

AMENDED IN SENATE MARCH 24, 2025

**SENATE BILL**

**No. 331**

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**Introduced by Senator ~~Padilla Menjivar~~**

February 12, 2025

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~~An act to amend Section 25545 of, and to add Section 25545.14 to, the Public Resources Code, and to add Section 1003.7 to the Public Utilities Code, relating to electricity. An act to amend Sections 5008, 5977, 5977.1, 5977.2, 5977.3, 5977.4, 5982, and 5983 of, and to add Section 5009.5 to, the Welfare and Institutions Code, relating to substance abuse.~~

LEGISLATIVE COUNSEL'S DIGEST

SB 331, as amended, ~~Padilla Menjivar. State Energy Resources Conservation and Development Commission: certification of facilities: electrical transmission projects. Substance abuse.~~

*(1) Existing law, the Lanterman-Petris-Short (LPS) Act, authorizes the involuntary commitment and treatment of persons with specified mental disorders. Under the act, when a person, as a result of a mental health disorder, is a danger to themselves or others, or is gravely disabled, the person may, upon probable cause, be taken into custody by specified individuals, including, among others, a peace officer and a designated member of a mobile crisis team, and placed in a facility designated by the county and approved by the State Department of Health Care Services for up to 72 hours for evaluation and treatment. For the purposes of specified provisions, including those allowing court-ordered evaluations for individuals impaired by chronic alcoholism, existing law defines "gravely disabled" as a condition in which a person, as a result of impairment by chronic alcoholism, is*

*unable to provide for their basic personal needs for food, clothing, shelter, personal safety, or necessary medical care.*

*This bill would additionally apply that definition to provisions allowing a court-ordered evaluation of an individual with a mental health condition. The bill would further define a “mental health disorder” as a condition outlined in the current edition of the Diagnostic and Statistical Manual of Mental Disorders.*

*(2) Existing law establishes the State Department of Health Care Services to administer and license various health-related programs and health professionals, including, among others, programs and professionals supporting mental health, providing basic health care, and addressing substance use disorders.*

*The bill would require the department to establish and implement training guidelines for counties regarding the electronic submission of evaluation orders submitted pursuant to the LPS Act.*

*(3) Existing law requires the Director of Health Care Services to oversee the Community Assistance, Recovery, and Empowerment (CARE) Act. Existing law authorizes specified adult persons to petition a civil court to create a voluntary CARE agreement or a court-ordered CARE plan and implement services, to be provided by county behavioral health agencies, to provide behavioral health care, including stabilization medication, housing, and other enumerated services, to adults who are currently experiencing a qualifying severe mental illness and who meet other specified criteria, including that the person is not clinically stabilized in ongoing voluntary treatment and is either unlikely to survive safely in the community without ongoing supervision and the person’s condition is substantially deteriorating or the person is in need of services and supports to prevent a relapse or deterioration that would likely result in grave disability, or serious harm to the person or others.*

*Existing law authorizes specified individuals to file a petition to commence the CARE process, including, but not limited to, a person with whom the respondent resides or a spouse, parent, sibling, child, grandparent, or an individual who stands in loco parentis to the respondent. Existing law requires the court to issue an order relieving the original petitioner if the petitioner is someone other than the director of a county behavioral health agency or their designee and appoint the director or their designee as the successor petitioner. Existing law requires the original petitioner to have specified rights if they are a parent or family member or the person with which the respondent*

*resides. Existing law also requires certain notice and service requirements to the respondent, respondent's counsel, and the supporter, as well as requires the court to order county behavioral health agencies to work with the respondent, among other specified entities, to enter into CARE agreements, among other things.*

*The bill would authorize the original petitioner to maintain their role and not be substituted by the director of a county behavioral health agency and would give all petitioners specified rights in the proceedings regardless of the substitution status of the petitioner. The bill would also include the nonsubstituted petitioner in the specified entities that would receive notice of proceedings and service of documents and reports. The bill would also include the nonsubstituted petitioner in those required to work with county behavioral health agencies to enter into CARE agreements, among other things.*

*(4) Existing law requires the department to provide training and technical assistance to county behavioral health agencies to support the implementation of the CARE Act, including training regarding the CARE process, CARE agreement and plan services and supports, supported decisionmaking, the supporter role, trauma-informed care, elimination of bias, psychiatric advance directives, family psychoeducation, and data collection.*

*The bill would require the department to additionally provide training for the electronic submission of forms.*

~~(1) The California Environmental Quality Act (CEQA) requires preparation of specified documentation before a public agency approves or carries out certain projects. Existing law makes an environmental leadership development project, as defined, that meets specified requirements and is certified by the Governor eligible for streamlined procedures under CEQA. In particular, existing law requires the adoption of rules of court that expedite certain CEQA actions and proceedings related to an environmental leadership development project to resolve those actions and proceedings, to the extent feasible, within 270 days.~~

~~Existing law authorizes a person proposing an eligible facility, including an electrical transmission line carrying electricity from certain other facilities that are located in the state to a point of junction with any interconnected electrical transmission system, to file an application, on or before June 30, 2029, with the State Energy Resources Conservation and Development Commission (Energy Commission) to certify a site and related facility for purposes of specified environmental review procedures. Existing law deems a certified site and related facility~~

~~an environmental leadership development project, as specified, and makes the site and related facility subject to streamlined procedures under CEQA with no further action by the applicant or the Governor. Under existing law, the Energy Commission's certification of sites and related facilities is in lieu of any permit, certificate, or similar document required by any state, local, or regional agency, or federal agency to the extent permitted by federal law, for the use of the sites and related facilities, and supersedes any applicable statute, ordinance, or regulation of any state, local, or regional agency, or federal agency to the extent permitted by federal law, except as specified.~~

~~This bill would expand the facilities eligible to be certified pursuant to the provisions described above by the Energy Commission and deemed environmental leadership development projects to include electrical transmission projects. The bill would require an applicant applying for certification of an electrical transmission project to file an application on or before January 1, 2033, and to take certain actions, including, among other actions, to avoid or minimize significant environmental impacts in any disadvantaged community.~~

~~(2) Existing law vests the Public Utilities Commission (PUC) with regulatory authority over public utilities, including electrical corporations. Existing law prohibits an electrical corporation from beginning the construction of a line, plant, or system, or any extension of a line, plant, or system, without having first obtained from the PUC a certificate that the present or future public convenience and necessity require its construction. Under existing law, a violation of the Public Utilities Act or any order, decision, rule, direction, demand, or requirement of the PUC is a crime.~~

~~The bill would authorize an electrical corporation that files an application with the PUC to authorize the new construction of any electrical transmission facility to simultaneously submit to the Energy Commission an application for certification of the facility, as specified. The bill would authorize the Energy Commission to recover the reasonable administrative costs incurred from evaluating an application, as specified. The bill would provide that the Energy Commission's certification of a facility proposed by an electrical corporation satisfies and replaces the PUC's obligations under CEQA with respect to that facility. The bill would prohibit the PUC from approving an application until after the Energy Commission has issued a decision on certification of the proposed facility. Because these provisions would be part of the Public Utilities Act and a violation of these requirements or a PUC~~

action implementing these requirements would be a crime, the bill would impose a state-mandated local program.

~~(3) 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 no reimbursement is required by this act for a specified reason.~~

Vote: majority. Appropriation: no. Fiscal committee: yes.  
State-mandated local program: ~~yes~~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) of Chapter 2 or by a superior court pursuant to Article 3  
16    (commencing with Section 5225) of Chapter 2.

17    (c) “Intensive treatment” consists of such hospital and other  
18    services as may be indicated. Intensive treatment shall be provided  
19    by 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. This part  
26    does not prohibit an intensive treatment facility from also providing  
27    72-hour evaluation and treatment.

1 (d) “Referral” is referral of persons by each agency or facility  
2 providing assessment, evaluation, crisis intervention, or treatment  
3 services to other agencies or individuals. The purpose of referral  
4 shall be to provide for continuity of care, and may include, but  
5 need not be limited to, informing the person of available services,  
6 making appointments on the person’s behalf, discussing the  
7 person’s problem with the agency or individual to which the person  
8 has been referred, appraising the outcome of referrals, and  
9 arranging for personal escort and transportation when necessary.  
10 Referral shall be considered complete when the agency or  
11 individual to whom the person has been referred accepts  
12 responsibility for providing the necessary services. All persons  
13 shall be advised of available precare services that prevent initial  
14 recourse to hospital treatment or aftercare services that support  
15 adjustment to community living following hospital treatment.  
16 These services may be provided through county or city mental  
17 health departments, state hospitals under the jurisdiction of the  
18 State Department of State Hospitals, regional centers under contract  
19 with the State Department of Developmental Services, or other  
20 public or private entities.

21 Each agency or facility providing evaluation services shall  
22 maintain a current and comprehensive file of all community  
23 services, both public and private. These files shall contain current  
24 agreements with agencies or individuals accepting referrals, as  
25 well as appraisals of the results of past referrals.

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

38 (f) “Prepetition screening” is a screening of all petitions for  
39 court-ordered evaluation as provided in Article 2 (commencing  
40 with Section 5200) of Chapter 2, consisting of a professional

1 review of all petitions; an interview with the petitioner and,  
2 whenever possible, the person alleged, as a result of a mental health  
3 disorder, to be a danger to others, or to themselves, or to be gravely  
4 disabled, to assess the problem and explain the petition; when  
5 indicated, efforts to persuade the person to receive, on a voluntary  
6 basis, comprehensive evaluation, crisis intervention, referral, and  
7 other services specified in this part.

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

12 (h) (1) For purposes of Article 1 (commencing with Section  
13 5150), Article 2 (commencing with Section 5200), Article 3  
14 (commencing with Section 5225), and Article 4 (commencing with  
15 Section 5250) of Chapter 2, and for purposes of Chapter 3  
16 (commencing with Section 5350), “gravely disabled” means any  
17 of the following, as applicable:

18 (A) A condition in which a person, as a result of a mental health  
19 disorder, a severe substance use disorder, or a co-occurring mental  
20 health disorder and a severe substance use disorder, is unable to  
21 provide for their basic personal needs for food, clothing, shelter,  
22 personal safety, or necessary medical care.

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

26 (i) The complaint, indictment, or information pending against  
27 the person at the time of commitment charges a felony involving  
28 death, great bodily harm, or a serious threat to the physical  
29 well-being of another person.

30 (ii) There has been a finding of probable cause on a complaint  
31 pursuant to paragraph (2) of subdivision (a) of Section 1368.1 of  
32 the Penal Code, a preliminary examination pursuant to Section  
33 859b of the Penal Code, or a grand jury indictment, and the  
34 complaint, indictment, or information has not been dismissed.

35 (iii) As a result of a mental health disorder, the person is unable  
36 to understand the nature and purpose of the proceedings taken  
37 against them and to assist counsel in the conduct of their defense  
38 in a rational manner.

39 (iv) The person represents a substantial danger of physical harm  
40 to others by reason of a mental disease, defect, or disorder.

(2) For purposes of *Article 2 (commencing with Section 5200)*, *Article 3 (commencing with Section ~~5225~~ 5225)*, and *Article 4 (commencing with Section ~~5250~~ 5250)* of Chapter 2, and for purposes of Chapter 3 (commencing with Section 5350), “gravely disabled” includes a condition in which a person, as a result of impairment by chronic alcoholism, is unable to provide for their basic personal needs for food, clothing, shelter, personal safety, or necessary medical care.

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

(4) A county, by adoption of a resolution of its governing body, may elect to defer implementation of the changes made to this section by Senate Bill 43 of the 2023–24 Regular Session of the Legislature until January 1, 2026.

(i) “Peace officer” means a duly sworn peace officer as that term is defined in Chapter 4.5 (commencing with Section 830) of Title 3 of Part 2 of the Penal Code who has completed the basic training course established by the Commission on Peace Officer Standards and Training, or any parole officer or probation officer specified in Section 830.5 of the Penal Code when acting in relation to cases for which the officer has a legally mandated responsibility.

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

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

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

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

(n) (1) “Designated facility,” “facility designated by the county for evaluation and treatment,” or “facility designated by the county to provide intensive treatment” means a facility that meets designation requirements duly established by the State Department of Health Care Services in accordance with Section 5404, including, but not limited to, the following:



1 (A) Psychiatric health facilities licensed by the State Department  
2 of Health Care Services.

3 (B) Psychiatric residential treatment facilities licensed by the  
4 State Department of Health Care Services.

5 (C) Mental health rehabilitation centers licensed by the State  
6 Department of Health Care Services.

7 (D) Provider sites certified by the State Department of Health  
8 Care Services or a mental health plan to provide crisis stabilization.

9 (E) General acute care hospitals licensed by the State  
10 Department of Public Health.

11 (F) Acute psychiatric hospitals licensed by the State Department  
12 of Public Health.

13 (G) Chemical dependency recovery hospitals licensed by the  
14 State Department of Public Health.

15 (H) Hospitals operated by the United States Department of  
16 Veterans Affairs.

17 (2) (A) A county may designate a facility for the purpose of  
18 providing one or more of the following services:

19 (i) Providing evaluation and treatment pursuant to Article 1  
20 (commencing with Section 5150) of Chapter 2.

21 (ii) Providing intensive treatment pursuant to Article 4  
22 (commencing with Section 5250) of Chapter 2.

23 (iii) Providing additional intensive treatment pursuant to Article  
24 4.5 (commencing with Section 5260) of Chapter 2.

25 (iv) Providing additional intensive treatment pursuant to Article  
26 4.7 (commencing with Section 5270.10) of Chapter 2.

27 (v) Providing postcertification treatment pursuant to Article 6  
28 (commencing with Section 5300) of Chapter 2.

29 (B) A county may designate a facility, as is appropriate and  
30 based on capability, for the purpose of providing one or more types  
31 of treatment listed in subparagraph (A) of paragraph (3) of  
32 subdivision (n) without designating the facility to provide all  
33 treatments.

34 (3) Notwithstanding Chapter 3.5 (commencing with Section  
35 11340) of Part 1 of Division 3 of Title 2 of the Government Code,  
36 the State Department of Health Care Services may implement,  
37 interpret, or make specific this subdivision, in whole or in part, by  
38 means of plan or county letters, information notices, plan or  
39 provider bulletins, or other similar instructions, until the time  
40 regulations are adopted no later than December 31, 2027.

(o) “Severe substance use disorder” means a diagnosed substance-related disorder that meets the diagnostic criteria of “severe” as defined in the most current version of the Diagnostic and Statistical Manual of Mental Disorders.

(p) “Personal safety” means the ability of one to survive safely in the community without involuntary detention or treatment pursuant to this part.

(q) “Necessary medical care” means care that a licensed health care practitioner, while operating within the scope of their practice, determines to be necessary to prevent serious deterioration of an existing physical medical condition that, if left untreated, is likely to result in serious bodily injury as defined in Section 15610.67.

(r) “*Mental health disorder*” means a condition outlined in the current edition of the *Diagnostic and Statistical Manual of Mental Disorders*.

SEC. 2. Section 5009.5 is added to the *Welfare and Institutions Code*, to read:

5009.5. The State Department of Health Care Services shall establish and implement training guidelines for counties regarding the electronic submission of evaluation orders submitted pursuant to this part.

SEC. 3. Section 5977 of the *Welfare and Institutions Code* is amended to read:

5977. (a) (1) The court shall promptly review the petition to determine if the petitioner has made a prima facie showing that the respondent is, or may be, a person described in Section 5972.

(2) If the court finds that the petitioner has not made a prima facie showing that the respondent is, or may be, a person described in Section 5972, the court may dismiss the case and, if the court does so, it shall order that the dismissal is without prejudice, unless Section 5975.1 applies. Nothing other than Section 5975.1 prevents a petitioner whose petition was dismissed without prejudice from refiling the petition with amended information.

(3) If the court finds that the petitioner has made a prima facie showing that the respondent is, or may be, a person described in Section 5972, the court shall do one of the following:

(A) If the petitioner is the director of a county behavioral health agency, or their designee, the court shall do the following:

(i) Set the matter for an initial appearance on the petition within 14 court days.

1 (ii) Appoint a qualified legal services project, as defined in  
2 Sections 6213 to 6214.5, inclusive, of the Business and Professions  
3 Code, to represent the respondent. If no legal services project has  
4 agreed to accept these appointments, a public defender or other  
5 counsel working in that capacity shall be appointed to represent  
6 the respondent.

7 (iii) Determine whether the petition includes all of the following  
8 information and, if it does not, order the county behavioral health  
9 agency to submit a written report with the court within 14 court  
10 days that includes all of the following:

11 (I) A determination as to whether the respondent meets, or is  
12 likely to meet, the criteria for the CARE process.

13 (II) The outcome of efforts made to voluntarily engage the  
14 respondent prior to the filing of the petition.

15 (III) Conclusions and recommendations about the respondent's  
16 ability to voluntarily engage in services.

17 (iv) Order the county behavioral health agency to provide notice  
18 to the respondent, the appointed counsel, *the nonsubstituted*  
19 *petitioner*, and the county behavioral health agency in the county  
20 where the respondent resides, if different from the county where  
21 the CARE process has commenced.

22 (B) If the petitioner is a person other than the director of a  
23 county behavioral health agency, or their designee, the court shall  
24 order a county agency, or their designee, as determined by the  
25 court, to investigate, as necessary, file a written report with the  
26 court as soon as practicable, but within 30 court days, and provide  
27 notice to the respondent and petitioner that a report has been  
28 ordered. Parties shall complete the investigation with appropriate  
29 urgency. The written report shall include all of the following:

30 (i) A determination as to whether the respondent meets, or is  
31 likely to meet, the criteria for the CARE process.

32 (ii) The outcome of efforts made to voluntarily engage the  
33 respondent during the report period.

34 (iii) Conclusions and recommendations about the respondent's  
35 ability to voluntarily engage in services.

36 (iv) The information, including protected health information,  
37 necessary to support the determinations, conclusions, and  
38 recommendations in the report.

39 (4) If, upon a request by the county agency ordered to investigate  
40 and file a report under subparagraph (B) of paragraph (3), the court

1 finds that the county agency is making progress to engage the  
2 respondent, the court may, in its discretion, grant the county agency  
3 no more than 30 additional days to continue to work with, engage,  
4 and enroll the individual in voluntary treatment and services. The  
5 county agency shall provide notice to the respondent and petitioner  
6 that an extension for filing a report has been granted.

7 (5) Upon receipt of the report described in subparagraph (B) of  
8 paragraph (3), the court shall, within five days, take one of the  
9 following actions:

10 (A) If the court determines that voluntary engagement with the  
11 respondent is effective, and that the individual has enrolled or is  
12 likely to enroll in voluntary behavioral health treatment, the court  
13 shall dismiss the matter.

14 (B) If the court determines, based on the county agency's report,  
15 that the evidence does not support a prima facie showing that the  
16 respondent is, or may be, a person described in Section 5972, the  
17 court shall dismiss the matter. This section shall not prevent a  
18 county behavioral health agency from continuing to voluntarily  
19 engage with a person not described in Section 5972 but who is in  
20 need of services and supports.

21 (C) If the court determines, based on the county agency's report,  
22 that the evidence does support a prima facie showing that the  
23 respondent is, or may be, a person described in Section 5972, and  
24 engagement with the county agency was not effective, the court  
25 shall do all of the following:

26 (i) Set an initial appearance on the petition within 14 court days.

27 (ii) Appoint a qualified legal services project, as defined in  
28 Sections 6213 to 6214.5, inclusive, of the Business and Professions  
29 Code or, if no legal services project has agreed to accept these  
30 appointments, a public defender or other counsel working in that  
31 capacity to represent the respondent.

32 (iii) Order the county agency to provide notice of the initial  
33 appearance to the petitioner, the respondent, the appointed counsel,  
34 the county behavioral health agency in the county where the  
35 respondent resides, and, if different, the county where the CARE  
36 court proceedings have commenced.

37 (b) At the initial appearance on the petition, all of the following  
38 shall apply:

39 (1) The court shall permit the respondent to substitute their own  
40 counsel.

(2) Petitioner shall be present. If the petitioner is not present, the matter may be dismissed.

(3) Respondent may waive personal appearance and appear through counsel. If the respondent does not waive personal appearance and does not appear at the hearing, and the court makes a finding in open court that reasonable attempts to elicit the attendance of the respondent have failed, the court may conduct the hearing in the respondent's absence if the court makes a finding in open court that conducting the hearing without the participation or presence of the respondent would be in the respondent's best interest.

(4) A representative from the county behavioral health agency shall be present.

(5) If the respondent asserts that they are enrolled in a federally recognized Indian tribe or are receiving services from an Indian health care provider, a tribal court, or a tribal organization, a representative from the program, the tribe, or the tribal court shall be allowed to be present, subject to the consent of the respondent. The tribal representative shall be entitled to notice by the county of the initial appearance.

(6) (A) ~~If the petitioner is a person other than~~ *The court may allow the original petitioner to maintain their role as petitioner, unless the respondent, the court, the supporter, or the county behavioral health director objects. If the respondent objects, stating while present in court that they prefer the director of a county behavioral health agency, or their designee, be substituted in as petitioner, the court shall issue an order relieving the original petitioner and appointing the director of the county behavioral health agency or their designee as the successor petitioner.*

~~(B) If the original petitioner is described in subdivision (a) or (b) of Section 5974, all of the following apply:~~

~~(B) All of the following apply, regardless of the substitution status of the petitioner:~~

(i) The original petitioner shall have the right to be present and make a statement at the initial hearing on the merits of the petition held pursuant to paragraph (7).

(ii) (I) Until July 1, 2025, the court may, in its discretion, assign ongoing rights of notice to the original petitioner.

(II) Commencing July 1, 2025, unless the court determines, either upon its own motion or upon the motion of the respondent,

1 at any point in the proceedings, that it likely would be detrimental  
2 to the treatment or well-being of the respondent, the court shall  
3 provide ongoing notice of proceedings to the original petitioner  
4 throughout the CARE proceedings, including notice of when a  
5 continuance is granted or when a case is dismissed. If a continuance  
6 is granted, the notice shall provide a general reason for the  
7 continuance, including the absence of the respondent or one of the  
8 grounds pursuant to Rule 3.1332 of the California Rules of Court.  
9 If a case is dismissed, the notice shall specify the statutory basis  
10 for the dismissal. A notice pursuant to this clause shall not disclose  
11 any patient information that is protected under the federal Health  
12 Insurance Portability and Accountability Act of 1996 (Public Law  
13 104-191), the Confidentiality of Medical Information Act (Part  
14 2.6 (commencing with Section 56) of Division 1 of the Civil Code),  
15 or this act, without the respondent's consent.

16 (iii) To the extent that the respondent consents, the court may  
17 allow the original petitioner to participate in the respondent's  
18 CARE proceedings.

19 (iv) The original petitioner may file a new petition with the  
20 court, pursuant to Section 5974, if the matter is dismissed and there  
21 is a change in circumstances.

22 ~~(C) If the original petitioner is not described in subdivision (a)~~  
23 ~~or (b) of Section 5974, the court shall not assign ongoing rights to~~  
24 ~~the original petitioner, other than the right to be present and make~~  
25 ~~a statement at the hearing on the merits of the petition held pursuant~~  
26 ~~to paragraph (7).~~

27 (7) (A) The court shall set a hearing on the merits of the petition  
28 within 10 days, at which time the court shall determine whether,  
29 by clear and convincing evidence, the respondent meets the CARE  
30 criteria in Section 5972. In making this determination, the court  
31 shall consider all evidence properly before it, including any report  
32 from the county behavioral health agency ordered pursuant to  
33 paragraph (3) of subdivision (a) and any additional admissible  
34 evidence presented by the parties, including the petition submitted  
35 and any statement given by the original petitioner. A licensed  
36 behavioral health professional may testify as an expert concerning  
37 whether the respondent meets the CARE criteria in Section 5972  
38 provided that the court finds that the professional has special  
39 knowledge, skill, experience, training, or education sufficient to  
40 qualify as an expert under Section 720 of the Evidence Code.

1 (B) The hearing on the merits of the petition may be conducted  
2 concurrently with the initial appearance upon stipulation of the  
3 *petitioner or* successor petitioner and the respondent, subject to  
4 the approval by the court.

5 (c) (1) If, at the hearing on the merits of the petition, the court  
6 finds there is not clear and convincing evidence that the respondent  
7 meets the CARE criteria in Section 5972, the court shall dismiss  
8 the case without prejudice, unless the court makes a finding, in  
9 open court, that the original petitioner's filing was not in good  
10 faith, in which case the dismissal shall be with prejudice.

11 (2) If, at the hearing on the merits of the petition, the court finds  
12 by clear and convincing evidence that the respondent meets the  
13 CARE criteria in Section 5972, the court shall order the county  
14 behavioral health agency to work with the respondent, the  
15 respondent's counsel, *the nonsubstituted petitioner*, and the  
16 supporter to engage the respondent in behavioral health treatment  
17 and attempt to enter into a CARE agreement. The court shall set  
18 a case management hearing within 14 days.

19 (3) If the respondent is enrolled in a federally recognized Indian  
20 tribe, the respondent shall provide notice of the case management  
21 hearing to the tribe, subject to the consent of the respondent.

22 (d) The following shall apply to any written report submitted  
23 by a county behavioral health agency to the court pursuant to this  
24 section:

25 (1) The report is confidential and not subject to disclosure or  
26 inspection under the California Public Records Act (Division 10  
27 (commencing with Section 7920.000) of Title 1 of the Government  
28 Code).

29 (2) The report is inadmissible in any subsequent legal  
30 proceeding, except upon motion of the respondent in that  
31 subsequent legal proceeding.

32 (3) The report shall be confidential pursuant to subdivision (e)  
33 of Section 5976.5.

34 (4) This subdivision shall not affect the applicability of  
35 paragraph (2) of subdivision (c) of Section 5977.1, make admissible  
36 any evidence that is not otherwise admissible, or permit a witness  
37 to base an opinion on any matter that is not a proper basis for such  
38 an opinion. The admission or exclusion of evidence shall be  
39 pursuant to the rules of evidence established by the Evidence Code,

1 including, but not limited to, Section 352 of the Evidence Code,  
2 and by judicial decision.

3 *SEC. 4. Section 5977.1 of the Welfare and Institutions Code*  
4 *is amended to read:*

5 5977.1. (a) (1) At the case management hearing, the court  
6 shall hear evidence as to whether the parties have entered, or are  
7 likely to enter, into a CARE agreement.

8 (2) If the court finds that the parties have entered, or are likely  
9 to enter, into a CARE agreement, the court shall do one of the  
10 following:

11 (A) Approve the terms of the CARE agreement or modify the  
12 terms of the CARE agreement and approve the agreement as  
13 modified by the court, and continue the matter and set a progress  
14 hearing for 60 days.

15 (B) Continue the matter for 14 days to allow the parties  
16 additional time to enter into a CARE agreement, upon stipulation  
17 of the parties.

18 (3) Nothing in this subdivision shall prohibit the parties from  
19 agreeing to, and the court from approving, amendments to the  
20 CARE agreement.

21 (b) If the court finds that the parties have not entered into a  
22 CARE agreement, and are not likely to enter into a CARE  
23 agreement, the court shall order the county behavioral health  
24 agency, through a licensed behavioral health professional, to  
25 conduct a clinical evaluation of the respondent, unless there is an  
26 existing clinical evaluation of the respondent completed within  
27 the last 30 days and the parties stipulate to the use of that  
28 evaluation. The evaluation shall address, at a minimum, the  
29 following:

30 (1) A clinical diagnosis of the respondent.

31 (2) Whether the respondent has the legal capacity to give  
32 informed consent regarding psychotropic medication.

33 (3) Any other information as ordered by the court or that the  
34 licensed behavioral health professional conducting the evaluation  
35 determines would help the court make future informed decisions  
36 about the appropriate care and services the respondent should  
37 receive.

38 (4) An analysis of recommended services, programs, housing,  
39 medications, and interventions that support the recovery and  
40 stability of the respondent.



1 (c) (1) The court shall set a clinical evaluation hearing to review  
2 the evaluation within 21 days. The court shall order the county to  
3 file the evaluation with the court and provide the evaluation to the  
4 respondent's counsel no later than five days prior to the scheduled  
5 clinical evaluation hearing. The clinical evaluation hearing may  
6 be continued for a maximum of 14 days upon stipulation of the  
7 respondent and the county behavioral health agency, unless there  
8 is good cause for a longer extension. *The evaluation may be*  
9 *provided to the nonsubstituted petitioner if the respondent does*  
10 *not object.*

11 (2) At the clinical evaluation review hearing, the court shall  
12 review the evaluation and other evidence from the county  
13 behavioral health agency and the respondent. The county behavioral  
14 health agency and the respondent may present evidence and call  
15 witnesses, including the person who conducted the evaluation.  
16 Only relevant and admissible evidence that fully complies with  
17 the rules of evidence may be considered by the court.

18 (3) At the conclusion of the hearing, the court shall determine  
19 whether the respondent, by clear and convincing evidence, meets  
20 the CARE criteria in Section 5972 and make orders as follows:

21 (A) If the court finds that the respondent meets the CARE  
22 criteria, the court shall order the county behavioral health agency,  
23 the respondent, and the respondent's counsel and supporter to  
24 jointly develop a CARE plan within 14 days.

25 (B) If the court does not find that clear and convincing evidence  
26 establishes that the respondent meets the CARE criteria, the court  
27 shall dismiss the petition.

28 (4) If the respondent is a self-identified American Indian or  
29 Alaska Native individual, as defined in Sections 1603(13),  
30 1603(28), and 1679(a) of Title 25 of the United States Code, has  
31 been determined eligible as an Indian under Section 136.12 of  
32 Title 42 of the Code of Federal Regulations, or is currently  
33 receiving services from an Indian health care provider or tribal  
34 court, the county behavioral health agency shall use its best efforts  
35 to meaningfully consult with and incorporate the Indian health  
36 care provider or tribal court available to the respondent to develop  
37 the CARE plan.

38 (5) The evaluation and all reports, documents, and filings  
39 submitted to the court shall be confidential.

(6) The date for the hearing to review and consider approval of the proposed CARE plan shall be set not more than 14 days from the date of the order to develop a CARE plan, unless the court finds good cause for an extension. The party requesting an extension of time for the CARE plan review hearing shall provide notice to the opposing party and their counsel party, their counsel, and the nonsubstituted petitioner of the request for extension of time, and the court's order if the request is granted.

(d) (1) At the CARE plan review hearing, the parties shall present their plan or plans to the court. The county behavioral health agency or the respondent, or both, may present a proposed CARE plan. *The nonsubstituted petitioner may also make suggestions for the CARE plan, but shall not propose a third CARE plan for consideration.*

(2) After consideration of the plans proposed by the parties, parties and the recommendations by the nonsubstituted petitioner, the court shall adopt the elements of a CARE plan that support the recovery and stability of the respondent. The court may issue any orders necessary to support the respondent in accessing appropriate services and supports, including prioritization for those services and supports, subject to applicable laws and available funding pursuant to Section 5982. These orders shall constitute the CARE plan and may be amended.

(3) A court may order medication if it finds, upon review of the court-ordered evaluation and hearing from the parties, that, by clear and convincing evidence, the respondent lacks the capacity to give informed consent to the administration of medically necessary stabilization medication. To the extent the court orders medically necessary stabilization medication, the medication shall not be forcibly administered and the respondent's failure to comply with a medication order shall not result in a penalty, including, but not limited to, contempt or termination of the CARE plan pursuant to Section 5979.

(4) If the proposed CARE plan includes services and supports, such as housing, provided directly or indirectly through another local governmental entity, that local entity may agree to provide the service or support, or the court may consider a motion by either of the parties to add the local entity as a party to the CARE proceeding. If the local entity agrees to provide the service or support, it may request to be added as a party by the court.

(5) If, after presentation of the CARE plan or plans, the court determines that additional information is needed, including from a licensed behavioral health professional, the court shall order a supplemental report to be filed by the county behavioral health agency for which the court may grant a continuance of no more than 14 days, unless there is good cause for a longer extension. *The report may be provided to the nonsubstituted petitioner if the respondent does not object.*

(6) If there is no CARE plan because the parties have not had sufficient time to complete it, the court may grant a continuance of no more than 14 days, unless there is good cause for a longer extension.

(7) This subdivision does not prohibit the parties from agreeing to, and the court from approving, amendments to the CARE plan. The court may also approve amendments to the CARE plan upon the finding that those amendments are necessary to support the respondent in accessing appropriate services and supports, following a hearing on the issue.

(e) The issuance of an order approving a CARE plan pursuant to paragraph (2) of subdivision (d) begins the CARE process timeline, which shall not exceed one year.

*SEC. 5. Section 5977.2 of the Welfare and Institutions Code is amended to read:*

5977.2. (a) (1) At intervals set by the court and not less frequently than every 60 days after the court orders the CARE plan, the court shall hold a status review hearing. The county behavioral health agency shall file with the court and serve on the respondent, ~~and~~ the respondent's counsel and supporter, *and the nonsubstituted petitioner* a report no fewer than five court days prior to the review hearing with the following information:

(A) The progress that the respondent has made on the CARE plan.

(B) What services and supports in the CARE plan were provided, and what services and supports were not provided.

(C) Any issues the respondent expressed or exhibited in adhering to the CARE plan.

(D) Recommendations for changes to the services and supports to make the CARE plan more successful.

(2) *The nonsubstituted petitioner and the* respondent shall be permitted to respond to the report submitted by the county

behavioral health agency and to the county behavioral health agency's testimony. The respondent shall be permitted to introduce their own information and recommendations.

(3) Subject to applicable law, intermittent lapses or setbacks described in this section of the report shall not impact access to services, treatment, or housing.

(4) *The report may be provided to the nonsubstituted petitioner where the respondent does not object.*

(b) The *nonsubstituted petitioner*, the county behavioral health agency, or the respondent may request, or the court upon its own motion may set, a hearing to occur at any time during the CARE process to address a change of circumstances.

SEC. 6. *Section 5977.3 of the Welfare and Institutions Code is amended to read:*

5977.3. (a) (1) In the 11th month of the process timeline, the court shall hold a one-year status hearing. Not fewer than five court days prior to the one-year status hearing, the county behavioral health agency shall file a report with the court and shall serve the report on the respondent and the respondent's counsel and supporter. *The report may be provided to the nonsubstituted petitioner where the respondent does not object.* The report shall include the following information:

(A) The progress that the respondent has made on the CARE plan, including a final assessment of the respondent's stability.

(B) What services and supports in the CARE plan were provided, and what services and supports were not provided, over the life of the program.

(C) Any issues the respondent expressed or exhibited in adhering to the CARE plan.

(D) Recommendations for next steps, including what ongoing and additional services would benefit the respondent that the county behavioral health agency can facilitate or provide.

(2) At an evidentiary hearing, the *nonsubstituted petitioner and the respondent* shall be permitted to respond to the report submitted by the county behavioral health agency and to the county behavioral health agency's testimony. ~~Respondent~~ *The nonsubstituted petitioner and respondent* shall be permitted to introduce their own information and recommendations. The *nonsubstituted petitioner and the respondent* shall have the right at the hearing to call witnesses and to present evidence as to

1 whether the respondent agrees with the report. The respondent  
2 may request either to be graduated from the program or to remain  
3 in the program.

4 (3) The court shall issue an order as follows:

5 (A) If the respondent elects to be graduated from the program,  
6 the court shall order the county behavioral health ~~agency~~ *agency*,  
7 *the nonsubstituted petitioner*, and the respondent to work jointly  
8 on a voluntary graduation plan. The court shall schedule a hearing  
9 in the 12th month after adoption of the CARE plan for presentation  
10 of the graduation plan. The court shall review the graduation plan  
11 and recite the terms in open court. The graduation plan shall not  
12 place additional requirements on local governmental entities and  
13 is not enforceable by the court, except that the graduation plan  
14 may, at the respondent's election, include a psychiatric advance  
15 directive, which shall have the force of law. Upon completion of  
16 the hearing, the respondent shall be officially graduated from the  
17 program.

18 (B) If the respondent elects to remain in the CARE process,  
19 respondent may request any amount of time, up to and including  
20 one additional year. The court may permit the ongoing voluntary  
21 participation of the respondent if the court finds both of the  
22 following:

23 (i) The respondent did not successfully complete the CARE  
24 plan.

25 (ii) The respondent would benefit from continuation of the  
26 CARE plan.

27 (C) The court shall issue an order permitting the respondent to  
28 continue in the CARE plan or denying respondent's request to  
29 remain in the CARE plan, and state its reasons in open court.

30 (b) The respondent may be involuntarily reappointed to the  
31 program only if the court finds, by clear and convincing evidence,  
32 that all of the following conditions apply:

33 (1) The respondent did not successfully complete the CARE  
34 process.

35 (2) All services and supports required through the CARE process  
36 were provided to the respondent.

37 (3) The respondent would benefit from continuation in the  
38 CARE process.

39 (4) The respondent currently meets the requirements in Section  
40 5972.

1 (c) A respondent may only be reappointed to the CARE process  
2 once, for up to one additional year.

3 *SEC. 7. Section 5977.4 of the Welfare and Institutions Code*  
4 *is amended to read:*

5 5977.4. (a) In all CARE Act proceedings, the judicial officer  
6 shall control the proceedings during the hearings with a view to  
7 the expeditious and effective ascertainment of the jurisdictional  
8 facts and the ascertainment of all information relative to the present  
9 condition and future welfare of the respondent. Except when there  
10 is a contested issue of fact or law, the proceedings shall be  
11 conducted in an informal nonadversarial atmosphere with a view  
12 to obtaining the maximum cooperation of the respondent, all  
13 persons interested in the respondent's welfare, and all other parties,  
14 with any provisions that the court may make for the disposition  
15 and care of the respondent. The court and relevant local public  
16 agencies shall cooperate to develop a comprehensive set of  
17 objectives established to improve performance of the CARE system  
18 in a vigorous and ongoing manner. The court is authorized to  
19 coordinate and participate in meetings to improve system  
20 performance. All evaluations and reports, documents, and filings  
21 submitted to the court pursuant to CARE Act proceedings shall  
22 be confidential.

23 (b) The hearings described in this chapter shall occur in person  
24 unless the court, in its discretion, allows a party or witness to  
25 appear remotely through the use of remote technology. The  
26 respondent shall have the right to be in person for all hearings.

27 (c) Consistent with its constitutional rulemaking authority, the  
28 Judicial Council shall adopt rules to implement the policies and  
29 provisions in this section and in Sections 5977 to 5977.4, inclusive,  
30 to promote statewide consistency, including, but not limited to,  
31 what is included in the petition form packet, communications  
32 between the CARE Act court and the juvenile court, if applicable,  
33 the role of the judiciary to improve system performance, and the  
34 process by which counsel will be appointed.

35 (d) (1) Consistent with paragraph (9) of subdivision (b) of  
36 Section 56.10 of the Civil Code, the county behavioral health  
37 agency shall include in any report evaluation, or other document  
38 filed with the court, the information, including protected health  
39 information, necessary to support the determinations, conclusions,  
40 and recommendations in the filing. The county behavioral health

1 agency shall not, unless ordered to do so by the court, submit to  
2 the court original or photocopied records underlying the  
3 information in a report evaluation or other document required or  
4 ordered under this subdivision. The county behavioral health  
5 agency shall serve an unredacted copy of any report evaluation,  
6 or other document filed with the court on the respondent and the  
7 respondent's counsel and, with the consent of the respondent, on  
8 the supporter *and the nonsubstituted petitioner* in a manner  
9 authorized by law. Neither a county nor an employee or agent  
10 thereof shall be held civilly or criminally liable for any disclosure  
11 authorized or required by this paragraph.

12 (2) (A) Consistent with paragraph (1) of subdivision (c) of  
13 Section 56.10 of the Civil Code, a provider of health care, as  
14 defined in Section 56.05 of the Civil Code, or a covered entity, as  
15 defined in Section 160.103 of Title 45 of the Code of Federal  
16 Regulations, may disclose to the county behavioral health agency  
17 any information, including protected health information, and mental  
18 health records excluding psychotherapy notes, in its possession  
19 about the respondent that is relevant to the county behavioral health  
20 agency's provision, coordination, or management of services and  
21 supports under this part, including, but not limited to, the  
22 preparation of any required investigations, evaluations, or reports.  
23 Such a disclosure is a disclosure for treatment purposes, which  
24 may be made only to the extent permitted under Section 164.506  
25 of Title 45 of the Code of Federal Regulations. The information  
26 disclosed may include substance use disorder patient records only  
27 to the extent permitted by Part 2 (commencing with Section 2.1)  
28 of Title 42 of the Code of Federal Regulations.

29 (B) Consistent with paragraph (9) of subdivision (b) of Section  
30 56.10 of the Civil Code, a provider of health care, as defined in  
31 Section 56.05 of the Civil Code, or a covered entity, as defined in  
32 Section 160.103 of Title 45 of the Code of Federal Regulations,  
33 that filed a CARE Act petition or executed an affidavit included  
34 with a CARE Act petition pursuant to paragraph (1) of subdivision  
35 (d) of Section 5975 shall provide to the county behavioral health  
36 agency any information, including protected health information,  
37 and mental health records excluding psychotherapy notes, in its  
38 possession about the respondent that may be relevant in connection  
39 with an investigation, evaluation, or other report or hearing under  
40 this part, or with the provision of services and supports under this

1 part. The provision of information under this paragraph is a  
2 disclosure required by law, which may be made only to the extent  
3 permitted under subdivision (a) of Section 164.512 of Title 45 of  
4 the Code of Federal Regulations. The information disclosed shall  
5 include substance use disorder patient records only to the extent  
6 permitted by Part 2 (commencing with Section 2.1) of Title 42 of  
7 the Code of Federal Regulations.

8 (C) The county behavioral health agency may apply to the court  
9 ex parte for an order requiring any provider of health care, as  
10 defined in Section 56.05 of the Civil Code, or any covered entity,  
11 as defined in Section 160.103 of Title 45 of the Code of Federal  
12 Regulations, to provide to the county behavioral health agency, to  
13 the court, or both, any information, including, but not limited to,  
14 protected health information, and mental health records excluding  
15 psychotherapy notes, in its possession about the respondent that  
16 may be relevant in connection with an investigation, evaluation,  
17 or other report or hearing under this part, or with the provision of  
18 services and supports under this part. The provision of information  
19 under this paragraph is a disclosure required by law, which may  
20 be made only to the extent permitted under Section 164.512 of  
21 Title 45 of the Code of Federal Regulations. The information  
22 ordered to be disclosed may include substance use disorder patient  
23 records only to the extent permitted by Part 2 (commencing with  
24 Section 2.1) of Title 42 of the Code of Federal Regulations.

25 (D) A provider of health care or covered entity shall not be held  
26 civilly or criminally liable for any disclosure authorized or required  
27 by this section.

28 (E) The county behavioral health agency shall notify the  
29 respondent of a disclosure under this paragraph as follows:

- 30 (i) By mail at the respondent's last known address, if any.  
31 (ii) To the respondent's counsel.  
32 (iii) By including a copy of the notification under clause (i) or  
33 (ii) with the next notice of hearing served upon the respondent, if  
34 any.

35 (F) All information, including the facts and records, or summary  
36 thereof, shared under this subdivision shall further be disclosed to  
37 the respondent and the respondent's counsel, and with the consent  
38 of the respondent, to the ~~supporter~~. *supporter and the*  
39 *nonsubstituted petitioner.*



1 (3) (A) Except as expressly provided, further disclosure or  
2 redisclosure of information is not authorized by this subdivision.

3 (B) Information disclosed to a county behavioral health agency  
4 by a provider of health care, as defined in Section 56.05 of the  
5 Civil Code, or a covered entity, as defined in Section 160.103 of  
6 Title 45 of the Code of Federal Regulations is confidential and not  
7 subject to disclosure or inspection under the California Public  
8 Records Act (Division 10 (commencing with Section 7920.000)  
9 of Title 1 of the Government Code).

10 (C) Disclosure of information under this part shall not be deemed  
11 to in any way alter the duties or responsibilities of a county  
12 behavioral health agency, of a provider of health care, as defined  
13 in Section 56.05 of the Civil Code, or of a covered entity, as  
14 defined in Section 160.103 of Title 45 of the Code of Federal  
15 Regulations, with respect to the disclosed information under the  
16 Confidentiality of Medical Information Act (Part 2.6 (commencing  
17 with Section 56) of Division 1 of the Civil Code), or the federal  
18 Health Insurance Portability and Accountability Act of 1996  
19 (Public Law 104-191).

20 *SEC. 8. Section 5982 of the Welfare and Institutions Code is*  
21 *amended to read:*

22 5982. (a) The CARE plan may include only the following:

23 (1) Behavioral health services funded through the 1991 and  
24 2011 Realignment, Medi-Cal behavioral health, health care plans  
25 and insurers, and services supported by the Mental Health Services  
26 Act pursuant to Part 3 (commencing with Section 5800).

27 (2) Medically necessary stabilization medications, to the extent  
28 not described in paragraph (1).

29 (3) Housing resources funded through the No Place Like Home  
30 Program (Part 3.9 (commencing with Section 5849.1) of Division  
31 5 of the Welfare and Institutions Code); California Housing  
32 Accelerator (Chapter 6.6 (commencing with Section 50672) of  
33 Part 2 of Division 31 of the Health and Safety Code); the  
34 Multifamily Housing Program (Chapter 6.7 (commencing with  
35 Section 50675) of Part 2 of Division 31 of the Health and Safety  
36 Code); the Homeless Housing, Assistance, and Prevention Program  
37 (Chapter 6 (commencing with Section 50216) of Part 1 of Division  
38 31 of the Health and Safety Code); the Encampment Resolution  
39 Funding Program (Chapter 7 (commencing with Section 50250)  
40 of Part 1 of Division 31 of the Health and Safety Code); the Project

1 Roomkey and Rehousing Program pursuant to Provision 22 of  
2 Item 5180-151-0001 of the Budget Act of 2021 (Ch. 21, Stats.  
3 2021); the Community Care Expansion Program (Chapter 20  
4 (commencing with Section 18999.97) of Part 6 of Division 9 of  
5 the Welfare and Institutions Code); the CalWORKs Housing  
6 Support Program (Article 3.3 (commencing with Section 11330)  
7 of Chapter 2 of Part 3 of Division 9 of the Welfare and Institutions  
8 Code); the CalWORKs Homeless Assistance pursuant to clause  
9 (i) of subparagraph (A) of paragraph (2) of subdivision (f) of  
10 Section 11450 of Article 6 of Chapter 2 of Part 3 of Division 9 of  
11 the Welfare and Institutions Code; the Housing and Disability  
12 Advocacy Program (Chapter 17 (commencing with Section 18999)  
13 of Part 6 of Division 9 of the Welfare and Institutions Code); the  
14 Home Safe Program (Chapter 14 (commencing with Section 15770)  
15 of Part 3 of Division 9 of the Welfare and Institutions Code); the  
16 Bringing Families Home Program (Article 6 (commencing with  
17 Section 16523) of Chapter 5 of Part 4 of Division 9 of the Welfare  
18 and Institutions Code); the Transitional Housing Placement  
19 program for nonminor dependents (Article 4 (commencing with  
20 Section 16522) of Chapter 5 of Part 4 of Division 9 of the Welfare  
21 and Institutions Code); the Transitional Housing Program-Plus  
22 pursuant to subdivision (s) of Section 11400 and paragraph (2) of  
23 subdivision (a) of Section 11403.2 of Article 5 of Chapter 2 of  
24 Part 3 of Division 9 of the Welfare and Institutions Code and  
25 Article 4 (commencing with Section 16522) of Chapter 5 of Part  
26 4 of Division 9 of the Welfare and Institutions Code; the Behavioral  
27 Health Continuum Infrastructure Program (Chapter 1 (commencing  
28 with Section 5960) of Part 7 of Division 5 of the Welfare and  
29 Institutions Code); the Behavioral Health Bridge Housing Program;  
30 HUD-Veterans Affairs Supportive Housing Program (Section  
31 8(o)(19) of the United States Housing Act of 1937 [42 U.S.C.  
32 Section 1437f(o)(19)]); Supportive Services for Veteran Families  
33 (Section 604 of the Veterans' Mental Health and Other Care  
34 Improvements Act of 2008 [38 U.S.C. Sec. 2044]); HUD  
35 Continuum of Care program (Section 103 of the McKinney-Vento  
36 Homeless Assistance Act [42 U.S.C. Sec. 11302]); the Emergency  
37 Solutions Grant (Subtitle B of Title IV of the McKinney-Vento  
38 Homeless Assistance Act [42 U.S.C. Secs. 11371-11378]); HUD  
39 Housing Choice Voucher program (Section 8 of the United States  
40 Housing Act of 1937 [42 U.S.C. Sec. 1437f]); the Emergency

1 Housing Vouchers (Section 3202 of the American Rescue Plan  
2 Act of 2021 [Public Law 117-2]; Section 8(o) of the United States  
3 Housing Act of 1937 [42 U.S.C. Sec. 1437f(o)]); HOME  
4 Investment Partnerships Program (Title II of the Cranston-Gonzalez  
5 National Affordable Housing Act [42 U.S.C. Sec. 12721 et seq.]);  
6 the Community Development Block Grant Program (Title 1 of the  
7 Housing and Community Development Act of 1974 [42 U.S.C.  
8 Sec. 5301 et seq.]); housing supported by the Mental Health  
9 Services Act pursuant to Part 3 (commencing with Section 5800);  
10 community development block grants; and other state and federal  
11 housing resources.

12 (4) Social services funded through Supplemental Security  
13 Income/State Supplementary Payment (SSI/SSP), Cash Assistance  
14 Program for Immigrants (CAPI), CalWORKs, California Food  
15 Assistance Program, In-Home Supportive Services program, and  
16 CalFresh.

17 (5) Services provided pursuant to Part 5 (commencing with  
18 Section 17000) of Division 9.

19 (6) Upon the consent of the respondent and the entity or  
20 individual financially responsible for the services, additional  
21 services to support the recovery and stability of the respondent.

22 (b) Individuals who are CARE process participants shall be  
23 prioritized for any appropriate bridge housing funded by the  
24 Behavioral Health Bridge Housing program.

25 (c) If the county behavioral health agency elects not to enroll  
26 the respondent into a full service partnership, as defined in Section  
27 3620 of Title 9 of the California Code of Regulations, the court  
28 *or the nonsubstituted petitioner* may request information on the  
29 reasons for this and any barriers to enrollment.

30 (d) All CARE plan services and supports ordered by the court  
31 are subject to available funding and all applicable federal and state  
32 statutes and regulations, contractual provisions, and policy  
33 guidance governing initial and ongoing program eligibility. In  
34 addition to the resources funded through programs listed in  
35 subdivision (a), the State Department of Health Care Services may  
36 identify other adjacent covered Medi-Cal services, including, but  
37 not limited to, enhanced care management and available  
38 community supports, which may be suggested, although not  
39 ordered, by the court, subject to all applicable federal and state  
40 statutes, regulations, contractual provisions, and policy guidance.

(e) This section does not prevent a county or other local governmental entity from recommending their own services that are their own responsibility not listed in subdivision (a) or (c). Any such recommendation is not required by this section and shall be made at the request of the county for the purposes of Section 6 of Article XIII B, and Sections 6 and 36 of Article XIII of the California Constitution.

(f) (1) For respondents who are Medi-Cal beneficiaries, the county in which the respondent resides is the county of responsibility as defined in Section 1810.228 of Title 9 of the California Code of Regulations.

(2) If a proceeding commences in a county where the respondent is found or is facing criminal or civil proceedings that is different than the county in which the respondent resides, the county in which the respondent is found or is facing criminal or civil proceedings shall not delay proceedings under this part and is the responsible county behavioral health agency for providing or coordinating all components of the CARE agreement or CARE plan.

(3) The county in which the respondent resides, as defined in paragraph (1), shall be responsible for the costs of providing all CARE agreement or CARE plan behavioral health services, as defined in paragraph (1) of subdivision (a).

(4) In the event of a dispute over responsibility for any costs of providing components of the CARE agreement or CARE plan, the impacted counties shall resolve the dispute in accordance with the arbitration process established in Section 1850.405 of Title 9 of the California Code of Regulations for county mental health plans, including for respondents who are not Medi-Cal beneficiaries, and pursuant to any related guidance issued pursuant to subdivision (b) of Section 5984.

*SEC. 9. Section 5983 of the Welfare and Institutions Code is amended to read:*

5983. (a) The California Health and Human Services Agency, or a designated department within the agency, shall do both of the following:

(1) Engage an independent, research-based entity, as described in Section 5986, to advise on the development of data-driven process and outcome measures to guide the planning, collaboration, reporting, and evaluation of the CARE Act pursuant to this part.

(2) Convene a working group to provide coordination and on-going engagement with, and support collaboration among, relevant state and local partners and other stakeholders throughout the phases of county implementation to support the successful implementation of the CARE Act. The working group shall meet no more than quarterly. The working group shall meet during the implementation and shall end no later than December 31, 2026.

(b) The department shall provide training and technical assistance to county behavioral health agencies to support the implementation of this part, including training regarding the CARE process, CARE agreement and plan services and supports, *the electronic submission of forms*, supported decisionmaking, the supporter role, trauma-informed care, elimination of bias, psychiatric advance directives, family psychoeducation, and data collection.

(c) The Judicial Council, in consultation with the department, other relevant state entities, and the County Behavioral Health Directors Association, shall provide training and technical assistance to judicial officers to support the implementation of this part, including training regarding the CARE process, CARE agreement and plan services and supports, working with the supporter, supported decisionmaking, the supporter role, the family role, trauma-informed care, elimination of bias, best practices, and evidence-based models of care for people with severe behavioral health conditions.

(d) The department, in consultation with other relevant state departments and the California Interagency Council on Homelessness, shall provide training to counsel regarding the CARE process and CARE agreement and plan services and supports.

~~SECTION 1. Section 25545 of the Public Resources Code is amended to read:~~

~~25545. For purposes of this chapter, the following definitions apply:~~

~~(a) “California Native American tribe” has the same meaning as set forth in Section 21073.~~

~~(b) “Facility” means any of the following:~~

~~(1) A solar photovoltaic or terrestrial wind electrical generating powerplant with a generating capacity of 50 megawatts or more and any facilities appurtenant thereto.~~

~~(2) An energy storage system as defined in Section 2835 of the Public Utilities Code that is capable of storing 200 megawatthours or more of electricity.~~

~~(3) A stationary electrical generating powerplant using any source of thermal energy, with a generating capacity of 50 megawatts or more, excluding any powerplant that burns, uses, or relies on fossil or nuclear fuels.~~

~~(4) A discretionary project as described in Section 21080 for which the applicant has certified that a capital investment of at least two hundred fifty million dollars (\$250,000,000) will be made over a period of five years and the discretionary project is for (A) the manufacture, production, or assembly of an energy storage system or component manufacturing, wind system or component manufacturing, and solar photovoltaic energy system or component manufacturing, or (B) the manufacture, production, or assembly of specialized products, components, or systems that are integral to renewable energy or energy storage technologies.~~

~~(5) An electrical transmission line carrying electricity from a facility described in paragraph (1), (2), or (3) that is located in the state to a point of junction with any interconnected electrical transmission system.~~

~~(6) An electrical transmission project.~~

~~(e) "Site" means any location on which an eligible facility is constructed or is proposed to be constructed.~~

~~SEC. 2. Section 25545.14 is added to the Public Resources Code, to read:~~

~~25545.14. An applicant applying for certification of an electrical transmission project under this chapter shall do all of the following:~~

~~(a) Avoid or minimize significant environmental impacts in any disadvantaged community.~~

~~(b) If measures are required pursuant to the California Environmental Quality Act (Division 13 (commencing with Section 21000)) to mitigate significant environmental impacts in a disadvantaged community, mitigate those impacts consistent with that act, including Section 21002. Mitigation measures required under this section shall be undertaken in, and directly benefit, the affected community.~~

1 ~~(e) Enter into a binding and enforceable agreement to comply~~  
2 ~~with this section before the commission's certification of the~~  
3 ~~environmental impact report for the project.~~

4 SEC. 3. ~~Section 1003.7 is added to the Public Utilities Code,~~  
5 ~~to read:~~

6 ~~1003.7.—(a) (1) An electrical corporation that files an~~  
7 ~~application for a certificate or a permit to construct authorizing~~  
8 ~~the new construction of any electrical transmission facility,~~  
9 ~~including transmission lines and substations that will be rated at~~  
10 ~~138 kilovolts or greater that are not subject to the provisions of~~  
11 ~~Chapter 6 (commencing with Section 25500) of Division 15 of the~~  
12 ~~Public Resources Code, may at the same time submit an application~~  
13 ~~for that facility to the Energy Commission pursuant to Chapter 6.2~~  
14 ~~(commencing with Section 25545) of Division 15 of the Public~~  
15 ~~Resources Code.~~

16 ~~(2) For purposes of an application submitted to the Energy~~  
17 ~~Commission pursuant to paragraph (1), the electrical transmission~~  
18 ~~facility shall be considered a facility pursuant to subdivision (b)~~  
19 ~~of Section 25545 of the Public Resources Code.~~

20 ~~(3) When evaluating an application submitted to the Energy~~  
21 ~~Commission pursuant to paragraph (1), the Energy Commission~~  
22 ~~shall not consider the necessity for the electrical transmission~~  
23 ~~facility. The Energy Commission may consider alternative~~  
24 ~~substation locations or routing of transmission lines.~~

25 ~~(4) The Energy Commission may recover from the electrical~~  
26 ~~corporation the reasonable administrative costs incurred from~~  
27 ~~evaluating an application submitted pursuant to paragraph (1). Any~~  
28 ~~fees collected pursuant to this paragraph shall be deposited into~~  
29 ~~the Energy Facility License and Compliance Fund established~~  
30 ~~pursuant to Section 25806 of the Public Resources Code.~~

31 ~~(5) Notwithstanding subdivision (a) of Section 25545.1 of the~~  
32 ~~Public Resources Code, an application to the Energy Commission~~  
33 ~~may be filed no later than January 1, 2033.~~

34 ~~(b) This section does not modify the commission's jurisdiction,~~  
35 ~~including its jurisdiction over the issuance of a certificate of public~~  
36 ~~convenience and necessity or permit to construct pursuant to this~~  
37 ~~article for a facility that is proposed by an electrical corporation,~~  
38 ~~except as follows:~~

39 ~~(1) Certification by the Energy Commission of a facility~~  
40 ~~described in subdivision (a) shall satisfy and replace the~~

1 ~~commission's obligations under the California Environmental~~  
2 ~~Quality Act (Division 13 (commencing with Section 21000) of~~  
3 ~~the Public Resources Code).~~

4 ~~(2) The commission shall not issue a final decision approving~~  
5 ~~a certificate or permit to construct until after the Energy~~  
6 ~~Commission has issued a decision on certification of the proposed~~  
7 ~~facility.~~

8 ~~(c) Upon approval of the application for a certificate or permit~~  
9 ~~to construct, the commission shall file the applicable notice~~  
10 ~~pursuant to Section 21108 of the Public Resources Code on behalf~~  
11 ~~of itself and the Energy Commission.~~

12 ~~SEC. 4. No reimbursement is required by this act pursuant to~~  
13 ~~Section 6 of Article XIII B of the California Constitution because~~  
14 ~~the only costs that may be incurred by a local agency or school~~  
15 ~~district will be incurred because this act creates a new crime or~~  
16 ~~infraction, eliminates a crime or infraction, or changes the penalty~~  
17 ~~for a crime or infraction, within the meaning of Section 17556 of~~  
18 ~~the Government Code, or changes the definition of a crime within~~  
19 ~~the meaning of Section 6 of Article XIII B of the California~~  
20 ~~Constitution.~~