

AMENDED IN SENATE APRIL 10, 2025

AMENDED IN SENATE MARCH 24, 2025

**SENATE BILL**

**No. 367**

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**Introduced by Senator Allen**

February 13, 2025

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An act to amend Sections 5150, 5150.4, 5352, 5352.6, 5354, and 5976.5 of the Welfare and Institutions Code, relating to mental health.

LEGISLATIVE COUNSEL'S DIGEST

SB 367, as amended, Allen. Mental health.

(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. Existing law defines "assessment" for those purposes to mean the determination of whether a person shall be evaluated and treated.

This bill would require an assessment to consider reasonably available, relevant information ~~about the historical course of the person's conditions and their ability to provide for their basic personal needs~~, as specified. *The bill would also authorize an assessment to be used to assist specified individuals in developing an aftercare plan for an individual, if that individual has agreed to an aftercare plan and can be properly served without being detained.*

(2) Existing law provides a procedure for the appointment of a conservator for a person who is determined to be gravely disabled as a result of a mental disorder or an impairment by chronic alcoholism (hereafter LPS conservatorship). Under existing law, a professional person in charge of an agency providing comprehensive evaluation or a facility providing intensive treatment may recommend a LPS conservatorship for a gravely disabled person in their care if the professional person determines that the person is unwilling to accept, or is incapable of accepting, treatment voluntarily. Under existing law, a professional person in charge of an agency providing comprehensive evaluation or a facility providing intensive treatment or a professional person in charge of providing mental health treatment at a county jail, or their designee, may recommend a conservatorship for a gravely disabled person without that person being an inpatient in a facility providing comprehensive evaluation or intensive treatment if specified conditions are met.

This bill would additionally authorize recommendations for an LPS conservatorship if a determination is made that the gravely disabled person has demonstrated an inability to follow through with ~~state plans for self-care~~ *self-care, if the inability is a result of the person being gravely disabled*. The bill would expand the list of individuals or entities that may recommend a conservatorship for a gravely disabled person without that person being an inpatient in a facility providing comprehensive evaluation or intensive treatment to include, among others, ~~a treating physician and~~ the county agency providing investigations for conservatorships of the person. The bill would also authorize a party that provided a recommendation for conservatorship to appeal to the associated mental health court to determine the sufficiency of a conservatorship investigation if a petition for conservatorship is denied.

(3) Existing law separately provides for the establishment of a conservatorship for a person who is unable to properly provide for their personal needs or is substantially unable to manage their finances (hereafter probate conservatorship).

Existing law requires the officer providing conservatorship investigation, if they concur with the recommendation of the professional person or facility, to petition the superior court in the patient's county of residence to establish a conservatorship. Existing law requires the officer providing conservator investigation to investigate all available alternatives to conservatorship, including, among other things, assisted

outpatient treatment, as specified, and the Community Assistance, Recovery, and Empowerment Act program. Existing law requires the officer to recommend conservatorship to the court only if no suitable alternatives are available. Existing law requires the officer to render to the court a comprehensive written report of investigation prior to the hearing and to set forth all alternatives available if the officer recommends either for or against conservatorship.

This bill would specify probate conservatorships with or without major neurocognitive disorder powers in the list of available alternatives that the officer providing conservatorship investigation is required to investigate. In a county where probate conservatorship and LPS conservatorship duties are split between separate agencies, the bill would require LPS conservatorship referrals that include the presence of a major neurocognitive disorder to be reviewed by both agencies to ensure the continuity of evaluations. The bill would additionally require an officer providing conservatorship investigation to include a recommended individualized plan for treatment and care drawn from the documented list of less-restrictive alternatives in the written report described above if the officer recommends against an LPS conservatorship. The bill would also make various clarifying changes. By expanding the duties of county agencies that provide services related to probate conservatorships and LPS conservatorships, and by expanding the duties of the county officer providing conservatorship investigation, this bill would impose a state-mandated local program.

(4) Existing law authorizes a conservator of the person, the estate, or the person and the estate to be appointed for a person who is gravely disabled as a result of a mental health disorder or impairment by chronic alcoholism for the purpose of providing individualized treatment, supervision, and placement. Existing law requires the creation of an individualized treatment plan within 10 days of the establishment of a conservatorship, as specified. Existing law requires the treatment plan to specify goals for the conservatee's treatment, the criteria by which the accomplishment of those goals can be adjudged, and a plan for reviewing the progress of the treatment. If a treatment plan is not developed or if the conservator fails to report to the court that the conservatee is no longer gravely disabled, existing law requires specified individuals, including a person designated by the county, to refer the matter to the court. Existing law requires the court, upon report by a person designated by the county that the goals have been reached and

the person is no longer gravely disabled, to terminate the conservatorship.

This bill would require an individualized treatment plan to specify goals for stabilization, the individual's evidenced-based treatment, and movement to a less-restrictive setting. The bill would require those goals to include the criteria by which accomplishment can be judged. The bill would require the treatment plan to be filed with the court, as specified, after it is developed. The bill would require the court to order the treating agency to remedy any perceived defects in a treatment plan if the plan does not meet the specified goals and criteria and would create procedures for remedying those defects and terminating the conservatorship. This bill would prohibit the court from terminating the conservatorship prior to the end of the conservator's one-year mark if the conservatee cannot be located at any point during that one-year period, except as specified, and, in a hearing within 6 months of the prior termination, would create a presumption that the conservatee requires additional intervention if the previous conservatorship was terminated prior to the successful completion of the treatment plan goals. Because this bill would increase the duties on county personnel, this bill would impose a state-mandated local program.

(5) Existing law, the Community Assistance, Recovery, and Empowerment (CARE) Act, authorizes specified people to petition a civil court to create a CARE plan to provide an individualized, appropriate range of community-based services and supports to an eligible individual. Under the CARE Act, all reports, evaluations, diagnoses, and other information filed with the court that are related to the respondent are confidential, except as specified.

~~This bill would authorize that information to be shared with a county behavioral health service provider or as approved by the respondent and would limit the use of that information for a specific purpose and by court order.~~ *information to be shared only by a court order or as approved by the respondent. If the information is used outside of the above-described proceedings, the bill requires a court order for that information to be shared.*

(6) 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, if the Commission on State Mandates determines that the bill contains costs mandated by the state,

reimbursement for those costs shall be made pursuant to the statutory provisions noted above.

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

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

1 SECTION 1. Section 5150 of the Welfare and Institutions Code  
2 is amended to read:

3 5150. (a) If a person, as a result of a mental health disorder,  
4 is a danger to others or to themselves, or is gravely disabled, a  
5 peace officer, professional person in charge of a facility designated  
6 by the county for evaluation and treatment, member of the  
7 attending staff, as defined by regulation, of a facility designated  
8 by the county for evaluation and treatment, designated members  
9 of a mobile crisis team, or professional person designated by the  
10 county may, upon probable cause, take, or cause to be taken, the  
11 person into custody for a period of up to 72 hours for assessment,  
12 evaluation, and crisis intervention, or placement for evaluation  
13 and treatment in a facility designated by the county for evaluation  
14 and treatment and approved by the State Department of Health  
15 Care Services. The 72-hour period begins at the time when the  
16 person is first detained. At a minimum, assessment, as defined in  
17 Section 5150.4, and evaluation, as defined in subdivision (a) of  
18 Section 5008, shall be conducted and provided on an ongoing  
19 basis. Crisis intervention, as defined in subdivision (e) of Section  
20 5008, may be provided concurrently with assessment, evaluation,  
21 or any other service.

22 (b) When determining if a person should be taken into custody  
23 pursuant to subdivision (a), the individual making that  
24 determination shall apply the provisions of Section 5150.05, and  
25 shall not be limited to consideration of the danger of imminent  
26 harm.

27 (c) The professional person in charge of a facility designated  
28 by the county for evaluation and treatment, member of the  
29 attending staff, or professional person designated by the county  
30 shall assess the person to determine whether the person can be  
31 properly served without being detained. If, in the judgment of the  
32 professional person in charge of the facility designated by the  
33 county for evaluation and treatment, member of the attending staff,

1 or professional person designated by the county, the person can  
2 be properly served without being detained, the person shall be  
3 provided evaluation, crisis intervention, or other inpatient or  
4 outpatient services on a voluntary basis. This subdivision does not  
5 prevent a peace officer from delivering an individual to a  
6 designated facility for assessment under this section. Furthermore,  
7 the assessment requirement of this subdivision does not require a  
8 peace officer to perform any additional duties other than those  
9 specified in Sections 5150.1 and 5150.2.

10 (d) If a person is evaluated by a professional person in charge  
11 of a facility designated by the county for evaluation or treatment,  
12 member of the attending staff, or professional person designated  
13 by the county and is found to be in need of mental health services,  
14 but is not admitted to the facility, all available alternative services  
15 provided pursuant to subdivision (c) shall be offered, as determined  
16 by the county mental health director.

17 (e) If, in the judgment of the professional person in charge of  
18 the facility designated by the county for evaluation and treatment,  
19 member of the attending staff, or the professional person designated  
20 by the county, the person cannot be properly served without being  
21 detained, the admitting facility shall require an application in  
22 writing stating the circumstances under which the person's  
23 condition was called to the attention of the peace officer,  
24 professional person in charge of the facility designated by the  
25 county for evaluation and treatment, member of the attending staff,  
26 or professional person designated by the county, and stating that  
27 the peace officer, professional person in charge of the facility  
28 designated by the county for evaluation and treatment, member of  
29 the attending staff, or professional person designated by the county  
30 has probable cause to believe that the person is, as a result of a  
31 mental health disorder, a danger to others or to themselves, or is  
32 gravely disabled. The application shall also record whether the  
33 historical course of the person's mental disorder was considered  
34 in the determination pursuant to Section 5150.05. If the probable  
35 cause is based on the statement of a person other than the peace  
36 officer, professional person in charge of the facility designated by  
37 the county for evaluation and treatment, member of the attending  
38 staff, or professional person designated by the county, the person  
39 shall be liable in a civil action for intentionally giving a statement

1 that the person knows to be false. A copy of the application shall  
2 be treated as the original.

3 (f) (1) At the time a person is taken into custody for evaluation,  
4 or within a reasonable time thereafter, unless a responsible relative  
5 or the guardian or conservator of the person is in possession of the  
6 person's personal property, the person taking them into custody  
7 shall take reasonable precautions to preserve and safeguard the  
8 personal property in the possession of or on the premises occupied  
9 by the person. The person taking them into custody shall then  
10 furnish to the court a report generally describing the person's  
11 property so preserved and safeguarded and its disposition, in  
12 substantially the form set forth in Section 5211, except that if a  
13 responsible relative or the guardian or conservator of the person  
14 is in possession of the person's property, the report shall include  
15 only the name of the relative or guardian or conservator and the  
16 location of the property, whereupon responsibility of the person  
17 taking them into custody for that property shall terminate.

18 (2) As used in this section, "responsible relative" includes the  
19 spouse, parent, adult child, domestic partner, grandparent,  
20 grandchild, or adult brother or sister of the person.

21 (g) (1) Each person, at the time the person is first taken into  
22 custody under this section, shall be provided, by the person who  
23 takes them into custody, the following information orally in a  
24 language or modality accessible to the person. If the person cannot  
25 understand an oral advisement, the information shall be provided  
26 in writing. The information shall be in substantially the following  
27 form:

28  
29 My name is \_\_\_\_\_ .

30 I am a \_\_\_\_\_  
31 (peace officer/mental health professional)

32 with \_\_\_\_\_ .  
33 (name of agency)

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

36 \_\_\_\_\_  
37 (name of facility)

38 You will be told your rights by the mental health staff.  
39

(2) If taken into custody at the person's own residence, the person shall also be provided the following information:

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

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

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

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

(3) The date the advisement was completed.

(4) Whether the advisement was completed.

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

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

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

My name is \_\_\_\_\_.

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

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

☐ Harm yourself as a result of a mental disorder.

☐ Harm someone else as a result of a mental disorder.

☐ Be unable to take care of your own food, clothing, shelter, personal safety, or necessary medical care as a result of a mental disorder, a severe



substance use disorder, or a cooccurring mental health disorder and a severe substance use disorder.

We believe this is true because

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

(list of the facts upon which the allegation of dangerous or gravely disabled due to mental health disorder is based, including pertinent facts arising from the admission interview or historical course of the person's mental disorder, severe substance use disorder, or cooccurring mental health disorder and severe substance use disorder)

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

During these 72 hours you will be evaluated by the facility staff, and you may be given treatment, including medications. It is possible for you to be released before the end of the 72 hours. But if the staff decides that you need continued treatment you can be held for a longer period of time. If you are held longer than 72 hours, you have the right to a lawyer and a qualified interpreter and a hearing before a judge. If you are unable to pay for the lawyer, then one will be provided to you free of charge.

If you have questions about your legal rights, you may contact the county Patients' Rights Advocate at \_\_\_\_\_  
(phone number) for the county Patients' Rights

Advocacy office

Your 72-hour period began \_\_\_\_\_  
(date/time)

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

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

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

1 (2) The date of the advisement.

2 (3) Whether the advisement was completed.

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

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

7 (k) A facility to which a person who is involuntarily detained  
8 pursuant to this section is transported shall notify the county  
9 patients' rights advocate, as defined in Section 5500, if a person  
10 has not been released within 72 hours of the involuntary detention.

11 SEC. 2. Section 5150.4 of the Welfare and Institutions Code  
12 is amended to read:

13 5150.4. (a) "Assessment," for the purposes of this article,  
14 means the determination of whether a person shall be evaluated  
15 and treated pursuant to Section 5150.

16 (b) An assessment shall consider reasonably available, relevant  
17 information ~~about the historical course of the person's medical,~~  
18 ~~psychological, educational, social, financial, and legal conditions,~~  
19 ~~as well as their ability to provide for their basic personal needs,~~  
20 ~~including food, clothing, shelter, personal safety, or necessary~~  
21 ~~medical care.~~ *including, but not limited to, the history of a person's*  
22 *mental health records and the frequency of prior assessments*  
23 *provided under subdivision (c) of Section 5150. Assessments may*  
24 *be used to assist the professional person in charge of a facility*  
25 *designated by the county for evaluation and treatment, a member*  
26 *of the attending staff, or a professional person designated by the*  
27 *county in developing an aftercare plan for an individual if they*  
28 *have agreed to an aftercare plan and can be properly served*  
29 *without being detained, pursuant to Section 5150.*

30 SEC. 3. Section 5352 of the Welfare and Institutions Code is  
31 amended to read:

32 5352. (a) A professional person in charge of an agency  
33 providing comprehensive evaluation or a facility providing  
34 intensive treatment may recommend conservatorship for a person  
35 in their care who is gravely disabled to the officer providing  
36 conservatorship investigation for the person's county of residence  
37 prior to their admission as a patient in such a facility if the  
38 professional person determines either of the following:

39 (1) The person is unwilling to accept, or is incapable of  
40 accepting, voluntary treatment.

1 (2) The person has demonstrated an inability to follow through  
2 ~~with stated plans of self-care.~~ *plans of self-care, if the inability is*  
3 *a result of the person being gravely disabled.*

4 (b) An individual or entity described in subdivision (c) may  
5 recommend conservatorship for a person without that person being  
6 an inpatient in a facility that provides comprehensive evaluation  
7 or intensive treatment if both of the following conditions apply:

8 (1) The individual or entity has examined and evaluated the  
9 person and has determined that they are gravely disabled.

10 (2) The individual or entity has determined that future  
11 examination on an inpatient basis is not necessary for a  
12 determination that the person is gravely disabled.

13 (c) The conservatorships described in subdivision (b) may be  
14 recommended by any of the following individuals or entities:

15 (1) The professional person in charge of an agency providing  
16 comprehensive evaluation or a facility providing intensive  
17 treatment, or their designee.

18 (2) The professional person in charge of providing mental health  
19 treatment at a county jail, or their designee.

20 ~~(3) A treating physician.~~

21 ~~(4) An emergency medicine physician who provided medical~~  
22 ~~treatment to the person during a recent hospitalization or episode~~  
23 ~~and can attest to both of the conditions described in subdivision~~  
24 ~~(b).~~

25 ~~(5) A treating psychiatrist.~~

26 (3) *A physician who has provided treatment to the person being*  
27 *recommended for conservatorship for a condition that is*  
28 *contributing to that person being gravely disabled.*

29 (4) *A psychiatrist who has provided treatment to the person*  
30 *being recommended for conservatorship for a condition that is*  
31 *contributing to that person being gravely disabled.*

32 ~~(6)~~

33 (5) The county agency providing investigations for  
34 conservatorships of the person established pursuant to Article 1  
35 (commencing with Section 1800) of Chapter 1 of Part 3 of Division  
36 4 of the Probate Code.

37 ~~(7)~~

38 (6) The judicial officer overseeing a competency hearing, as  
39 authorized by Penal Code section 1370.01.

40 ~~(8)~~

(7) The judicial officer overseeing the CARE process, as defined in Section 5971.

(d) (1) If the officer providing conservatorship investigation does not concur with a recommendation, the party who provided the recommendation may appeal to the associated mental health court to determine the sufficiency of the investigation that led to the denial.

(2) If the officer providing the conservatorship investigation concurs with a recommendation provided pursuant to this section, they shall petition the superior court in the county of residence of the patient to establish conservatorship.

(e) If temporary conservatorship is indicated, that fact shall be alternatively pleaded in the petition. The officer providing conservatorship investigation or other county officer or employee designated by the county shall act as the temporary conservator.

SEC. 4. Section 5352.6 of the Welfare and Institutions Code is amended to read:

5352.6. (a) (1) Within 10 days after conservatorship of the person has been established under the provisions of this article, an individualized treatment plan shall be created unless treatment is specifically found not to be appropriate by the court.

(2) The treatment plan shall be developed by the Short-Doyle Act community mental health service, the staff of a facility operating under a contract to provide such services in the individual's county of residence, or the staff of a health facility licensed pursuant to Chapter 2 (commencing with Section 1250) of Division 2 of the Health and Safety Code to provide inpatient psychiatric treatment.

(3) The person responsible for developing the treatment plan shall encourage the participation of the client and the client's family members, when appropriate, in the development, implementation, revision, and review of the treatment plan.

(4) (A) The individualized treatment plan shall specify the following goals:

(i) Stabilization.

(ii) The individual's evidence-based treatment.

(iii) Movement to a less-restrictive setting.

(B) All of the goals in this paragraph shall include the criteria by which accomplishment of the goals can be judged and a plan for review of the progress of treatment.

1 (5) The goals of the treatment plan shall be equivalent to  
2 reducing or eliminating the behavioral manifestations of grave  
3 disability.

4 (6) After a treatment plan is developed, a copy shall be filed  
5 with the court by the Short-Doyle Act community mental health  
6 service, the staff of a facility operating under a contract to provide  
7 such services, the conservator, or the attorney of record for the  
8 conservatee.

9 (7) (A) If a treatment plan does not meet the goals and criteria  
10 specified in this subdivision, the court shall order the treating  
11 agency to remedy any perceived defects within 10 days of the  
12 order.

13 (B) Appropriate treatment shall continue while the treatment  
14 plan is being remedied.

15 (8) The conservator is responsible for ensuring the completion  
16 and utilization of the treatment plan at the conservatee's treatment  
17 settings.

18 (b) If the progress review determines that the goals have been  
19 reached and the conservatee is no longer gravely disabled, a person  
20 designated by the county shall do both of the following:

21 (1) File a copy of the progress report with the court to establish  
22 that the goals have been met.

23 (2) Request that the court terminate the conservatorship.

24 (c) If the conservator fails to report to the court that the  
25 conservatee is no longer gravely disabled, as provided in this  
26 section, then the matter shall be referred to the court by the  
27 Short-Doyle Act community mental health service, the staff of a  
28 facility operating under a contract to provide such services, or the  
29 attorney of record for the conservatee.

30 (d) (1) If a conservatee cannot be located at any point during  
31 the conservatorship's one-year term, the court shall not terminate  
32 the conservatorship prior to the one-year mark without proof that  
33 the treatment plan goals have been achieved and the individual is  
34 no longer gravely disabled.

35 (2) (A) The court shall consider the fact that the previous  
36 conservatorship was terminated early in a subsequent hearing under  
37 the Lanterman-Petris-Short Act (Part 1 (commencing with Section  
38 5000)), provided that the hearing occurs within six months of the  
39 previous termination.

1 (B) The facts considered by the court in subparagraph (A) create  
2 a presumption at that hearing that the individual needs additional  
3 intervention.

4 SEC. 5. Section 5354 of the Welfare and Institutions Code is  
5 amended to read:

6 5354. (a) The officer providing conservatorship investigation  
7 shall investigate all available alternatives to conservatorship,  
8 including, but not limited to, probate conservatorship with or  
9 without major neurocognitive disorder powers, assisted outpatient  
10 treatment pursuant to Section 5346, and the Community Assistance,  
11 Recovery, and Empowerment (CARE) Act program pursuant to  
12 Section 5978, as applicable, and shall recommend LPS  
13 conservatorship to the court only if no suitable alternatives are  
14 available.

15 (b) In a county where the duty of investigation for probate  
16 conservatorship and LPS conservatorship are split between separate  
17 agencies, referrals for LPS conservatorships that include the  
18 presence of a major neurocognitive disorder shall be reviewed by  
19 both agencies to ensure the continuity of evaluations.

20 (c) The officer providing investigation for LPS conservatorships  
21 shall render to the court a written report of investigation prior to  
22 the hearing. The report to the court shall be comprehensive and  
23 shall contain all relevant aspects of the person's medical,  
24 psychological, financial, family, vocational, and social condition,  
25 and information obtained from the person's family members, close  
26 friends, social worker, or principal therapist. The report shall also  
27 contain all available information concerning the person's real and  
28 personal property. The facilities providing intensive treatment or  
29 comprehensive evaluation shall disclose any records or information  
30 that may facilitate the investigation.

31 (d) If the officer providing conservatorship investigation  
32 recommends either for or against LPS conservatorship, the officer  
33 shall set forth in a written report all alternatives available, including  
34 probate conservatorship with or without major neurocognitive  
35 disorder powers, assisted outpatient treatment pursuant to Section  
36 5346 and the CARE Act program pursuant to Section 5978, as  
37 applicable, and all other less-restrictive alternatives. If the officer  
38 providing conservatorship investigation recommends against LPS  
39 conservatorship, they shall also include a recommended  
40 individualized plan for treatment and care drawn from the

1 documented list of less-restrictive alternatives. A copy of the report  
2 shall be transmitted to the individual who originally recommended  
3 conservatorship, to the person or agency, if any, recommended to  
4 serve as conservator, and to the person recommended for or their  
5 appointed counsel. The court may receive the report in evidence  
6 and may read and consider the contents thereof in rendering its  
7 judgment.

8 (e) Notwithstanding Section 5328, when a court with jurisdiction  
9 over a person in a criminal case orders an evaluation of the person's  
10 mental condition pursuant to Section 5200, and that evaluation  
11 leads to a conservatorship investigation, the officer providing the  
12 conservatorship investigation shall serve a copy of the report  
13 required under subdivision (c) upon the defendant or the  
14 defendant's counsel. Upon the prior written request of the  
15 defendant or the defendant's counsel, the officer providing the  
16 conservatorship investigation shall also submit a copy of the report  
17 to the court hearing the criminal case, the district attorney, and the  
18 county probation department. The conservatorship investigation  
19 report and the information contained in that report, shall be kept  
20 confidential and shall not be further disclosed to anyone without  
21 the prior written consent of the defendant. After disposition of the  
22 criminal case, the court shall place all copies of the report in a  
23 sealed file, except as follows:

24 (1) The defendant and the defendant's counsel may retain their  
25 copy.

26 (2) If the defendant is placed on probation status, the county  
27 probation department may retain a copy of the report for the  
28 purpose of supervision of the defendant until the probation is  
29 terminated, at which time the probation department shall return  
30 its copy of the report to the court for placement into the sealed file.

31 (f) For purposes of this section, the following definitions shall  
32 apply:

33 (1) "LPS conservatorship" means a conservatorship established  
34 pursuant to this chapter.

35 (2) "Probate conservatorship" means a conservatorship of the  
36 person established pursuant to Article 1 (commencing with Section  
37 1800) of Chapter 1 of Part 3 of Division 4 of the Probate Code.

38 SEC. 6. Section 5976.5 of the Welfare and Institutions Code  
39 is amended to read:

1 5976.5. (a) Notwithstanding any other law, and except as  
2 otherwise provided in this section, a hearing held under this part  
3 is presumptively closed to the public.

4 (b) The respondent may demand that the hearing be public and  
5 be held in a place suitable for attendance by the public.

6 (c) The respondent may request the presence of any family  
7 member or friend without waiving the right to keep the hearing  
8 closed to the rest of the public.

9 (d) A request by another party to the proceeding to make the  
10 hearing public may be granted if the judicial officer conducting  
11 the hearing finds that the public interest in an open hearing clearly  
12 outweighs the respondent's interest in privacy.

13 (e) (1) All reports, evaluations, diagnoses, or other information  
14 filed with the court related to the respondent's health shall be  
15 confidential and may only be shared ~~with a county behavioral~~  
16 ~~health service provider, by a court order,~~ or as approved by the  
17 respondent. This information may ~~only be used for another purpose,~~  
18 *be used outside of CARE Act proceedings,* such as an LPS  
19 conservatorship petition pursuant to Section 5325, ~~and~~ but shall  
20 require a court order.

21 (2) The respondent may, at any time, petition the court for an  
22 order sealing these records or any other court records in a  
23 proceeding held under this part. Notwithstanding any rule of court  
24 prohibiting records kept confidential by law from consideration  
25 for sealing, if such a petition is filed, there shall exist a presumption  
26 in favor of sealing.

27 (f) The fact that evidence is admitted at a proceeding held under  
28 this part shall not be the basis for admission of that evidence in a  
29 subsequent legal proceeding.

30 (g) Photographs, recordings, transcripts, other records of  
31 proceedings held under this part, and testimony regarding  
32 proceedings held under this part shall not be admissible in any  
33 subsequent legal proceeding except upon motion by one of the  
34 following in that subsequent legal proceeding:

35 (1) The respondent.

36 (2) The county behavioral health agency, the public guardian,  
37 or the public conservator.

38 (h) In a proceeding held under this part, this section shall not  
39 affect the applicability of paragraph (2) of subdivision (c) of  
40 Section 5977.1, make admissible any evidence that is not otherwise



1 admissible, or permit a witness to base an opinion on any matter  
2 that is not a proper basis for that opinion. The admission or  
3 exclusion of evidence shall be pursuant to the rules of evidence  
4 established by the Evidence Code, including, but not limited to,  
5 Section 352 of the Evidence Code, and by judicial decision.

6 (i) Before commencing a hearing at the respondent's first court  
7 appearance, the judicial officer shall inform the respondent of their  
8 rights under this section. At subsequent hearings, the court is not  
9 required to advise the respondent of their rights under this section  
10 upon finding that the respondent understands and waives the  
11 additional advisement of their rights.

12 SEC. 7. If the Commission on State Mandates determines that  
13 this act contains costs mandated by the state, reimbursement to  
14 local agencies and school districts for those costs shall be made  
15 pursuant to Part 7 (commencing with Section 17500) of Division  
16 4 of Title 2 of the Government Code.