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## MOTION BY SUPERVISOR KATHRYN BARGER

April 4, 2017

## Standard of Care for the Mentally III

On March 7, 2017, Los Angeles County residents passed Measure H; a quarter cent sales tax over a ten year period to provide essential resources to address the County's homeless crisis. The passage of this measure is a tremendous step forward in the County's fight against homelessness.

The most challenging obstacle that the County faces over the next ten years is the issue of chronic homelessness. Chronic homelessness is the face of the County's homelessness crisis. The term "chronic" attaches a distinct definition to homelessness, involving either long-term and/or repeated bouts of homelessness coupled with a physical and/or mental disability. Those that are chronically homeless are our most vulnerable population in need of treatment and care.

Within the County's chronically homeless population there is a significant segment of individuals that refuse any kind of treatment and/or care. Although they refuse care, it is apparent that they are in desperate need of treatment and unable to make a conscious decision to seek or accept proper treatment and provide for basic personal needs (such as food, clothing, and shelter). This presents a significant truth; he or she is a danger to themselves.

Section 5150 of the California Welfare and Institutions Code authorizes a qualified officer or clinician to involuntarily confine a person suspected to have a mental disorder that makes him or her a danger to him-or herself, a danger to others, and/or is *gravely disabled*. The hold duration is allotted for up to a 72 hour period, a time span in which it

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is impossible to provide meaningful treatment to someone that is facing severe mental disability. After a 72 hour hold the individual is back on the streets and concludes that treatment is ineffective thus, increasing their resistance to treatment in the future. This treatment option is, in many cases, vastly insufficient.

The lack of mental healthcare beyond a temporary emergency hold has been realized in other states as well. For example, in early 2014, Virginia State Senator Creigh Deeds (D-Bath) introduced legislation to address the lack of treatment beyond an emergency temporary hold. Virginia Senate Bill 260 directed the Department of Behavioral Health and Developmental Services to establish an acute psychiatric bed registry that provides real-time information on the availability of beds in public and private psychiatric facilities and residential crisis stabilization units for individuals who meet the criteria for temporary hold and are in need of extended care. This legislation was authored by Senator Deeds after his son committed suicide following his release from a temporary emergency hold order. Virginia's SB 260 ultimately passed and was signed into law by the Governor.

There needs to be a higher standard of mental healthcare. With a short ten year window to address homelessness using Measure H funds, the County must review and revisit the application of California Lanterman-Petris-Short Act to ensure that we have requisite authority to provide care for those who are suffering from mental illness and are unwilling and/or incapable of accepting care.

I, THEREFORE, MOVE that the Board of Supervisors direct County Counsel to work with the Department of Mental Health to provide a legal analysis, interpretation, and application of all existing State Mental Health Laws, along with recommendations on ways the County can achieve requisite authority to provide humane treatment for those who are suffering from mental illness and are unwilling and/or incapable of accepting care. The analysis should include recommendations for amendments to existing laws, if necessary, and report back in 45 days.

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