

ASSEMBLY BILL

No. 1331

Introduced by Assembly Member Irwin

February 19, 2021

An act to add Section 5401 to the Welfare and Institutions Code, relating to mental health.

LEGISLATIVE COUNSEL'S DIGEST

AB 1331, as introduced, Irwin. Mental health: Statewide Director of Crisis Services.

Existing law, the Lanterman-Petris-Short Act, authorizes, among other things, the involuntary commitment and treatment of persons with specified mental health disorders and the appointment of a conservator of the person, of the estate, or of both, for a person who is gravely disabled as a result of a mental health disorder. The act is administered by the Director of Health Care Services.

This bill would require the director to appoint a full-time Statewide Director of Crisis Services, who would be responsible for various tasks relating to behavioral health crisis care in the state including, among other things, coordinating behavioral health programs and services statewide to ensure continuity of services and access points and to enhance cross-agency information exchange and resource sharing.

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 5401 is added to the Welfare and
- 2 Institutions Code, to read:

1 5401. (a) The Legislature finds and declares all of the
2 following:

3 (1) California’s system of caring for individuals experiencing
4 a behavioral health crisis is fragmented and breaking — some
5 would say it is completely broken. An estimated 1.4 million
6 Californians now live with a serious mental illness such as
7 schizophrenia, bipolar disorder, and major depression, while
8 millions of others struggle with day-to-day problems that
9 occasionally rise to the crisis level. There are inadequate crisis
10 services available for individuals experiencing a behavioral health
11 crisis in virtually every geographic area of the state.

12 (2) The lack of coordination and continuity among programs in
13 a multifaceted, complex system of state and local agencies
14 frequently results in more expensive services with poorer outcomes
15 for individuals and their families. Too often, individuals
16 experiencing a behavioral health crisis are met with delay,
17 detainment, and even denial of service in a manner that creates
18 undue burden on the person, their family, law enforcement,
19 emergency departments, and justice systems.

20 (3) The current approach to crisis care is patchwork and delivers
21 minimal treatment for some people while others, often those who
22 have not been engaged in care, fall through the cracks, resulting
23 in multiple hospital readmissions, life in the criminal justice
24 system, homelessness, early death, and suicide.

25 (4) A comprehensive and integrated behavioral health crisis
26 care network is crucial in preventing tragedies of public and patient
27 safety, violation of civil rights, extraordinary and unacceptable
28 loss of lives, and waste of resources. California requires strong
29 leadership on a statewide basis to develop an effective crisis care
30 system that saves lives and dollars.

31 (b) The Director of Health Care Services shall appoint a full-time
32 Statewide Director of Crisis Services. This executive shall be
33 responsible for all of the following:

34 (1) Convening state and local leaders to develop and implement
35 a cohesive statewide behavioral health crisis care delivery system
36 utilizing the National Guidelines for Crisis Care – A Best Practice
37 Toolkit published by the United States Substance Abuse and
38 Mental Health Administration in 2020.

39 (2) Coordinating behavioral health programs and services
40 statewide to ensure continuity of services and access points and

1 to enhance cross-agency information exchange and resource
2 sharing.

3 (3) Identifying and addressing behavioral health services gaps
4 and needs to ensure optimal service delivery to maximize resources
5 to effectively meet the diverse needs of people and communities.

6 (4) Maximizing the use of existing infrastructures and
7 competencies of behavioral health prevention and early intervention
8 services.

9 (5) Ensuring that the financial alignment of behavioral health
10 funding best meets the needs of individuals across California.

11 (6) Collecting and analyzing data on existing behavioral health
12 program results and effectiveness.

13 (7) Promoting the utilization of successful, promising, and
14 evidence-based behavioral health services and service delivery.

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