

AMENDED IN SENATE MARCH 29, 2016

SENATE BILL

No. 1404

Introduced by Senator Leno

February 19, 2016

An act to amend Section 13963.1 of, and to add Sections 13963.2, 13963.3, and 13963.4 to, the Government Code, relating to victims of violent crimes.

LEGISLATIVE COUNSEL'S DIGEST

SB 1404, as amended, Leno. Victims of violent crimes: trauma recovery centers.

Existing law requires the California Victim Compensation and Government Claims Board to administer a program to assist state residents to obtain compensation for their pecuniary losses suffered as a direct result of criminal acts. Payment is made under these provisions from the Restitution Fund, which is continuously appropriated to the board for these purposes. Existing law requires the California Victim Compensation and Government Claims Board to administer a program to evaluate applications and award grants to trauma recovery centers funded by moneys in the Restitution Fund.

This bill would make legislative findings and recognize the Trauma Recovery Center at San Francisco General Hospital, University of California, San Francisco, as the State Pilot Trauma Recovery Center (State Pilot TRC). The bill would require the board to use the evidence-based Integrated Trauma Recovery Services model developed by the State Pilot TRC when it provides grants to trauma recovery centers. This bill would also require the ~~board~~, *board* to enter into an interagency agreement with the Trauma Recovery Center of the University of California, San Francisco, to establish the State Pilot TRC

as the State of California’s Trauma Recovery Center of Excellence (TR-COE). The agreement provided for in this bill would require the TR-COE to support the board by defining the core elements of the evidence-based practice and providing training materials, technical assistance, and ongoing consultation and programming to the board and to each center to enable the grantees to replicate the evidence-based approach. The bill would require the board to create an advisory committee to advise the board on matters pertaining to the administration of funds designated for use at trauma recovery centers, and criteria for awarding grants to trauma recovery centers.

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. ~~(a)~~—The Legislature finds and declares all of the
 2 following:
 3 ~~(1)~~
 4 (a) Victims of violent crime may benefit from access to
 5 structured programs of practical and emotional support. Research
 6 shows that evidence-based trauma recovery approaches are more
 7 effective, at a lesser cost, than customary fee-for-service programs.
 8 State-of-the-art fee-for-service funding increasingly emphasizes
 9 funding best practices, established through research, that can be
 10 varied but have specific core elements that remain constant from
 11 grantee to grantee. The public benefits when government agencies
 12 and grantees collaborate with institutions with expertise in
 13 establishing and conducting evidence-based services.
 14 ~~(2)~~
 15 (b) The Trauma Recovery Center at San Francisco General
 16 Hospital, University of California, San Francisco (UCSF TRC),
 17 is an award-winning, nationally recognized program created in
 18 2001 in partnership with the California Victim Compensation and
 19 Government Claims Board. The UCSF TRC is hereby recognized
 20 as the State Pilot Trauma Recovery Center (State Pilot TRC). The
 21 State Pilot TRC was established by the Legislature as a four-year
 22 demonstration project to develop and test a comprehensive model
 23 of care as an alternative to fee-for-service care reimbursed by
 24 victim restitution funds. It was designed to increase access for
 25 crime victims to these funds.

1 ~~(3)~~

2 (c) The results of this four-year demonstration project have
3 established that the State Pilot TRC model was both clinically
4 effective and cost effective when compared to customary
5 fee-for-service care. Seventy-seven percent of victims receiving
6 trauma recovery center services engaged in mental health treatment,
7 compared to 34 percent receiving customary care. The State Pilot
8 TRC model increased the rate by which sexual assault victims
9 received mental health services from 6 percent to 71 percent,
10 successfully linked 53 percent to legal services, 40 percent to
11 vocational services, and 31 percent to safer and more permanent
12 housing. Trauma recovery center services cost 34 percent less than
13 customary care.

14 ~~(4)~~

15 (d) California voters approved Proposition 47, known as the
16 Safe Neighborhoods and Schools Act of 2014. The measure was
17 enacted to ensure that prison spending is focused on violent and
18 serious offenses to maximize alternatives for nonviolent and
19 nonserious crimes and to invest the resulting savings into
20 prevention and support programs.

21 ~~(5)~~

22 (e) The Safe Neighborhoods and ~~School~~ *Schools* Act requires
23 10 percent of the moneys in the Safe Neighborhoods and Schools
24 Fund to be allocated to the California Victim Compensation
25 Program to administer a grant program to establish trauma recovery
26 centers modeled after the UCSF TRC.

27 ~~(6)~~

28 (f) Systematic training, technical assistance, and ongoing
29 standardized program evaluations are needed to ensure that all
30 new state-funded trauma recovery centers are evidence-based,
31 accountable, clinically effective, and cost effective.

32 ~~(7)~~

33 (g) By creating the Trauma Recovery Center of Excellence, it
34 is the intent of the Legislature that these services will be delivered
35 in a clinically effective and cost-effective manner, and that the
36 victims of crime in California will have increased access to needed
37 services.

38 SEC. 2. Section 13963.1 of the Government Code is amended
39 to read:

1 13963.1. (a) The Legislature finds and declares all of the
2 following:

3 (1) Without treatment, approximately 50 percent of people who
4 survive a traumatic, violent injury experience lasting or extended
5 psychological or social difficulties. Untreated psychological trauma
6 often has severe economic consequences, including overuse of
7 costly medical services, loss of income, failure to return to gainful
8 employment, loss of medical insurance, and loss of stable housing.

9 (2) Victims of crime should receive timely and effective mental
10 health treatment.

11 (3) The board shall administer a program to evaluate applications
12 and award grants to trauma recovery centers.

13 (b) The board shall award a grant only to a trauma recovery
14 center that meets all of the following criteria:

15 (1) The trauma recovery center demonstrates that it serves as a
16 community resource by providing services, including, but not
17 limited to, making presentations and providing training to law
18 enforcement, community-based agencies, and other health care
19 providers on the identification and effects of violent crime.

20 (2) Any other related criteria required by the board, including
21 those developed pursuant to subdivision (c) of Section 13963.4.

22 (3) The trauma recovery center uses the core elements
23 established in Section 13963.2.

24 (c) *It is the intent of the Legislature to provide an annual*
25 *appropriation of two million dollars (\$2,000,000) per year. All*
26 *grants awarded by the board shall be funded only from the*
27 *Restitution Fund.*

28 (e)

29 (d) The board may award a grant providing funding for up to a
30 maximum period of three years. Any portion of a grant that a
31 trauma recovery center does not use within the specified grant
32 period shall revert to the ~~Safe Neighborhoods and Schools~~
33 *Restitution Fund*. The board may award consecutive grants to a
34 trauma recovery center to prevent a lapse in funding.

35 (d)

36 (e) The board, when considering grant applications, shall give
37 preference to a trauma recovery center that conducts outreach to,
38 and serves, both of the following:

39 (1) Crime victims who typically are unable to access traditional
40 services, including, but not limited to, victims who are homeless,

1 chronically mentally ill, of diverse ethnicity, members of immigrant
2 and refugee groups, disabled, who have severe trauma-related
3 symptoms or complex psychological issues, or juvenile victims,
4 including minors who have had contact with the juvenile
5 dependency or justice system.

6 (2) Victims of a wide range of crimes, including, but not limited
7 to, victims of sexual assault, domestic violence, physical assault,
8 shooting, stabbing, human trafficking, and vehicular assault, and
9 family members of homicide victims.

10 ~~(e)~~

11 (f) The trauma recovery center sites shall be selected by the
12 board through a well-defined selection process that takes into
13 account the rate of crime and geographic distribution to serve the
14 greatest number of victims.

15 ~~(f)~~

16 (g) A trauma recovery center that is awarded a grant shall do
17 both of the following:

18 (1) Report to the board annually on how grant funds were spent,
19 how many clients were served (counting an individual client who
20 receives multiple services only once), units of service, staff
21 productivity, treatment outcomes, and patient flow throughout
22 both the clinical and evaluation components of service.

23 (2) In compliance with federal statutes and rules governing
24 federal matching funds for victims' services, each center shall
25 submit any forms and data requested by the board to allow the
26 board to receive the 60 percent federal matching funds for eligible
27 victim services and allowable expenses.

28 ~~(g)~~

29 (h) For purposes of this section, a trauma recovery center
30 provides, including, but not limited to, all of the following
31 resources, treatments, and recovery services to crime victims:

32 (1) Mental health services.

33 (2) Assertive community-based outreach and clinical case
34 management.

35 (3) Coordination of care among medical and mental health care
36 providers, law enforcement agencies, and other social services.

37 (4) Services to family members and loved ones of homicide
38 victims.

1 (5) A multidisciplinary staff of clinicians that includes
2 psychiatrists, psychologists, social workers, case managers, and
3 peer counselors.

4 SEC. 3. Section 13963.2 is added to the Government Code, to
5 read:

6 13963.2. The Trauma Recovery Center at the San Francisco
7 General Hospital, University of California, San Francisco, is
8 recognized as the State Pilot Trauma Recovery Center (State Pilot
9 TRC). The California Victim Compensation and Government
10 Claims Board shall use the evidence-based Integrated Trauma
11 Recovery Services (ITRS) model developed by the State Pilot TRC
12 when it selects, establishes, and implements trauma recovery
13 centers pursuant to Section 13963.1. All ITRS programs funded
14 through the Safe Neighborhoods and Schools Fund shall do all of
15 the following:

16 (a) Provide outreach and services to crime victims who typically
17 are unable to access traditional services, including, but not limited
18 to, victims who are homeless, chronically mentally ill, members
19 of immigrant and refugee groups, disabled, who have severe
20 trauma-related symptoms or complex psychological issues, are of
21 diverse ethnicity or origin, or are juvenile victims, including minors
22 who have had contact with the juvenile dependency or justice
23 system.

24 (b) Serve victims of a wide range of crimes, including, but not
25 limited to, victims of sexual assault, domestic violence, battery,
26 crimes of violence, vehicular assault, human trafficking, as well
27 as family members of homicide victims.

28 (c) Offer a structured evidence-based program of mental health
29 and support services that provide victims with services that include
30 intervention, individual and group treatment, medication
31 management, substance abuse treatment, case management, and
32 assertive outreach. This care shall be provided in a manner that
33 increases access to services and removes barriers to care for victims
34 of violent crime, such as providing services to a victim in his or
35 her home, in the community, or other locations that may be outside
36 the agency.

37 (d) Be comprised of a staff that includes a multidisciplinary
38 team of integrated trauma clinicians made up of psychiatrists,
39 psychologists, and social workers. A trauma clinician shall be
40 either a licensed clinician or a supervised clinician engaged in

1 completion of the applicable licensure process. Clinical supervision
2 and other supports shall be provided to staff regularly to ensure
3 the highest quality of care and to help staff constructively manage
4 vicarious trauma they experience as service providers to victims
5 of violent crime.

6 (e) Offer psychotherapy and case management that is
7 coordinated through a single point of contact for the victim, with
8 support from an integrated multidisciplinary trauma treatment
9 team. All treatment teams shall collaboratively develop treatment
10 plans in order to achieve positive outcomes for clients.

11 (f) Deliver services that include assertive case management.
12 These services shall include, but are not limited to, accompanying
13 a client to court proceedings, medical appointments, or other
14 community appointments as needed, case management services
15 such as assistance in the ~~completion~~ *completion* and filing of an
16 application for assistance to the California Victims' Compensation
17 Program, the filing of police reports, assistance with obtaining safe
18 housing and financial entitlements, providing linkages to medical
19 care, providing assistance securing employment, working as a
20 liaison to other community agencies, law enforcement, or other
21 supportive service providers as needed.

22 (g) Ensure that no person is excluded from services solely on
23 the basis of emotional or behavioral issues resulting from trauma,
24 including, but not limited to, substance abuse problems, low-initial
25 motivation, or high levels of anxiety.

26 (h) Adhere to established, evidence-based practices, including,
27 but not limited to, motivational interviewing, harm reduction,
28 seeking safety, cognitive behavioral therapy, dialectical behavior,
29 and cognitive processing therapy.

30 (i) Maintain as a primary goal a decrease in psychosocial
31 distress, minimize long-term disability, improve overall quality of
32 life, reduce the risk of future victimization, and promote
33 post-traumatic growth.

34 (j) Provide holistic and accountable services that ensure
35 treatment shall be provided *for* up to 16 sessions. For those with
36 ongoing problems and a primary focus on trauma, treatment may
37 be extended after special consideration with the clinical supervisor.
38 Extension beyond 32 sessions shall require approval by a clinical
39 steering and utilization group that considers the client's progress
40 in treatment and remaining need.

1 SEC. 4. Section 13963.3 is added to the Government Code, to
2 read:

3 13963.3. (a) The board shall enter into an interagency
4 agreement with the Trauma Recovery Center of the University of
5 California, San Francisco, to establish the State Pilot TRC as the
6 State of California’s Trauma Recovery Center of Excellence
7 (TR-COE). This agreement shall require:

8 (1) The TR-COE to define the core elements of the
9 evidence-based practice.

10 (2) The board to consult with the TR-COE in the replication of
11 the integrated trauma recovery services approach.

12 (3) The TR-COE to assist by providing training materials,
13 technical assistance, and ongoing consultation to the board and to
14 each center to enable the grantees to replicate the evidence-based
15 approach.

16 (4) The TR-COE to assist in evaluation by designing a multisite
17 evaluation to measure adherence to the practice and effectiveness
18 of each center.

19 (b) The board shall not spend more than 5 percent annually of
20 the moneys appropriated to it from the Safe Neighborhoods and
21 Schools Fund for administrative costs.

22 (c) The board shall, in compliance with Section 9795, annually
23 report to the Legislature on the funding received from the Safe
24 Neighborhoods and Schools Fund with a detailed summary of the
25 programs funded by the moneys allocated to it from said fund.

26 (d) This section does not apply to the University of California
27 unless the Regents of the University of California, by appropriate
28 resolution, make this section applicable.

29 SEC. 5. Section 13963.4 is added to the Government Code, to
30 read:

31 13963.4. (a) The board shall create an advisory committee to
32 advise the board on matters pertaining to the administration of
33 funds designated for use at trauma recovery centers.

34 (b) The advisory committee shall have the authority to make
35 recommendations to the board related to regulations governing
36 funds for trauma recovery centers that are administered by the
37 board.

38 (c) The advisory committee shall have the authority to make
39 recommendations to the board relating to the criteria for awarding
40 grants to trauma recovery centers, including, but not limited to,

1 any funds received from the Safe Neighborhoods and Schools
2 Fund.

3 (d) The advisory committee shall be composed as follows:

4 (1) One representative from each trauma recovery center in
5 California.

6 (2) Three services providers who are experts in the field of
7 trauma recovery services, each representing a distinct geographic
8 region within the state, including at least one provider who has
9 significant experience in providing services to rural communities.

10 (3) Three people who have previously received or are the current
11 recipients of services from a trauma recovery center.

12 (e) The advisory committee shall have the authority to convene
13 public hearings for the purpose of acting on any of the authority
14 delegated to it by this section.

15 (f) All meetings of the advisory committee shall be publicly
16 noticed and a record of those hearings maintained.

17 (g) Nothing in this section shall prohibit, limit, or otherwise
18 prevent the board from consulting with additional experts in the
19 performance of the boards duties.

O