services to the emergency department of a~~  
22 ~~hospital that is not a designated facility. “Psychiatric professional”~~  
23 ~~also means a professional person designated by the county~~  
24 ~~pursuant to paragraph (1) of subdivision (a) of Section 5150.~~

25 SEC. 2. Section 5014 is added to the Welfare and Institutions  
26 Code, to read:

27 5014. Each designated facility shall accept, within its clinical  
28 capability and capacity, all categories of persons for whom it is  
29 designated, without regard to insurance or financial status. If a  
30 person presents to a designated facility with a psychiatric  
31 emergency medical condition, as defined in ~~subdivision (f) of~~  
32 ~~Section 5160; subdivision (k) of Section 1317.1 of the Health and~~  
33 ~~Safety Code~~, that is beyond its capability, the *designated* facility  
34 shall assist the person in obtaining emergency services and care  
35 at an appropriate facility.

36 ~~SEC. 3. Section 5025 is added to the Welfare and Institutions~~  
37 ~~Code, to read:~~

38 ~~5025. (a) The professional person in charge of a nondesignated~~  
39 ~~hospital, as defined in subdivision (e) of Section 5160, his or her~~  
40 ~~designee, the medical director of the nondesignated hospital or his~~

1 or her designee, the psychiatric professional who has consulted  
2 with a treating emergency professional in accordance with  
3 subdivision (c) of Section 5164, or a treating emergency  
4 professional or other professional staff person who has received  
5 training in managing persons who have been detained for  
6 evaluation and treatment and the determination of probable cause  
7 in accordance with Section 5150, and who is acting within the  
8 scope of his or her official duties, employment or contractual  
9 obligations, or clinical privileges for the nondesignated hospital,  
10 shall not be civilly or criminally liable for any action by a person  
11 detained pursuant to Article 1 (commencing with Section 5150)  
12 of Chapter 2 of this part, and released at the end of 72 hours, or  
13 before the end of 72 hours, if Section 5164 is satisfied.

14 (b) The peace officer responsible for the detainment of the  
15 person shall not be civilly or criminally liable for any action by a  
16 person released at or before the end of the 72-hour detainment  
17 period pursuant to Article 1 (commencing with Section 5150) of  
18 Chapter 2 of this part.

19 (c) A treating emergency professional or other professional staff  
20 person who has received training in managing persons who have  
21 been detained for evaluation and treatment and the determination  
22 of probable cause in accordance with Section 5150, and who is  
23 acting within the scope of his or her official duties, employment  
24 or contractual obligations, or clinical privileges for the  
25 nondesignated hospital shall not be liable for carrying out a  
26 determination in accordance with Section 5164.

27 (d) Nothing in this section shall exonerate a person described  
28 in this section from liability if that person acted with gross  
29 negligence or willful or wanton misconduct.

30 SEC. 4. Section 5113 of the Welfare and Institutions Code is  
31 amended to read:

32 5113. Except as provided in Sections 5154, 5173, 5259.3, 5267,  
33 5270.35, and 5306, the facility providing treatment pursuant to  
34 Article 1 (commencing with Section 5150), Article 1.5  
35 (commencing with Section 5170), Article 4 (commencing with  
36 Section 5250), Article 4.5 (commencing with Section 5260), Article  
37 4.7 (commencing with Section 5270.10), or Article 6 (commencing  
38 with Section 5300), a nondesignated hospital, as defined in  
39 subdivision (c) of Section 5160, the administrator of the facility  
40 or nondesignated hospital, the professional person in charge of the



1 facility or nondesignated hospital, and his or her designee, or the  
2 peace officer responsible for the detainment of the person shall  
3 not be civilly or criminally liable for any action by a person  
4 released at or before the end of the period for which he or she was  
5 detained or admitted pursuant to the provisions of the appropriate  
6 article.

7 SEC. 5. Section 5113.5 is added to the Welfare and Institutions  
8 Code, to read:

9 5113.5. (a) A designated facility or nondesignated hospital,  
10 as defined in subdivision (e) of Section 5160, or a physician or  
11 other professional staff person who has received training in  
12 managing persons who have been detained for evaluation and  
13 treatment and determination of probable cause in accordance with  
14 Section 5150, and who is acting within the scope of his or her  
15 official duties, employment or contractual obligations, or clinical  
16 privileges for the designated facility or nondesignated hospital  
17 shall not be liable for any of the following:

18 (1) An injury caused by an eloping or eloped person who has  
19 been detained for a mental health disorder or addiction.

20 (2) An injury to, or the wrongful death of, an eloping or eloped  
21 person who has been detained for a mental health disorder or  
22 addiction.

23 (b) Nothing in this section shall exonerate a person described  
24 in this section from liability if that person acted with gross  
25 negligence or willful or wanton misconduct.

26 SEC. 3. Section 5150 of the Welfare and Institutions Code is  
27 amended to read:

28 5150. (a) (1) When a person, as a result of a mental health  
29 disorder, is a danger to others, or to himself or herself, or gravely  
30 disabled, a peace officer, professional person in charge of a facility  
31 designated by the county for evaluation and treatment, member of  
32 the attending staff, as defined by regulation, of a facility designated  
33 by the county for evaluation and treatment, designated members  
34 of a mobile crisis team, or professional person designated by the  
35 county may, upon probable cause, take, or cause to be taken, the  
36 person into custody for a period of up to 72 hours for assessment,  
37 evaluation, and crisis intervention, or placement for evaluation  
38 and treatment in a facility designated by the county for evaluation  
39 and treatment and approved by the State Department of Health  
40 Care Services. At a minimum, assessment, as defined in Section

1 5150.4, and evaluation, as defined in subdivision (a) of Section  
2 5008, shall be conducted and provided on an ongoing basis. Crisis  
3 intervention, as defined in subdivision (e) of Section 5008, may  
4 be provided concurrently with assessment, evaluation, or any other  
5 service.

6 *(2) When a person, as a result of a mental health disorder, is a*  
7 *danger to others, or to himself or herself, or gravely disabled, an*  
8 *emergency physician or psychiatric professional who is not a*  
9 *designated professional person under paragraph (1), may, upon*  
10 *probable cause, take, or cause to be taken, the person into custody*  
11 *for a period of up to 72 hours for the purpose of obtaining*  
12 *evaluation and treatment from a professional person, including*  
13 *members of a mobile crisis team, who is designated by a county*  
14 *under paragraph (1), or to arrange the transfer of the person to*  
15 *a designated facility for evaluation and treatment.*

16 (b) When determining if a person should be taken into custody  
17 pursuant to subdivision (a), the individual making that  
18 determination shall apply the provisions of Section 5150.05, and  
19 shall not be limited to consideration of the danger of imminent  
20 harm.

21 (c) The professional person in charge of a facility designated  
22 by the county for evaluation and treatment, member of the  
23 attending staff, or professional person designated by the county  
24 shall assess the person to determine whether he or she can be  
25 properly served without being detained. If, in the judgment of the  
26 professional person in charge of the facility designated by the  
27 county for evaluation and treatment, member of the attending staff,  
28 or professional person designated by the county, the person can  
29 be properly served without being detained, he or she shall be  
30 provided evaluation, crisis intervention, or other inpatient or  
31 outpatient services on a voluntary basis. Nothing in this subdivision  
32 shall be interpreted to prevent a peace officer from delivering  
33 individuals to a designated facility for assessment under this  
34 section. Furthermore, the assessment requirement of this  
35 subdivision shall not be interpreted to require peace officers to  
36 perform any additional duties other than those specified in Sections  
37 5150.1 and 5150.2.

38 (d) Whenever a person is evaluated by a professional person in  
39 charge of a facility designated by the county for evaluation or  
40 treatment, member of the attending staff, or professional person

1 designated by the county and is found to be in need of mental  
2 health services, but is not admitted to the facility, all available  
3 alternative services provided pursuant to subdivision (c) shall be  
4 offered as determined by the county mental health director.

5 (e) If, in the judgment of the professional person in charge of  
6 the facility designated by the county for evaluation and treatment,  
7 member of the attending staff, or the professional person designated  
8 by the county, the person cannot be properly served without being  
9 detained, the admitting facility shall require an application in  
10 writing stating the circumstances under which the person's  
11 condition was called to the attention of the peace officer,  
12 professional person in charge of the facility designated by the  
13 county for evaluation and treatment, member of the attending staff,  
14 or professional person designated by the county, and stating that  
15 the peace officer, professional person in charge of the facility  
16 designated by the county for evaluation and treatment, member of  
17 the attending staff, or professional person designated by the county  
18 has probable cause to believe that the person is, as a result of a  
19 mental health disorder, a danger to others, or to himself or herself,  
20 or gravely disabled. The application shall also record whether the  
21 historical course of the person's mental disorder was considered  
22 in the determination, pursuant to Section 5150.05. If the probable  
23 cause is based on the statement of a person other than the peace  
24 officer, professional person in charge of the facility designated by  
25 the county for evaluation and treatment, member of the attending  
26 staff, or professional person designated by the county, the person  
27 shall be liable in a civil action for intentionally giving a statement  
28 that he or she knows to be false.

29 (f) At the time a person is taken into custody for evaluation, or  
30 within a reasonable time thereafter, unless a responsible relative  
31 or the guardian or conservator of the person is in possession of the  
32 person's personal property, the person taking him or her into  
33 custody shall take reasonable precautions to preserve and safeguard  
34 the personal property in the possession of or on the premises  
35 occupied by the person. The person taking him or her into custody  
36 shall then furnish to the court a report generally describing the  
37 person's property so preserved and safeguarded and its disposition,  
38 in substantially the form set forth in Section 5211, except that if  
39 a responsible relative or the guardian or conservator of the person  
40 is in possession of the person's property, the report shall include

1 only the name of the relative or guardian or conservator and the  
2 location of the property, whereupon responsibility of the person  
3 taking him or her into custody for that property shall terminate.  
4 As used in this section, “responsible relative” includes the spouse,  
5 parent, adult child, domestic partner, grandparent, grandchild, or  
6 adult brother or sister of the person.

7 (g) (1) Each person, at the time he or she is first taken into  
8 custody under this section, shall be provided, by the person who  
9 takes him or her into custody, the following information orally in  
10 a language or modality accessible to the person. If the person  
11 cannot understand an oral advisement, the information shall be  
12 provided in writing. The information shall be in substantially the  
13 following form:

14  
15 My name is \_\_\_\_\_ .

16 I am a \_\_\_\_\_ .

17 (peace officer/mental health professional)

18 with \_\_\_\_\_ .

19 (name of agency)

20 You are not under criminal arrest, but I am taking you for an examination by  
21 mental health professionals at \_\_\_\_\_ .

22 \_\_\_\_\_

23 (name of facility)

24 You will be told your rights by the mental health staff.

25  
26 (2) If taken into custody at his or her own residence, the person  
27 shall also be provided the following information:

28  
29 You may bring a few personal items with you, which I will have  
30 to approve. Please inform me if you need assistance turning off  
31 any appliance or water. You may make a phone call and leave a  
32 note to tell your friends or family where you have been taken.

33  
34 (h) The designated facility shall keep, for each patient evaluated,  
35 a record of the advisement given pursuant to subdivision (g) which  
36 shall include all of the following:

37 (1) The name of the person detained for evaluation.

38 (2) The name and position of the peace officer or mental health  
39 professional taking the person into custody.

1 (3) The date the advisement was completed.

2 (4) Whether the advisement was completed.

3 (5) The language or modality used to give the advisement.

4 (6) If the advisement was not completed, a statement of good  
5 cause, as defined by regulations of the State Department of Health  
6 Care Services.

7 (i) (1) Each person admitted to a facility designated by the  
8 county for evaluation and treatment shall be given the following  
9 information by admission staff of the facility. The information  
10 shall be given orally and in writing and in a language or modality  
11 accessible to the person. The written information shall be available  
12 to the person in English and in the language that is the person's  
13 primary means of communication. Accommodations for other  
14 disabilities that may affect communication shall also be provided.  
15 The information shall be in substantially the following form:

16  
17 My name is \_\_\_\_\_.

18 My position here is \_\_\_\_\_.

19 You are being placed into this psychiatric facility because it is our  
20 professional opinion that, as a result of a mental health disorder, you are likely  
21 to (check applicable):

22 ☐ Harm yourself.

23 ☐ Harm someone else.

24 ☐ Be unable to take care of your own food, clothing, and housing needs.

25 We believe this is true because

26 \_\_\_\_\_  
27 (list of the facts upon which the allegation of dangerous  
28 or gravely disabled due to mental health disorder is based, including pertinent  
29 facts arising from the admission interview).

30 You will be held for a period up to 72 hours. During the 72 hours you may  
31 also be transferred to another facility. You may request to be evaluated or  
32 treated at a facility of your choice. You may request to be evaluated or treated  
33 by a mental health professional of your choice. We cannot guarantee the facility  
34 or mental health professional you choose will be available, but we will honor  
35 your choice if we can.

36 During these 72 hours you will be evaluated by the facility staff, and you  
37 may be given treatment, including medications. It is possible for you to be  
38 released before the end of the 72 hours. But if the staff decides that you need  
39 continued treatment you can be held for a longer period of time. If you are  
40 held longer than 72 hours, you have the right to a lawyer and a qualified

1 interpreter and a hearing before a judge. If you are unable to pay for the lawyer,  
2 then one will be provided to you free of charge.

3 If you have questions about your legal rights, you may contact the county  
4 Patients' Rights Advocate at \_\_\_\_\_

5 (phone number for the county Patients' Rights  
6 \_\_\_\_\_ .

7 Advocacy office)

8 Your 72-hour period began \_\_\_\_\_ .

9 (date/time)

10  
11 (2) If the notice is given in a county where weekends and  
12 holidays are excluded from the 72-hour period, the patient shall  
13 be informed of this fact.

14 (j) For each patient admitted for evaluation and treatment, the  
15 facility shall keep with the patient's medical record a record of the  
16 advisement given pursuant to subdivision (i), which shall include  
17 all of the following:

18 (1) The name of the person performing the advisement.

19 (2) The date of the advisement.

20 (3) Whether the advisement was completed.

21 (4) The language or modality used to communicate the  
22 advisement.

23 (5) If the advisement was not completed, a statement of good  
24 cause.

25 ~~SEC. 6.~~

26 *SEC. 4.* Section 5150.3 is added to the Welfare and Institutions  
27 Code, to read:

28 5150.3. (a) An application for detention for evaluation and  
29 ~~treatment~~ *treatment, as described in subdivision (e) of Section*  
30 *5150*, shall be valid in all counties in which there is a designated  
31 facility to which the person may be taken.

32 (b) (1) If the person detained by a peace officer or ~~authorized~~  
33 *designated* professional is in a location other than a designated  
34 facility or ~~nondesignated hospital~~, *a hospital that is not a*  
35 *designated facility*, the original or copy of the application for  
36 detention for evaluation and treatment shall be presented to the  
37 designated facility under paragraph (2) or the ~~nondesignated~~  
38 hospital under paragraph (3).

39 (2) If after detention under Section 5150, the person is first taken  
40 to a designated facility, the original or a copy of the signed

1 application for detention for evaluation and treatment shall be  
2 presented to the designated facility.

3 (3) If after detention under Section 5150, the person is first taken  
4 to a ~~nondesignated hospital~~, *hospital that is not a designated*  
5 *facility*, the original or a copy of the signed application for  
6 detention for evaluation and treatment shall be presented to the  
7 ~~nondesignated~~ hospital. If the person is subsequently transferred  
8 to a designated facility, the ~~nondesignated~~ hospital shall deliver  
9 the original or a copy of the signed application for detention for  
10 evaluation and treatment to the designated facility. If the person  
11 is discharged from the ~~nondesignated hospital under Section 5164~~  
12 *hospital* without a transfer to a designated facility, the  
13 ~~nondesignated~~ hospital shall maintain the original or a copy of the  
14 original signed application for detention for evaluation and  
15 treatment.

16 (c) If a person detained for evaluation and treatment is  
17 subsequently released pursuant to Section ~~5151 or 5164~~, *5151*, the  
18 application for detention for evaluation and treatment in the  
19 possession of a designated facility or ~~nondesignated~~ hospital shall  
20 be retained for the period of time required by the medical records  
21 retention policy of the designated facility or ~~nondesignated~~ hospital.

22 SEC. 7. ~~Article 1.1 (commencing with Section 5160) is added~~  
23 ~~to Chapter 2 of Part 1 of Division 5 of the Welfare and Institutions~~  
24 ~~Code, to read:~~

25  
26 ~~Article 1.1. Persons Detained in Nondesignated Hospitals~~  
27

28 ~~5160. Unless the context otherwise requires, the following~~  
29 ~~definitions shall govern the construction of this article:~~

30 (a) ~~“Emergency department of a nondesignated hospital” means~~  
31 ~~a basic, comprehensive, or standby emergency medical service~~  
32 ~~that is approved by the State Department of Public Health as a~~  
33 ~~special or supplemental service of a nondesignated hospital. For~~  
34 ~~purposes of this part, an emergency department of a nondesignated~~  
35 ~~hospital shall include an observation or similar unit of the hospital~~  
36 ~~that meets both of the following criteria:~~

37 (1) ~~The unit is operated under the direction and policies of the~~  
38 ~~emergency department.~~

39 (2) ~~The unit provides continuing emergency services and care~~  
40 ~~to patients prior to an inpatient admission, transfer, or discharge.~~

1 (b) “Emergency professional” means either of the following:

2 (1) A physician and surgeon who is board certified or pursuing  
3 board certification in emergency medicine, or a qualified licensed  
4 person, as defined in subdivision (e), during any scheduled period  
5 that he or she is on duty to provide medical screening and treatment  
6 of patients in an emergency department of a nondesignated hospital.

7 (2) A physician and surgeon, or a qualified licensed person, as  
8 defined in subdivision (e), during any scheduled period that he or  
9 she is on duty to provide medical screening and treatment of  
10 patients in the emergency department of a nondesignated hospital  
11 that is a critical access hospital within the meaning of Section  
12 1250.7 of the Health and Safety Code. A physician and surgeon  
13 on duty under this paragraph shall include a physician and surgeon  
14 on call for a standby emergency medical service who is responsible  
15 to provide professional coverage for the emergency department.  
16 A physician and surgeon on duty under this paragraph does not  
17 include a physician and surgeon who is providing on-call specialty  
18 coverage services to the emergency department of a nondesignated  
19 hospital, unless the physician and surgeon is an emergency  
20 professional under paragraph (1).

21 (c) “Nondesignated hospital” means a general acute care  
22 hospital, as defined in subdivision (a) of Section 1250 of the Health  
23 and Safety Code or an acute psychiatric hospital, as defined in  
24 subdivision (b) of Section 1250 of the Health and Safety Code,  
25 that is not a designated facility, as defined in Section 5008.

26 (d) “Psychiatric emergency medical condition” has the same  
27 meaning as defined in subdivision (k) of Section 1317.1 of the  
28 Health and Safety Code.

29 (e) “Psychiatric professional” means a physician and surgeon  
30 licensed by the Medical Board of California who has completed  
31 an approved psychiatric residency training program and who  
32 provides specialty services to the emergency department of a  
33 nondesignated hospital.

34 (f) “Qualified licensed person” means a licensed person  
35 designated by the medical staff and governing body of a  
36 nondesignated hospital to provide emergency services and care,  
37 to the extent permitted by applicable law, in an emergency  
38 department of the nondesignated hospital under the supervision  
39 of a physician and surgeon.



1     ~~5161. (a) This section shall apply to a person who has been~~  
2 ~~detained for evaluation and treatment by a peace officer or an~~  
3 ~~authorized professional and is taken to an emergency department~~  
4 ~~of a nondesignated hospital for emergency services and care.~~

5     ~~(b) While the person is in the emergency department of the~~  
6 ~~nondesignated hospital, the detention of the person for evaluation~~  
7 ~~and treatment shall continue, unless the person is released from~~  
8 ~~detention pursuant to Section 5164.~~

9     ~~5162. (a) This section shall apply if, during a person's~~  
10 ~~examination or treatment in an emergency department, there is a~~  
11 ~~need for a determination of probable cause for the detention of the~~  
12 ~~person for evaluation and treatment.~~

13     ~~(b) If a person who has not been detained for evaluation and~~  
14 ~~treatment has signs or symptoms, in the judgment of the treating~~  
15 ~~emergency professional, that indicate probable cause for detention~~  
16 ~~for evaluation and treatment, the person shall have the right to a~~  
17 ~~prompt probable cause determination in accordance with any of~~  
18 ~~the following:~~

19     ~~(1) The hospital may contact the county to arrange for a probable~~  
20 ~~cause determination by an authorized professional, including, but~~  
21 ~~not limited to, a member of a mobile crisis team.~~

22     ~~(2) As part of an evaluation, an authorized professional may~~  
23 ~~conduct a probable cause determination and, upon a finding of~~  
24 ~~probable cause, detain the person for evaluation and treatment in~~  
25 ~~accordance with Section 5150.~~

26     ~~(3) The treating emergency professional may conduct a probable~~  
27 ~~cause determination and, upon a finding of probable cause, detain~~  
28 ~~the person for evaluation and treatment in accordance with Section~~  
29 ~~5150.~~

30     ~~(c) If the person is detained for evaluation and treatment~~  
31 ~~pursuant to this section, the detention shall continue during his or~~  
32 ~~her stay in the emergency department of a nondesignated hospital;~~  
33 ~~unless the person is released from detention pursuant to Section~~  
34 ~~5164 or the detention ends by reason of the expiration of 72 hours~~  
35 ~~pursuant to subdivision (a) of Section 5150.~~

36     ~~5163. (a) This section shall apply to a person who is first~~  
37 ~~detained pursuant to Section 5150 for evaluation and treatment in~~  
38 ~~a nondesignated hospital emergency department or has been~~  
39 ~~detained pursuant to Section 5150 for evaluation and treatment~~

1 and first taken to an emergency department of a nondesignated  
2 hospital.

3 (b) (1) Except as provided in subdivision (c), the nondesignated  
4 hospital shall notify the county in which the nondesignated hospital  
5 is located of the person's detention.

6 (2) If the person was detained for evaluation and treatment and  
7 taken to the emergency department of the nondesignated hospital  
8 pursuant to Section 5161, the notification shall occur after the  
9 hospital has performed an initial medical screening of the person  
10 in accordance with paragraphs (1) and (2) of subdivision (a) of  
11 Section 1317.1 of the Health and Safety Code.

12 (3) If the person is first detained for evaluation and treatment  
13 in the emergency department of the nondesignated hospital  
14 pursuant to Section 5162, the notification shall occur when the  
15 probable cause determination has been completed.

16 (c) The notification to the county shall be made using the  
17 24-hour toll-free telephone number established by the county's  
18 mental health program for psychiatric emergency services and  
19 crisis stabilization if the county's mental health program has a  
20 24-hour toll-free telephone number in operation on January 1,  
21 2017, for this purpose. The notification shall be documented in  
22 the patient's medical record.

23 (d) The nondesignated hospital shall advise the county of all of  
24 the following:

25 (1) The time when the 72-hour detention period for evaluation  
26 and treatment expires.

27 (2) An estimate of the time when the person will be medically  
28 stable for transfer to a designated facility.

29 (3) The county in which the person resides, if known.

30 (e) The notification to the county under this section shall not  
31 be required if the treating emergency professional determines that  
32 the person will be admitted, pursuant to Section 5165, to an acute  
33 care bed of a nondesignated hospital for the primary purpose of  
34 receiving acute inpatient services for a medical condition that is  
35 in addition to the person's psychiatric condition.

36 5164. (a) This section shall establish a process for releasing  
37 from detention a person who has been detained for evaluation and  
38 treatment during the time that the person is detained in the  
39 emergency department of a nondesignated hospital.

1     ~~(b) If the treating emergency professional, after an examination~~  
2 ~~of the person, determines that a person does not have a mental~~  
3 ~~disorder, the treating professional may release the person from~~  
4 ~~detention for evaluation and treatment.~~

5     ~~(c) If the treating emergency professional, after an examination~~  
6 ~~of the person, determines that a person has a mental disorder, but~~  
7 ~~there is no longer probable cause to continue the detention for~~  
8 ~~evaluation and treatment, the treating emergency professional may~~  
9 ~~release that person only when the treating emergency professional~~  
10 ~~has conducted a face-to-face examination and determined that the~~  
11 ~~person does not pose a danger to himself or herself or others, and~~  
12 ~~is not gravely disabled.~~

13     ~~(d) Nothing in this article shall be construed to prevent a treating~~  
14 ~~emergency professional from consulting with an authorized~~  
15 ~~professional, including a psychiatric professional, for the purposes~~  
16 ~~of determining whether a person has a mental disorder or whether~~  
17 ~~there is no longer probable cause to detain the person because the~~  
18 ~~person does not pose a danger to himself or herself or others, or~~  
19 ~~is not gravely disabled.~~

20     ~~(e) Nothing in this article shall be construed to prevent an~~  
21 ~~authorized professional, including a psychiatric professional, from~~  
22 ~~directly releasing the person after conducting a face-to-face~~  
23 ~~examination and determining there is no longer probable cause to~~  
24 ~~detain the person because the person no longer poses a danger to~~  
25 ~~himself or herself or others, or is not gravely disabled.~~

26     ~~5165. (a) A nondesignated hospital and the professional staff~~  
27 ~~of the nondesignated hospital shall not be civilly or criminally~~  
28 ~~liable for the transfer of a person detained for evaluation and~~  
29 ~~treatment to a designated facility in accordance with this article.~~

30     ~~(b) The peace officer or authorized professional responsible for~~  
31 ~~the detention of the person for evaluation and treatment who~~  
32 ~~transfers the custody of the person to an emergency professional~~  
33 ~~of a nondesignated hospital shall not be civilly or criminally liable~~  
34 ~~for any of the following:~~

35     ~~(1) The continuation and enforcement of the detention for~~  
36 ~~evaluation and treatment during the person's stay in the emergency~~  
37 ~~department of the nondesignated hospital prior to the discharge of~~  
38 ~~the person from the hospital in accordance with this article.~~

39     ~~(2) The release of the person from detention for evaluation and~~  
40 ~~treatment in accordance with this article.~~

~~(3) The transfer of the person detained for evaluation and treatment to a designated facility in accordance with this article.~~

~~(e) Nothing in this section shall exonerate a person described in this section from liability if that person acted with gross negligence or willful or wanton misconduct.~~

~~5166. (a) A provider of ambulance services licensed by the Department of the California Highway Patrol or operated by a public safety agency, and the employees of those providers who are certified or licensed under Section 1797.56 of the Health and Safety Code, shall be authorized to do both of the following:~~

~~(1) Transport a person who is in a hospital or facility on a voluntary basis to a designated facility for psychiatric treatment.~~

~~(2) Transport, and continue the detention of, a person who is detained for evaluation and treatment in a hospital or facility to a designated facility for psychiatric treatment.~~

~~(b) This section shall apply to transfers from any type of facility, including nondesignated hospitals and other facilities.~~

~~(c) A person shall not be detained for evaluation and treatment solely for the purpose of transporting the person, or transferring the person by a provider of ambulance services, to a designated facility or an emergency department of a nondesignated hospital.~~

~~5167. (a) Notwithstanding Section 5328, peace officers, authorized professionals, emergency professionals, and other qualified professionals who participate in the examination, consultation, treatment, placement, referral, or transport of a person who is, or for whom there may be probable cause to be, detained for evaluation and treatment under Section 5150 may engage in communication of patient information among each other and with county behavioral health professionals and staff, in the provision of emergency services, referral, and placement for the person with a designated facility or other agency. This includes communication about the historical course of the person's mental disorder, as defined in Section 5150.05.~~

~~(b) Communication of patient information under this section also includes both of the following:~~

~~(1) Communications between emergency medical personnel and emergency professionals at a licensed hospital, as defined in subdivision (a) or (b) of Section 1250 of the Health and Safety Code, in examination and treatment of a person at the scene of an~~

1 emergency or in transport of the person to a hospital for emergency  
2 services and care.

3 ~~(2) Communications among emergency medical personnel,~~  
4 ~~emergency professionals, and authorized professionals at a~~  
5 ~~designated facility or a nondesignated hospital at which the person~~  
6 ~~may be evaluated, treated, placed, referred, or transported,~~  
7 ~~including during the course of transport.~~

8 ~~(c) For purposes of this section, communications among~~  
9 ~~emergency medical personnel, emergency professionals, and~~  
10 ~~authorized professionals include communications with licensed~~  
11 ~~persons working under the supervision of emergency professionals~~  
12 ~~and authorized professionals.~~

13 ~~5168. Nothing in this chapter supersedes or abrogates the~~  
14 ~~provisions governing medical control set forth in Chapter 5~~  
15 ~~(commencing with Section 1798) of Division 2.5 of the Health~~  
16 ~~and Safety Code.~~

17 ~~SEC. 8. Section 5270.50 of the Welfare and Institutions Code~~  
18 ~~is amended to read:~~

19 ~~5270.50. (a) Notwithstanding Section 5113, if the provisions~~  
20 ~~of Section 5270.35 have been met, the professional person in~~  
21 ~~charge of the facility providing intensive treatment, his or her~~  
22 ~~designee, the medical director of the facility or his or her designee~~  
23 ~~described in Section 5270.35, the psychiatrist directly responsible~~  
24 ~~for the person's treatment, or the psychologist shall not be held~~  
25 ~~civilly or criminally liable for any action by a person released~~  
26 ~~before or at the end of the 30 days of intensive treatment pursuant~~  
27 ~~to this article.~~

28 ~~(b) The professional person in charge of the facility providing~~  
29 ~~intensive treatment or his or her designee, the medical director of~~  
30 ~~the facility or his or her designee described in Section 5270.35,~~  
31 ~~the psychiatrist directly responsible for the person's treatment, or~~  
32 ~~the psychologist shall not be held civilly or criminally liable for~~  
33 ~~any action by a person released at the end of the 30 days of~~  
34 ~~intensive treatment pursuant to this article.~~

35 ~~(c) The attorney or advocate representing the person, the~~  
36 ~~court-appointed commissioner or referee, the certification review~~  
37 ~~hearing officer conducting the certification review hearing, or the~~  
38 ~~peace officer responsible for detaining the person shall not be~~  
39 ~~civilly or criminally liable for any action by a person released at~~

1 ~~or before the end of the 30 days of intensive treatment pursuant to~~  
2 ~~this article.~~

3 *SEC. 5. Section 5150.7 is added to the Welfare and Institutions*  
4 *Code, to read:*

5 *5150.7. (a) Notwithstanding Section 5328, during an*  
6 *emergency, peace officers, designated professionals, emergency*  
7 *physicians, and other emergency and qualified professionals who*  
8 *participate in the examination, consultation, treatment, placement,*  
9 *referral, or transport of a person who is, or for whom there may*  
10 *be probable cause to be, detained for evaluation and treatment*  
11 *under Section 5150, may communicate patient information to each*  
12 *other and county behavioral health professionals and staff, in the*  
13 *provision of emergency services, referral, and placement for the*  
14 *person with a designated facility or other agency. This includes*  
15 *communication about the historical course of the person's mental*  
16 *disorder, as defined in Section 5150.05.*

17 *(b) Communication of patient information under this section*  
18 *also includes both of the following:*

19 *(1) Communications between emergency medical personnel and*  
20 *emergency physicians at a licensed hospital, as defined in*  
21 *subdivision (a) or (b) of Section 1250 of the Health and Safety*  
22 *Code, in examination and treatment of a person at the scene of an*  
23 *emergency or in transport of the person to a hospital for emergency*  
24 *services and care.*

25 *(2) Communications among emergency medical personnel,*  
26 *emergency physicians, and designated professionals at a*  
27 *designated facility, or a hospital that is not a designated facility,*  
28 *at which the person may be evaluated, treated, placed, referred,*  
29 *or transported, including during the course of transport.*

30 *(c) For purposes of this section, communications among*  
31 *emergency medical personnel, emergency physicians, and*  
32 *designated professionals include communications with licensed*  
33 *persons working under the supervision of emergency physicians*  
34 *and designated professionals.*

35 *(d) For purposes of this section, "designated professional"*  
36 *means a person designated by the county under paragraph (1) of*  
37 *subdivision (a) of Section 5150.*

O