### Laura's Law

Laura's Law allows judges to order a small group of the most seriously ill and problematic to stay in treatment as a condition of staying in the community. Only 1500 to 3,800<sup>1</sup> Californians would be eligible for Laura's Law.

# They are the sickest. They already failed on voluntary treatment. Must meet ALL these:

- The person has already been hospitalized or incarcerated because of mental illness twice within the last 36 months or committed more acts of violence or threats within last 48 months
- Was already offered voluntary treatment but continues to fail to engage in it.
- Condition is substantially deteriorating.
- is unlikely to survive safely in the community without supervision.
- Needs mandated and monitored treatment (LL) to prevent a relapse or deterioration that would result in grave disability or serious harm to self or others

# AOT (Laura's Law) works (and saves money<sup>2</sup>) in every state that tried it, including CA: Reduction in harmful events when Laura's Law implemented in Nevada County

Key Indicator	Pre-AOT	Post-AOT	Improvement
Hospitalization	1404 days	748 days	46.7%
Incarceration	1824 days	637 days	65.1%
Homelessness	4224 days	1898 days	61.9%
Emergency Contacts	220 contacts	123 contacts	44.1%

### Reduction in harmful events when Laura's Law implemented in Los Angeles County

Key Indicator	Percentage Decrease
Incarceration	Reduced 78%
Hospitalization	Reduced 86%
Hospitalization after AOT ended	Reduced 77%
Milestones of Recovery Scores	Increased

#### Reduction in costs when Laura's Law implemented in Nevada County (\$1.81 for ever dollar spent)

Key Indicator	Pre-AOT	Post-AOT	Improvement
Hospitalization	\$346,950	\$133,650	\$213,300
Incarceration	\$78,150	\$2,550	75,600

## MAJOR PROBLEMS WITH LAURAS LAW THAT SHOULD BE FIXED.

#### 1. Issues preventing counties from implementing.

- LL prohibits counties from cutting failed useless programs to fund LL
- Can be read to require needless planning and to exclude LL recipients from already existing MHSA funded services (9 CCR § 3400)
- Can be read to require counties to deliver services needed by the sickest to everyone
- Sunsets
- MHSA funds going to Disability Rights CA & MHA to threaten counties that implement.
- Requires BOS to vote

#### 2. Issues that would make LL better but have not prevented counties from implementing

- LL only allows MH Director to petition. No appeal mechanism for family.
- Does not allow hospitals discharging involuntarily committed to petition directly
- No mandatory evaluation of discharged patients or 5150d patients for inclusion
- Clarify CA law allows information disclosures that are needed to facilitate evaluation/petitioning

# AB 59 (Waldron 12/2014) and AB 1193 (Eggman 3/15) remove requirement for supervisors to vote

<sup>&</sup>lt;sup>1</sup> Contra Costa Health Services did a detailed analysis of the records of residents and found 37 would be eligible for Laura's Law. Prorated statewide, 1,407 individuals would be eligible. Orange County Health Care Agency estimated 1 in 25,000 OC residents would be eligible. Prorated statewide, 1,520 Californians would be eligible. San Diego Supervisor Dave Roberts estimated 150 San Diegans would be eligible for Laura's Law. Prorated statewide, 1,850 would be eligible. Los Angeles estimated they need 300 AOT slots. Prorated statewide, 3,800 would be eligible.

<sup>&</sup>lt;sup>2</sup> Increases in community care costs are more than offset by reduced incarceration and hospitalization. The largest study found it cuts net costs 50% when calculated separately for urban and rural/suburban localities. This is not 'funny-money' (ex. lost productivity/wages, fixed costs, etc.)