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AB-1356 Alcohol and other drug programs. (2025-2026)

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Assembly Bill No. 1356

CHAPTER 189

An act to amend Section 11830.01 of the Health and Safety Code, relating to public health.

[Approved by Governor October 01, 2025. Filed with Secretary of State October 01, 2025.]

LEGISLATIVE COUNSEL'S DIGEST

AB 1356, Dixon. Alcohol and other drug programs.

Under existing law, the State Department of Health Care Services is responsible for administering prevention, treatment, and recovery services for alcohol and drug abuse. Existing law also provides for the certification and regulation of adult alcoholism or drug abuse recovery and treatment programs by the department and authorizes the department to enforce those provisions. Existing law requires the department's death investigation policy to be designed to ensure that a resident's death is addressed and investigated by the department in a timely manner, and requires specified procedures if a death occurs in a licensed facility, including requiring a written report related to the death that includes a description of the followup action that is planned to prevent a future death. Existing law requires that report to be submitted to the department within 7 calendar days of the event or incident.

This bill, John's Law, would additionally require a facility to submit to the department, within 30 days of the initial incident, any relevant information that was not known at the time of the initial incident. If the department identifies any violations of specified licensing provisions during its investigation of a resident's death, the bill would require the department to issue a written notice of deficiency to the facility. The bill would authorize the department to implement, interpret, or make specific these provisions through the use of all-county letters, provider bulletins, or similar instructions without taking any further regulatory action.

Vote: majority Appropriation: no Fiscal Committee: yes Local Program: no

THE PEOPLE OF THE STATE OF CALIFORNIA DO ENACT AS FOLLOWS:

SECTION 1. This act shall be known, and may be cited, as John's Law.

SEC. 2. Section 11830.01 of the Health and Safety Code is amended to read:

11830.01. (a) The department's death investigation policy shall be designed to ensure that a resident's death is addressed and investigated by the department in a timely manner.

(b) The telephonic and written reports of resident deaths occurring in a licensed facility that are required to be reported to the department shall include, but not be limited to, a description of the event or incident, including the time, location, and nature of the event or incident, a list of immediate actions that were taken, including persons contacted, and a description of the followup action that is planned, including, but not limited to, steps taken to prevent a future death.

(c) A telephonic report required under subdivision (b), which includes the event or incident and all information required under subdivision (b) that is known at the time of the report, shall be submitted to the department within one working day of the event or incident.

(d) A written report required under subdivision (b), which includes all information required under subdivision (b), shall be submitted to the department within seven calendar days of the event or incident.

(e) A licensed facility shall submit to the department, within 30 days of the initial incident, any relevant information that was not known at the time of the initial incident.

(f) If the department identifies any violations of Chapter 7.5 (commencing with Section 11834.01) or any regulations adopted thereunder during its investigation of a resident's death, the department shall issue a written notice of deficiency to the facility. In the notice of deficiency, the department shall specify instructions to address any violations, including, but not limited to, the timeframe to respond to deficiencies.

(g) Notwithstanding Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code, the department may implement, interpret, or make specific this section through the use of all-county letters, provider bulletins, or similar instructions without taking any further regulatory action.