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DIVISION 5. COMMUNITY MENTAL HEALTH SERVICES [5000 - 5987] (Division 5 repealed and added by Stats. 1967, Ch. 1667.)

PART 2. THE BRONZAN-MCCORQUODALE ACT [5600 - 5772] (Heading of Part 2 amended by Stats. 1992, Ch. 1374, Sec. 14.)

CHAPTER 3.5. Mental Health Master Plan Development Act [5730 - 5733] (Chapter 3.5 added by Stats. 1989, Ch. 1313, Sec. 1.

5730. This act is to be known as the Mental Health Master Plan Development Act.

(Added by Stats. 1989, Ch. 1313, Sec. 1.)

- 5731. The Legislature finds and declares that the mental health system is a large and important segment of California's system of health care. The Legislature further finds and declares all of the following:
- (a) Public Law 99-660 requires that the State Department of Mental Health develop a state plan for the Short-Doyle mental health system which includes all of the following:
 - (1) Plans developed in response to federal planning requirements shall be submitted to the Legislature.
 - (2) Evidence of broad participation from concerned citizens and mental health consumers.
 - (3) An analysis of the needs of adults with a serious and persistent mental illness, children and youth with serious emotional disturbance, and persons who are homeless with a mental illness in California.
 - (4) Improvements in the mental health delivery system are needed for adults with a serious and persistent mental illness, children and youth with serious emotional disturbance, and persons who are homeless with a mental illness.
 - (5) Given the existing mental health funding base, priorities need to be established for the Short-Doyle community mental health system.
 - (6) There is no minimum range of treatment services which should be available in every county in California.
 - (7) Most funding formulas for state mental health programs are not client based.
 - (8) The state has a special responsibility for the care and treatment of adults with a serious and persistent mental illness, minors with serious emotional disturbance, and persons who are homeless with a mental illness who are the most vulnerable and who require consistent supportive services to meet their health and safety needs in the community.
 - (9) Legislative action is required to ensure that a comprehensive policy is developed which addresses the critical problems and key issues currently facing the mental health system in California.

(Amended by Stats. 2024, Ch. 948, Sec. 41. (AB 2119) Effective January 1, 2025.)

<u>5732.</u> (a) Given the requirements of Public Law 99-660 and the significant policy issues currently facing the mental health system in California, a master plan for mental health is required which integrates these planning and reform efforts and which establishes priorities for the service delivery system and analyzes critical policy issues.

- (b) The California Planning Council's scope shall be expanded to include the development of the Mental Health Master Plan. This Mental Health Master Plan shall be distinct but compatible with the plan mandated by Public Law 99-660, the development and implementation of which is the responsibility of the State Department of Mental Health.
- (c) Therefore, the California Planning Council required by Public Law 99-660 shall be expanded to include the following members:
 - (1) The Speaker of the Assembly shall recommend to the Governor for appointment, one council member.
 - (2) The Assembly Minority Floor Leader shall recommend to the Governor for appointment, one council member.
 - (3) The President pro Tempore of the Senate shall recommend to the Governor for appointment, one council member.
 - (4) The Senate Minority Floor Leader shall recommend to the Governor for appointment, one council member.
 - (5) The County Supervisors Association of California shall recommend to the Governor for appointment, one council member.
- (d) The Mental Health Master Plan shall be completed and submitted to the Legislature and the Governor by October 1, 1991. (Added by Stats. 1989, Ch. 1313, Sec. 1.)
- 5733. The Mental Health Master Plan shall include, but not be limited to, an analysis of all of the following:
- (a) The specific planning elements required by Public Law 99-660.
- (b) Identification of priority populations to be served and a definition of those priority populations.
- (c) Proposed methods of allocating resources which result in the most effective system of care possible for the priority populations.
- (d) Proposed methods of evaluating the effectiveness of current service delivery methods and the populations which are best served by these models of care.
- (e) Recommendations related to the governance and responsibilities of the state, county, or other administrative structures for the delivery of mental health programs which are cost-effective and provide the highest quality of care.

(Added by Stats. 1989, Ch. 1313, Sec. 1.)