

California AB 1424 (2001)

On October 4, 2001, Assembly Bill 1424 (Thomson-Yolo D) was signed by the Governor and chaptered into law. The law became effective Jan. 1, 2002. AB 1424 modifies the LPS Act (Lanterman-Petris-Short Act), which governs involuntary treatment for people with mental illness in California. Quoting the legislative intent of the bill,

"The Legislature finds and declares all of the following: Many families of persons with serious mental illness find the Lanterman-Petris-Short Act system difficult to access and not supportive of family information regarding history and symptoms. Persons with mental illness are best served in a system of care that supports and acknowledges the role of the family, including parents, children, spouses, significant others, and consumer-identified natural resource systems. It is the intent of the Legislature that the Lanterman-Petris-Short Act system procedures be clarified to ensure that families are a part of the system response, subject to the rules of evidence and court procedures."

More specifically, AB 1424 requires:

- that the historical course of the person's mental illness be considered when it has a direct bearing on the determination of whether the person is a danger to self/others or gravely disabled.
- that relevant evidence in available medical records or presented by family members, treatment providers, or anyone designated by the patient be considered by the court in determining the historical course.
- that facilities make every reasonable effort to make information provided by the family available to the court; and
- that the person (a law enforcement officer or designated mental health professional) authorized to place a person in emergency custody (a "5150") consider information provided by the family or a treating professional regarding historical course when deciding whether there is probable cause for hospitalization.

Upon the signing of AB 1424, several W & I codes were amended to permit relevant information about the historical course of a person's mental disorder from any source to be considered at all stages of the involuntary hospitalization process. For example, W & I code 5150.05 was added to 5150. It says:

(a) When determining if probable cause exists to take a person into custody, or cause a person to be taken into custody, pursuant to Section 5150, any person who is authorized to take that person, or cause that person to be taken, into custody pursuant to that section shall consider available relevant information about the historical course of the person's mental disorder if the authorized person determines that the information has a reasonable bearing on the determination as to whether the person is a danger to others, or to himself or herself, or is gravely disabled as a result of the mental disorder.

Communicating with Mental Health Providers about Adult Mental Health Consumers

Monterey County Behavioral Health recognizes the key role families play in the recovery of consumers receiving our services. We encourage providers at every level of care to seek authorization from the consumer so that family members will be involved and informed in their care. In fact, we have a special authorization form expressly designed to facilitate communication between treatment teams and family members. We hope the summary below clarifies how laws concerning confidentiality affect communications between families and mental health providers concerning mental health consumers aged 18 or older.

Outpatient Services

- California and Federal law require that mental health providers obtain authorization from the consumer before they can communicate with family members, even to reveal that person is a client

Hospital Services

- California law requires that hospitals inform families that a consumer has been admitted, transferred, or discharged unless the consumer requests that the information not be notified.
 - Hospitals are required to notify consumers they have the right not to provide this information.
- California and Federal law require that hospital staff obtain an authorization to disclose anything else to family members. What the family can do
- Although mental health providers are constrained in their ability to communicate with families, family members may communicate with treatment teams with or without an authorization from the consumer.
 - You can use this form to provide information about the consumer to hospital or outpatient staff. Staff will place this information in the consumer's mental health chart. Under California and Federal law, consumers have the right to view their chart.
 - Although the treatment team may not be able to disclose information to you, they are free to consider any information you offer.