

Legislative Unit Mental Health Bills

AB 870 Levine (D)

TITLE: Prisoners: Mental Health Treatment

INTRODUCED: 02/16/2017

LOCATION: SENATE

DIGEST:

This bill would require a court, upon the conviction of a defendant for a felony resulting in sentencing to state prison, to recommend in writing that the defendant receive a mental health evaluation if the court finds that the defendant at the time of the commission of the offense was suffering from a serious mental illness or has a demonstrated history of mental illness.

AB 1136 Eggman (D)

TITLE: Health Facilities: Mental or Substance Use Treatment

INTRODUCED: 02/17/2017

LOCATION: Senate Health Committee

DIGEST:

This bill would require the State Department of Public Health to develop and submit a proposal to solicit a grant under the federal 21st Century Cures Act to develop a real-time, Internet-based database to collect, aggregate, and display information about beds in inpatient psychiatric facilities, crisis stabilization units, residential community mental health facilities, and licensed residential substance use disorder treatment facilities. The bill would require a database created using grant funds received as a result of the submission of that proposal to have the capacity to collect data and enable a specified search to identify beds that are appropriate for the treatment of individuals and to include specified information, including, among other things, the contact information for the facility's designated employee and information on beds. The bill would require the department to confer with stakeholders to inform the development of the proposal and to submit an evaluation to the federal Health and Human Services Secretary and to the Legislature.

AB 1779 Nazarian (D)

TITLE: Sexual Orientation: Change Efforts
INTRODUCED: 01/04/2018
LOCATION: Assembly Business and Professions Committee
DIGEST:

This bill would additionally prohibit a mental health provider from engaging in sexual orientation change efforts with a patient, regardless of age, under a conservatorship or a guardianship.

AB 1795 Gipson (D)

TITLE: Emergency Medical Services: Behavioral Health Facility
INTRODUCED: 01/09/2018
COMMITTEE: Assembly Health Committee
HEARING: 04/17/2018 1:30 pm
DIGEST:

This bill would authorize a local emergency medical services agency to submit, as part of its emergency medical services plan, a plan to transport specified patients who meet triage criteria to a behavioral health facility or a sobering center, as defined. The bill would make conforming changes to the definition of advanced life support to include prehospital emergency care provided before and during, transport to a behavioral health facility or a sobering center. The bill would authorize a city, county, or city and county to designate, and contract with, a sobering center to receive patients, and would establish sobering center standards.

This bill would require the authority to adopt guidelines for the triage criteria and assessment procedures by July 1, 2020, and would require the authority to annually analyze administration of local plans and to report, as specified.

AB 1893 Maienschein (R)

TITLE: Maternal Mental Health: Federal Funding
INTRODUCED: 01/18/2018
LOCATION: Assembly Second Reading File
DIGEST:

This bill would require the department to investigate and apply for federal funding opportunities regarding maternal mental health, as specified, and to prepare a report to the Legislature on or before January 1, 2020, on how the department plans to use the federal funding it receives.

AB 1968 Low (D)

TITLE: Mental Health: Firearms
INTRODUCED: 01/31/2018
LOCATION: Assembly Second Reading File
DIGEST:

This bill would require that a person who has been taken into custody, assessed, and admitted to a designated facility because he or she is a danger to himself, herself, or others, as a result of a mental health disorder more than once within a one -year period to be prohibited from owning a firearm for the remainder of his or her life. The bill would extend the above hearing process to a person under these provisions. Because a violation of the firearm prohibition would be a crime, the bill would impose a state-mandated local program.

This bill would require that form to include an authorization for the release of the person's medical and mental health records, upon request, to the appropriate district attorney solely for use in the hearing. The bill would require the person to be responsible for submitting the form to the superior court and a copy of the form to the district attorney, and would prohibit the facility from doing so on behalf of the person.

This bill would instead require the court to set the hearing within 60 days. The bill would further authorize a continuance of 30 days, upon a showing of good cause by the district attorney. The bill would also require that a petition for a hearing be made no sooner than 6 months after the person's discharge from the facility.

AB 1971 Santiago (D)

TITLE: Mental Health: Involuntary Detention: Gravely Disabled
INTRODUCED: 01/31/2018
COMMITTEE: Assembly Health Committee
HEARING: 04/10/2018 1:30 pm
DIGEST:

This bill would expand that definition of " gravely disabled" for these purposes to also include a condition in which a person, as a result of a mental health disorder or chronic alcoholism, as applicable, is unable to provide for his or her medical treatment, as specified. The bill would make conforming changes.

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.

AB 2018 Maienschein (R)

TITLE: Mental Health Workforce Planning: Loan Repayment

INTRODUCED: 02/05/2018

LOCATION: Assembly Second Reading File

DIGEST:

This bill also would define "practice setting" to include a program or facility operated by, or contracted to, a county mental health plan. The bill would require the guidelines established by the foundation and the office to include providing early loan repayment consideration for psychiatric trainees who have committed to working in county mental health plans or county mental health plan contracted services and are enrolled in specialized community psychiatry training tracks or fellowships for this purpose. By providing that a continuously appropriated fund may be spent for a new purpose, this bill would make an appropriation.

This bill would clarify that OSHPD needs to include in the 5-year plan both expansion plans for loan forgiveness and scholarship programs offered in return for a commitment to employment in California's public mental health system and expansion plans for making loan forgiveness programs available to current employees of the mental health system who want to obtain Associate of Arts, Bachelor of Arts, master's degrees, or doctoral degrees. The bill would also make specified findings and declarations.

AB 2022 Chu (D)

TITLE: Pupil Health: On Campus Mental Health Professionals

INTRODUCED: 02/05/2018

COMMITTEE: Assembly Education Committee

HEARING: 04/11/2018 1:30 pm

DIGEST:

This bill would require, on or before December 31, 2021, a school of a school district or county office of education and a charter school to have at least one mental health professional, as provided, generally accessible to pupils on campus during school hours. By imposing additional requirements on local educational agencies, the bill would impose a state-mandated local program. The bill would also specify possible sources of funding to comply with its requirements.

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.

AB 2099 Gloria (D)

TITLE: Mental Health: Detention and Evaluation

INTRODUCED: 02/08/2018

LOCATION: Assembly Third Reading File

DIGEST:

This bill would provide that a copy of that application shall be treated as the original for purposes of placing that person in the facility.

AB 2143 Caballero (D)

TITLE: Mental Health Provider Education Loan Reimbursement

INTRODUCED: 02/12/2018

COMMITTEE: Assembly Health Committee

HEARING: 04/17/2018 1:30 pm

DIGEST:

This bill would, on and after July 1, 2019, add nurse practitioners listed as psychiatric-mental health nurses, physician assistants who specialize in mental health services, and licensed educational psychologists, as specified, to those licensed mental health service providers eligible for grants to reimburse educational loans, and would make other conforming changes. Commencing July 1, 2019, the bill would also add the Physician Assistant Board and the Board of Registered Nursing to the list of entities from which the Health Professions Education Foundation must solicit advice in developing the program.

This bill would, on and after July 1, 2019, require the board to collect an additional \$20 fee at the time of license renewal from a nurse practitioner who is listed by the board as a psychiatric mental health nurse and would require that those funds be deposited in the Mental Health Practitioner Education Fund.

This bill would, on and after July 1, 2019, require the board to collect an additional \$20 fee at the time of renewal of the license of a physician assistant participating in the Licensed Mental Health Service Provider Education Program. The bill would require that the fee be deposited in the Mental Health Practitioner Education Fund.

AB 2152 Weber (D)

TITLE: Mental Health Services Oversight and Accountability

INTRODUCED: 02/12/2018

COMMITTEE: Assembly Human Services Committee

HEARING: 04/24/2018 1:30 pm

DIGEST:

This bill would, to the extent permitted by federal law and guidance, require a person who experiences food insecurity to be considered "unfit for employment" for purposes of determining whether a person is exempt from the federal ABAWD time limit. The bill would require the department, in consultation with public health officials and CalFresh advocates, among others, to establish the minimum number of days of food insecurity that is to be experienced by a person in order for the person to be considered "unfit for employment," and would require the guidance to include instructions for verifying when a person is "unfit for employment" due to experiencing food insecurity. To the extent that the bill would expand eligibility for CalFresh, the bill would impose a state-mandated local program.

AB 2156 Chen (R)

TITLE: Mental Health Services: Gravely Disabled
INTRODUCED: 02/12/2018
COMMITTEE: Assembly Health Committee
HEARING: 04/10/2018 1:30 pm
DIGEST:

This bill would change the definition of "gravely disabled" for these purposes to read, in part, a condition in which a person, as a result of a mental health disorder, is incapable of making informed decisions about, or providing for, his or her own basic personal needs for food, clothing, shelter, or medical care without significant supervision and assistance from another person and, as a result of being incapable of making these informed decisions, the person is at risk of substantial bodily harm, dangerous worsening of a concomitant serious physical illness, significant psychiatric deterioration, or mismanagement of his or her essential needs that could result in bodily harm. By increasing the level of service required of county mental health departments, this bill would impose a state-mandated local program.

AB 2193 Maienschein (R)

TITLE: Maternal Mental Health
INTRODUCED: 02/12/2018
COMMITTEE: Assembly Health Committee
HEARING: 04/24/2018 1:30 pm
DIGEST:

This bill would make it the duty of licensed health care practitioners who treat or attend the mother or child, or both, to screen the mother for maternal mental health conditions, as defined, at least once during pregnancy and once during the

postpartum period and to report the findings of the screening to the mother's primary care physician if the health care practitioner is not the mother's primary care physician. The bill would also make it the duty of any facility where those practitioners treat or attend the mother or child, or both, in the first post delivery appointment to ensure that those practitioners perform the required screening and report the findings. The bill would make a violation of its requirements grounds for disciplinary action by the licensee's licensing entity and would make the facility subject to punishment by its licensing entity, except that a violation of this requirement would not constitute a crime.

This bill would require health care service plans and health insurers to develop, by July 1, 2019, a case management program that is available for enrollees, insureds, and their treating providers when the provider determines that an enrollee or insured may have a maternal mental health condition, as specified. The bill would require that case management program to meet specified standards and would require plans and insurers to notify providers of the availability of the program and to develop a quality management program in order to understand the effectiveness of the case management program. The bill would require health care service plan contracts and health insurance policies issued, amended, or renewed on or after January 1, 2019, to provide coverage for maternal mental health conditions and the above-described case management program. Because a willful violation of the bill's requirement by a health care service plan would be a crime, the bill would impose a state-mandated local program.

AB 2287 Kiley (R)

TITLE: Mental Health Services Act
INTRODUCED: 02/13/2018
COMMITTEE: Assembly Health Committee
HEARING: 04/24/2018 1:30 pm
DIGEST:

This bill would establish the Office of Mental Health Services within the California Health and Human Services Agency, as specified. The bill would transfer various functions of the State Department of Health Care Services under the act to the office. Under this bill, the office would succeed to, and be vested with, all the duties, powers, responsibilities, and jurisdiction, vested in the department, regarding oversight of the Mental Health Services Fund, as specified. The bill would also require the office to assume certain duties, including, among others,

initiating investigations, advising counties, conducting research, and reporting to the Legislature, by December 31, 2020, of any additional authority it deems necessary to complete its duties and to ensure county compliance with the act, as specified. The bill would make conforming changes to other provisions to reflect the transfer of those mental health responsibilities.

This bill would make legislative findings and declarations relating to mental health services in California and stating that the provisions of this bill are consistent with, and further the intent of, the act. By amending the provisions of the act, this bill would require a 2/3 vote of the Legislature.

AB 2316 Eggman (D)

TITLE: Mental Health: County Patient's Rights Advocates

INTRODUCED: 02/13/2018

LOCATION: Assembly Second Reading File

DIGEST:

This bill additionally would require the contracted entity to develop a comprehensive training and certification program for county patients' rights advocates, as specified, and would require the training program to include specified topics. The bill would require a county to ensure that its patients' rights advocates become certified under the training and certification program within 90 days of employment. The bill would exempt county patients' rights advocates who have been employed for at least a year on January 1, 2019, from the requirement to complete the training and certification program. By requiring counties to perform new duties, this bill would impose a state-mandated local program.

AB 2393 Health Committee

TITLE: Mental Health

INTRODUCED: 02/14/2018

COMMITTEE: Assembly Health Committee

HEARING: 04/10/2018 1:30 pm

DIGEST:

This bill would instead prohibit a county from charging fees for Medi-Cal specialty mental health services to Medi-Cal beneficiaries who do not have a share of cost and Medi-Cal beneficiaries who have met their share of cost, and would authorize a county to charge fees to individuals who are not Medi-Cal beneficiaries and Medi-Cal beneficiaries who have a share of cost that has not been met, in

accordance with the patient's ability to pay for community mental health services rendered, but not in excess of actual costs.

AB 2533 Stone (D)

TITLE: Inmates: Indigence
INTRODUCED: 02/14/2018
COMMITTEE: Assembly Public Safety Committee
HEARING: 04/10/2018 9:00 am
DIGEST:

This bill would require that an inmate in a state prison who has maintained an inmate trust account with \$25 or less for 30 consecutive days be deemed indigent. The bill would require that an inmate who is indigent be provided with sufficient resources to communicate with and access the courts, as specified, and not be charged for medical, dental, and mental health copayments. The bill would make conforming changes.

AB 2619 Allen T (R)

TITLE: Mental Health Services Funding: Homeless Persons
INTRODUCED: 02/15/2018
COMMITTEE: Assembly Health Committee
HEARING: 04/17/2018 1:30 pm
DIGEST:

This bill would appropriate \$10,000,000 from the General Fund to the State Department of Health Care Services to be distributed to counties for the purpose of funding innovative programs to provide mental health services to California's homeless population.

AB 2843 Gloria (D)

TITLE: Mental Health Services Found
INTRODUCED: 02/16/2018
COMMITTEE: Assembly Health Committee
HEARING: 04/17/2018 1:30 pm
DIGEST:

This bill would additionally require those funds subject to reversion to be reallocated to cities, special districts, school districts, or other public entities for the provision of mental health services consistent with the intent of the MHSA. The bill would find and declare that its provisions are consistent with and further the intent

of the MHSA. By allocating moneys in the Mental Health Services Fund for new purposes, this bill would make an appropriation.

AB 2983 Arambula (D)

TITLE: Health Care Facilities: Voluntary Psychiatric Care

INTRODUCED: 02/16/2018

COMMITTEE: Assembly Health Committee

HEARING: 04/17/2018 1:30 pm

DIGEST:

This bill would prohibit a general acute care hospital or an acute psychiatric hospital from requiring a person who voluntarily seeks care to be in custody as a danger to himself or herself or others or gravely disabled as a condition of accepting a transfer of that person. By creating a new crime, this bill would impose a state-mandated local program.

AB 3032 Frazier (D)

TITLE: Maternal Mental Health: Quality Management Program

INTRODUCED: 02/16/2018

COMMITTEE: Assembly Health Committee

HEARING: 04/24/2018 1:30 pm

DIGEST:

This bill would require a general acute care hospital or special hospital that has a perinatal unit to develop and implement, by January 1, 2020, a quality management program relating to maternal mental health disorders including, but not limited to, postpartum depression. The bill would specify the components of the quality management program which would include, but would not be limited to, clinician training and readiness, and public education and information, as specified.

SB 215 Beall (D)

TITLE: Diversion: Mental Disorders

INTRODUCED: 02/01/2017

LOCATION: ASSEMBLY

DIGEST:

This bill would authorize a court, with the consent of the defendant and a waiver of the defendant's speedy trial right, to postpone prosecution of a misdemeanor or a felony punishable in a county jail, and place the defendant in a pretrial diversion program for up to 2 years if the court is satisfied the defendant suffers from a

mental disorder, that the defendant's mental disorder played a significant role in the commission of the charged offense, and that the defendant would benefit from mental health treatment. For specified offenses, the bill would condition granting diversion on the consent of the prosecution. Specified driving-under-the-influence offenses would not be eligible for diversion under these provisions. The bill would require the defense to arrange, to the satisfaction of the court, for a program of mental health treatment utilizing existing inpatient or outpatient mental health resources. The bill would require the divertee's mental health provider to provide reports on the defendant's progress to the court, the defense, and the prosecution not less than every month if the offense is a felony, and every 3 months if the offense is a misdemeanor, as specified. By increasing the duties of local prosecutors and public defenders, this bill would impose a state-mandated local program. The bill would require, upon successful completion of the diversion program, that the charges be dismissed and the records of the arrest be restricted, as specified, and that the arrest be deemed never to have occurred, except as provided. The bill would state findings and declarations by the Legislature regarding the need for the diversion program.

SB 906 Beall (D)

TITLE: Medi-Cal: Mental Health Services: Family Support

INTRODUCED: 01/17/2018

LOCATION: Senate Appropriations Committee

DIGEST:

This bill would require the State Department of Health Care Services to establish, no later than July 1, 2019, a statewide peer, parent, transition-age, and family support specialist certification program, as a part of the state's comprehensive mental health and substance use disorder delivery system and the Medi-Cal program. The bill would include 4 certification categories: adult peer support specialists, transition-age youth peer support specialists, family peer support specialists, and parent peer support specialists. The certification program's components would include, among others, defining responsibilities and practice guidelines, determining curriculum and core competencies, specifying training and continuing education requirements, establishing a code of ethics, and determining a certification revocation process. The bill would require an applicant for the certification as a peer, parent, transition-age, or family support specialist to meet specified requirements, including successful completion of the curriculum and training requirements.

This bill would require the department to collaborate with OSHPD and interested stakeholders in developing the certification program, and would authorize the department to contract to obtain technical assistance pursuant to a specified joint state-county decision making process. The bill would authorize the department to use funding provided through the MHSA and designated funds administered by OSHPD to develop and administer the certification program, and would authorize the use of these MHSA funds to serve as the state's share of funding to develop and administer the certification program for the purpose of claiming federal financial participation under the Medicaid Program.

This bill would authorize the department to establish a certification fee schedule and to require remittance of fees as contained in the schedule, for the purpose of supporting the department's activities associated with the ongoing state administration of the certification program. The bill would require the department to utilize the other funding resources made available under the bill before determining the need for the certification fee schedule and requiring the remittance of fees. The bill would declare the intent of the Legislature that the certification fees charged by the department be reasonable and reflect the expenditures directly applicable to the ongoing state administration of the certification program.

This bill would require the department to amend the Medicaid state plan to include a certified peer, parent, transition-age, and family support specialist as a provider type for purposes of the Medi-Cal program and to include peer support specialist services as a distinct service type for purposes of the Medi-Cal program. The bill would require Medi-Cal reimbursement for peer support specialist services to be implemented only if and to the extent that federal financial participation is available and the department obtains all necessary federal approvals. The bill would authorize the department to enter into exclusive or nonexclusive contracts on a bid or negotiated basis, as specified, on a statewide or more limited geographic basis. This bill also would authorize the department to implement, interpret, or make specific its provisions by means of plan letters, plan or provider bulletins, or similar instructions, without taking regulatory action, until regulations are adopted. The bill would require the department to adopt regulations by July 1, 2021, and, commencing July 1, 2019, would require the department to provide semiannual status reports to the Legislature until regulations have been adopted.

This bill would declare that it clarifies terms and procedures under the Mental Health Services Act.

SB 931 Hertzberg (D)

TITLE: Conservatorships: Custody Status

INTRODUCED: 01/25/2018

LOCATION: Senate Third Reading File

DIGEST:

This bill would expand that authority to a professional person in charge of providing mental health treatment at a county jail or his or her designee. This bill would additionally prohibit a conservatorship investigator from failing to schedule an investigation based upon the custody status of a person who is subject to a conservatorship investigation.

SB 960 Leyva (D)

TITLE: Department of Corrections and Rehabilitation: Suicide

INTRODUCED: 01/31/2018

LOCATION: Senate Rules Committee

DIGEST:

This bill would require the department to submit a report, as specified, to the Legislature on or before April 1 of each year, on the department's efforts to respond to and prevent suicides and attempted suicides among inmates, including, among other things, identifying recommendations that would affect the department's efforts to respond to and prevent suicides and attempted suicides among inmates, describing the progress in implementing those recommendations, and describing the department's progress in identifying and implementing mental health programs that may ameliorate risk factors associated with suicides among inmates. The bill would require the report to be posted on the department's Internet Web site. The bill would also require the department to notify the family of an inmate, if a family member is listed on record, within 12 hours by telephone of an attempted suicide or suicide by the inmate.

SB 1004 Wiener (D)

TITLE: Mental Health Services Act: Prevention and Intervention

INTRODUCED: 02/06/2018

COMMITTEE: Senate Health Committee

HEARING: 04/11/2018 1:30 pm

DIGEST:

This bill would require the commission, on or before January 1, 2020, to establish priorities for the use of prevention and early intervention funds and to develop a statewide strategy for monitoring implementation of prevention and early

intervention services, including enhancing public understanding of prevention and early intervention and creating metrics for assessing the effectiveness of how prevention and early intervention funds are used and the outcomes that are achieved. The bill would amend the Mental Health Services Act by requiring a county, commencing with the 2020-21 fiscal year, to focus the prevention and early intervention portion of its local plan on the priorities established by the commission. The bill would authorize a county to include other priorities, as determined through the stakeholder process, either in place of, or in addition to, the established priorities. If the county chooses to include other programs, the bill would require the plan to include a description of why those programs are included and metrics by which the effectiveness of those programs are to be measured.

The bill would require the commission to review the plans and approve them if they meet specified requirements. The bill would prohibit funding for county prevention and early intervention programs from being distributed until after the approval of the county's prevention and early intervention plan by the commission. This bill would declare that its provisions further the intent of the MHSA.

SB 1019 Beall (D)

TITLE: Youth Mental Health and Substance Use Disorder Services

INTRODUCED: 02/07/2018

COMMITTEE: Senate Education Committee

HEARING: 04/18/2018 9:00 am

DIGEST:

This bill would require the commission, when making these funds available, to allocate at least one-half of those funds for services or programs targeted at children and youth 18 years of age and under.

This bill would authorize a county, or a qualified provider operating as part of the county mental health plan network, and a local educational agency to enter into a partnership to create a program that includes, among other things, targeted interventions for pupils with identified social-emotional, behavioral, and academic needs and an agreement that establishes a Medi-Cal mental health provider that is county-operated or county-contracted for the provision of mental health and substance use disorder services to pupils of the local educational agency and in which there are provisions for the delivery of campus-based mental health and substance use disorder services through qualified providers or qualified professionals to provide on-campus support to identify pupils with an individualized education program (IEP), and pupils who do not have an IEP, but

who a teacher believes may require mental health or substance use disorder services and, with parental consent, to provide those services to those pupils.

The bill would require the Mental Health Services Oversight and Accountability Commission, in consultation with the State Department of Education and the State Department of Health Care Services, to develop guidelines for the use of funds from the Mental Health Services Fund by a county for innovative programs and prevention and early intervention programs to enter into and support the above-mentioned partnerships. The bill would additionally require the commission to develop guidelines for the use of funds appropriated for the Investment in Mental Health Wellness Act of 2013 by a county to enter into and support these partnerships. The bill would create the County and Local Educational Agency Partnership Fund in the State Treasury, which would be available, upon appropriation by the Legislature, to the State Department of Education for the purpose of funding these partnerships, as specified, and would require the State Department of Education to fund these partnerships through a competitive grant program. The bill would also make related findings and declarations.

SB 1095 Anderson (R)

TITLE: Criminal Proceedings: Mentally Incompetent Offenders

INTRODUCED: 02/13/2018

COMMITTEE: Senate Public Safety Committee

HEARING: 04/10/2018 8:30 am

DIGEST:

This bill would delete the authority of the court to dismiss the pending revocation matter and would delete the above-described restriction on the court's authority to order the matter to the public guardian. The bill would establish a process for delivering a defendant who is found mentally incompetent to a public or private treatment facility for up to 180 days or until the parolee's date of discharge, whichever comes first, for the purpose of restoring the defendant's competency, including procedures for involuntarily administering antipsychotic medication.

SB 1101 Pan (D)

TITLE: Mental Health

INTRODUCED: 02/13/2018

LOCATION: Senate Health Committee

DIGEST:

The bill, beginning January 1, 2021, would require all counties to annually submit a report to the commission and the Legislature, by the end of each fiscal year, that documents its progress toward the statewide objectives, using the metrics described above. The bill would also require each county to document specified mental health funding allocations in relation to the statewide objectives. The bill would prohibit counties from encumbering MHSA funding for purposes of complying with these provisions. By requiring counties to submit annual reports, this bill would impose a state-mandated local program.

SB 1113 Monning (D)

TITLE: Mental Health in the Workplace: Voluntary Standards

INTRODUCED: 02/13/2018

LOCATION: Senate Second Reading File

DIGEST:

This bill would authorize the commission to establish a framework and voluntary standard for mental health in the workplace that serves to reduce mental health stigma, increase public, employee, and employer awareness of the recovery goals of the Mental Health Services Act, and provide guidance to California's employer community to put in place strategies and programs, determined by the commission, to support the mental health and wellness of employees.