ALCOHOL, DRUG AND MENTAL HEALTH SERVICES
POLICY AND PROCEDURE

Section CRISIS SYSTEMS
Policy 5150/5585 Application and Placement
Policy # 1.003

Director's Approval
Assistant Director's Approval
Form Ref. CS-1.003
Authority: WIC §5150-5155; WIC §5585-5585.59; HSC §1799.111; People v. Triplett (1983)
Supersedes: 5150 Evaluations

1. PURPOSE

1.1. To guide designated staff of Alcohol, Drug and Mental Health Services (ADMHS) on the completion of 5150/5585 applications and placement for involuntary hospitalization for the purpose of psychiatric evaluation and treatment in Santa Barbara County.

2. DEFINITIONS


2.2. Lanterman-Petris-Short Act (LPS Act) – the California law governing involuntary civil commitment for psychiatric treatment.

2.3. LPS-designated facility – an inpatient psychiatric facility\(^1\) designated by the County and approved by the California Department of Health Care Services (DHCS) as an inpatient facility for 72-hour evaluation and treatment. The emergency room (ER) is not an LPS-designated facility.

2.4. 5150 Application/MH-302 – the application (see Attachment A) for placement in an LPS-designated facility.

\(^1\) Currently, the Santa Barbara County Psychiatric Health Facility (PHF) is the only LPS-designated facility in the county.
2.5. **Probable cause** – established by the presence of facts that would lead a person of ordinary care and prudence to believe, or to entertain a strong suspicion, that the person detained is mentally disordered, and due to the mental disorder, is a danger to self, a danger to others, and/or gravely disabled. Probable cause requires some objective, verifiable evidence of dangerousness or grave disability.

2.6. **Designated staff** – personnel formally trained and authorized by ADMHS to conduct crisis assessments and determine an individual’s need for involuntary hospitalization.

3. **POLICY**

3.1. Only individuals who satisfy probable cause will be detained by the 5150/5585 hold process.

3.2. The time period of involuntary detention authorized by WIC 5150/5585 begins as soon as an individual is involuntarily detained\(^2\) for evaluation and crisis intervention or placed in a designated facility for evaluation and treatment.

3.3. When a 5150/5585 hold is initiated, designated staff will make every effort to place the individual in an LPS-designated facility within 24 hours.

3.4. Designated staff will ensure consistent monitoring and re-evaluation of individuals on a 5150/5585 hold while they await placement.

3.5. Individuals on a 5150/5585 will be re-evaluated in-person at least every 24 hours.

3.6. In general, a crisis situation does not grant designated staff the authority to release information to persons not associated with treatment of the individual unless a Release of Information (ROI) or verbal consent exists. If the individual demonstrates capacity to provide or deny consent, designated staff will adhere to the individual’s preference.

4. **COMPLETING THE APPLICATION**

4.1. The 5150/5585 application must be completed according to instructions in MH-302 (see Attachment A), WIC codes 5150-5155 and 5585-5585.59, and the Santa Barbara County ADMHS 5150/5585 training process.

4.2. In order to legally disclose disposition and weapons information to law enforcement, ADMHS designated staff must check the applicable notification boxes located at the bottom of the 5150/5585 application.

4.3. All face-to-face visits between the detained individual and designated staff must be fully documented in the electronic medical record within 24 hours.

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\(^2\) Per Senate Bill 916 (January 1st, 2008), hospital emergency rooms may detain individuals for up to 24 hours while emergency room staff seek a psychiatric bed LPS-designated facility for the individual.
4.4. The original 5150/5585 application must stay with the individual.

4.5. A copy of the 5150/5585 application will be scanned and emailed or faxed to the ADMHS Quality Care Management (QCM) division.

5. PROCEDURE FOR INDIVIDUALS AWAITING PLACEMENT

5.1. Individuals who are identified to have complex psychiatric, behavioral or medical needs, or resource limitations, will be discussed on a daily basis.

5.2. If an LPS-designated facility is not identified within the first 24 hours, the following personnel may be requested to participate in the daily discussion:
   1. Responding Mobile Crisis Worker
   2. Regional Mobile Crisis Team Supervisor
   3. The individual’s outpatient caseworker or clinician (if currently being treated within ADMHS)
   4. PHF Medical Director
   5. All Regional Managers (Santa Barbara, Santa Maria and Lompoc).
   6. QCM representative

5.3. If an LPS-designated facility is not identified at the 48-hour mark, a representative from Fiscal, the ADMHS Medical Director, and all personnel listed in section 5.2 may be requested to participate in the daily discussion.

5.4. Prior to the 72-hour mark, if an LPS-designated facility is not identified or available, the ADMHS Medical Director or a designee will conduct a clinical case review to determine the least-restrictive and safest plan for the individual and the community.

5.5. Alternative placement locations, such as crisis residential facilities, crisis stabilization units (CSU), shelters, room and board facilities, motel rooms, or family residences, as individual client resources are available, shall be considered as temporary placement on a voluntary basis for individuals for whom placement in an LPS-designated facility is not indicated. If this option is deemed appropriate, the individual will be released from the involuntary hold to facilitate voluntary placement planning.

5.6. ADMHS regional Triage Teams will arrange to check-in on such individuals in temporary placement to monitor whether the individual stabilizes or decompensates and again demonstrates criteria for 5150/5585 placement. In the event the individual decompensates, a 5150/5585 application will be completed as set forth in sections 4.1-4.5 of this policy.
6. RESPONSE ON WEEKENDS AND HOLIDAYS

6.1. The Mobile Crisis Team will contact the ADMHS Medical Director or a designee every Friday to report any holds that will be expiring during the weekend.

6.2. On weekends and holidays, the on-call Mobile Crisis Worker and on-call administrator will participate in the daily discussion.

6.3. If an individual’s hold is close to or has reached the 48-hour mark, a Mobile Crisis worker from the regional team will contact the ADMHS Medical Director or a designee to participate in the daily discussion.

7. DOCUMENTATION

7.1. For individuals awaiting placement, a client status update will be documented daily in the electronic medical record that will include:

1. Names of facilities that have been contacted, and the facility response (e.g. have not heard back, pending, declined).

2. If pending, the details (bed may be available the next day, need additional info, etc.).

3. If declined, the rationale (facility at capacity, individual too violent, etc.).

4. Why alternative or less restrictive crisis resources are not appropriate (e.g. crisis residential service).

8. STATUS REPORT

8.1. The Mobile Crisis Team Supervisor or designee for each region will submit a status report via email on current holds and related issues to the incoming overnight on-call administrator no later than 5 PM Monday through Friday.

8.2. If any issues not easily resolved arise overnight, the on-call administrator will participate in the triage call or submit a status report via email to the triage call distribution list.
PLACEMENT PROCEDURES – The team responsible for coordinating placement of an individual will complete the following procedures:

9. ADULTS (MEDI-CAL, MEDICARE AND UNINSURED ONLY)
   9.1. Contact the Psychiatric Health Facility (PHF) and speak with the charge nurse to confirm bed availability.
   9.2. If a PHF bed is available, forward the 5150 packet to the PHF for review.
   9.3. If the PHF cannot accept the individual due to clinical/medical reasons, or does not have a bed available, submit a referral to Vista del Mar (VDM) (Medi-Cal and uninsured) or to Hillmont (Medi-Cal only).
   9.4. In situations in which potential detox from substances is clearly evident, review the case with the on-call psychiatrist for approval to refer to VDM or Hillmont in lieu of the PHF.

10. JAIL (IN-CUSTODY INMATES)
   10.1. Per state law, Santa Barbara County Jail inmates can only be placed in a psychiatric hospital located in Santa Barbara County.
   10.2. If the PHF has a bed available, coordinate with the Sheriff for a medical clearance at the ER. In the event there is no bed, a 5150 should not be written. ADMHS Justice Alliance staff will monitor the individual at the jail until a bed can be attained or until no longer necessary.
   10.3. If a medical clearance is not obtained, the case will be discussed with the PHF or ADMHS Medical Director.

11. CHILDREN/ADOLESCENTS (UNDER 18)
   11.1. Review available insurance resources and refer the child/adolescent to the appropriate facility.
   11.2. In the event the child/adolescent is uninsured, submit a referral to VDM first before considering other facilities.
PLACEMENT PROCEDURES – The team responsible for coordinating placement of an individual will complete the following procedures:

12. PRIVATE INSURANCE
   12.1. Make every effort to confirm the validity of the individual’s private insurance.
   12.2. Refer the individual to out-of-county facilities that will consider his or her private insurance (including VDM).
   12.3. VDM may request a guarantee of payment due to the possibility of the individual’s private insurance not covering his or her admission. In these situations, staff cannot independently guarantee payment or make any other similar commitments.
   12.4. Should VDM seek a guarantee of payment, submit the request to the responsible Regional Manager (during business hours) or the on-call Administrator for approval.

13. VA INSURANCE
   13.1. Submit a referral to VA hospitals for admission.
   13.2. If a VA hospital cannot be identified (i.e. at capacity, admission denied, etc.), contact the responsible Regional Manager (during business hours) or the on-call Administrator for direction.
ASSISTANCE
Dr. Ole Behrendtsen, MD, ADMHS Medical Director
Laura Zeitz, RN, Crisis Systems Manager
Andrew Vesper, LCSW, Regional Manager
Deana Huddleston, MFT, Regional Manager
Sandy Fahey, MFT, Regional Manager
Crisis Action Team

REFERENCE
California Welfare and Institutions Code – Community Mental Health Services
Part 1, Chapter 2, Sections 5150-5155
Part 1.5, Chapter 1, Section 5585-5585.59

People v. Triplett (1983) 144 Cal.App.3d 283, 192 Cal.Rptr. 537
Establishing “Probable Cause”

California Health and Safety Code – Emergency Medical Services
Division 2.5, Chapter 9, Section 1799.111

ATTACHMENTS
Attachment A - 5150 Application (DHCS MH-302)

REVISION RECORD

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<tr>
<th>DATE</th>
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<th>REVISION DESCRIPTION</th>
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Santa Barbara County Alcohol, Drug and Mental Health Services Office of Strategy Management
### Attachment A

State of California  
Health and Human Services Agency  

<table>
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<tr>
<th>APPLICATION FOR ASSESSMENT, EVALUATION, AND CRISIS INTERVENTION OR PLACEMENT FOR EVALUATION AND TREATMENT</th>
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| Confidential Client/Patient Information  
See California W&I Code Section 5328 and HIPAA Privacy Rule  
45 C.F.R. § 164.508 |

Welfare and Institutions Code (W&I Code), Section 5150(f) and (g), require that each person, when first detained for psychiatric evaluation, be given certain specific information orally and a record be kept of the advisement by the evaluating facility.

- [ ] Advisement Complete  
- [ ] Advisement Incomplete

Good Cause for Incomplete Advisement:

-  
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<th>DETAINMENT ADVISEMENT</th>
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| My name is ____________  
I am a (peace officer/mental health professional) with (name of agency).  
You are not under criminal arrest, but I am taking you for examination by mental health professionals at (name of facility).  
You will be told your rights by the mental health staff.  
If taken into custody at his or her residence, the person shall also be told the following information:  
You may bring a few personal items with you, which I will have to approve. Please inform me if you need assistance turning off any appliance or water. You may make a phone call and leave a note to tell your friends or family where you have been taken. |

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<th>Advisement Completed By:</th>
<th>Position:</th>
<th>Language or Modality Used:</th>
<th>Date of Advisement:</th>
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To (name of 5150 designated facility):

Application is hereby made for the assessment and evaluation of ______________ residing at ______________, California, for up to 72-hour assessment, evaluation and crisis intervention or placement for evaluation and treatment at a designated facility pursuant to Section 5150, et seq. (adult) or Section 5585 et seq. (minor), of the W&I Code. If a minor, authorization for voluntary treatment is not available and to the best of my knowledge, the legally responsible party appears to be / is:  
- [ ] Parent;  
- [ ] Legal Guardian;  
- [ ] Conservator;  
- [ ] Juvenile Court under W&I Code 300;  
- [ ] Juvenile Court under W&I Code 601/602.

If known, provide names, address and telephone numbers in area provided below:
The above person’s condition was called to my attention under the following circumstances:

-  
-  
-  
-  

I have probable cause to believe that the person is, as a result of a mental health disorder, a danger to others, or to himself/herself, or gravely disabled because: (state specific facts):

-  
-  
-  

((CONTINUED ON NEXT PAGE)
APPLICATION FOR 72 HOUR DETENTION FOR EVALUATION AND TREATMENT (CONTINUED)

Historical course of the person’s mental disorder:

☐ I have considered the historical course of the person’s mental disorder

☐ No reasonable bearing on determination

☐ No information available because:________________________________________

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<th>History Provided by (Name)</th>
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<th>Relation</th>
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Based upon the above information, there is probable cause to believe that said person is, as a result of mental health disorder:

☐ A danger to himself / herself. ☐ Gravely disabled adult.

☐ A danger to others. ☐ Gravely disabled minor.

Signature, title and badge number of peace officer, professional person in charge of the facility designated by the county for evaluation and treatment, member of the attending staff, designated members of a mobile crisis team, or professional person designated by the county:

Date: ___________________ Phone: ___________________

Time: ___________________

X

Name of Law Enforcement Agency or Evaluation Facility/Person: __________________________

Address of Law Enforcement Agency or Evaluation Facility/Person: __________________________

NOTIFICATIONS TO BE PROVIDED TO LAW ENFORCEMENT AGENCY

Notify (officer/unit & telephone #): __________________________

NOTIFICATION OF PERSON’S RELEASE IS REQUESTED BY THE REFERRING PEACE OFFICER BECAUSE:

☐ The person has been referred to the facility under circumstances which, based upon an allegation of facts regarding actions witnessed by the officer or another person, would support the filing of a criminal complaint.

☐ Weapon was confiscated pursuant to Section 8102 W&I Code. Upon release, facility is required to provide notice to the person regarding the procedure to obtain return of any confiscated firearm pursuant to Section 8102 W&I Code.

SEE SUBSEQUENT PAGES FOR DEFINITIONS AND REFERENCES
State of California
Health and Human Services Agency

DEFINITIONS AND REFERENCES

"Gravely Disabled" means a condition in which a person, as a result of a mental health disorder, is unable to provide for his or her basic personal needs for food, clothing and shelter. SECTION 5008(h) W&I Code

"Gravely Disabled Minor" means a minor who, as a result of a mental disorder, is unable to use the elements of life which are essential to health, safety, and development, including food, clothing, and shelter, even though provided to the minor by others. Intellectual disability, epilepsy, or other developmental disabilities, alcoholism, other drug abuse, or repeated antisocial behavior do not, by themselves, constitute a mental disorder. SECTION 5585.25 W&I Code

"Peace officer" means a duly sworn peace officer as that term is defined in Chapter 4.5 (commencing with Section 830) of Title 3 of Part 2 of the Penal Code who has completed the basic training course established by the Commission on Peace Officer Standards and Training, or any parole officer or probation officer specified in Section 830.5 of the Penal Code when acting in relation to cases for which he or she has a legally mandated responsibility. SECTION 5008(i) W&I Code

Section 5152.1 W&I Code: The professional person in charge of the facility providing 72-hour evaluation and treatment, or his or her designee, shall notify the county mental health director or the director's designee and the peace officer who makes the written application pursuant to Section 5150 or a person who is designated by the law enforcement agency that employs the peace officer, when the person has been released after 72-hour detention, when the person is not detained, or when the person is released before the full period of allowable 72-hour detention if all of the conditions apply:

(a) The peace officer requests such notification at the time he or she makes the application and the peace officer certifies at that time in writing that the person has been referred to the facility under circumstances which, based upon an allegation of facts regarding actions witnessed by the officer or another person, would support the filing of a criminal complaint.

(b) The notice is limited to the person’s name, address, date of admission for 72-hour evaluation and treatment, and date of release.

If a police officer, law enforcement agency, or designee of the law enforcement agency, possesses any record of information obtained pursuant to the notification requirements of this section, the officer, agency, or designee shall destroy that record two years after receipt of notification.

Section 5150.05 W&I Code:

(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.

(b) For purposes of this section, "information about the historical course of the person's mental disorder" includes evidence presented by the person who has provided or is providing mental health or related support services to the person subject to a determination described in subdivision (a), evidence presented by one or more members of the family of that person, and evidence presented by the person subject to a determination described in subdivision (a) or anyone designated by that person.

(c) If the probable cause in subdivision (a) is based on the statement of a person other than the one authorized to take the person into custody pursuant to Section 5150, a member of the attending staff, or a professional person, the person making the statement shall be liable in a civil action for intentionally giving any statement that he or she knows to be false.

(d) This section shall not be applied to limit the application of Section 5328.
State of California
Health and Human Services Agency

Department of Health Care Services

DEFINITIONS AND REFERENCES (CONTINUED)

**Section 5152.2 W&I Code:** Each law enforcement agency within a county shall arrange with the county mental health director a method for giving prompt notification to peace officer pursuant to Section 5152.1 W&I Code.

**Section 5585.50 W&I Code:** The facility shall make every effort to notify the minor’s parent or legal guardian as soon as possible after the minor is detained. *Section 5585.50 W&I Code.*

A minor under the jurisdiction of the Juvenile Court under Section 300 W&I Code is due to abuse, neglect, or exploitation.

A minor under the jurisdiction of the Juvenile Court under Section 601 W&I Code is due to being adjudged a ward of the court as a result of being out of parental control.

A minor under the jurisdiction of the Juvenile Court under Section 602 W&I Code is due to being adjudged a ward of the court because of crimes committed.

**Section 8102 W&I Code (EXCERPTS FROM):**

(a) Whenever a person who has been detained or apprehended for examination of his or her mental condition or who is a person described in Section 8100 or 8103, is found to own, have in his or her possession or under his or her control, any firearm whatsoever, or any other deadly weapon, the firearm or other deadly weapon shall be confiscated by any law enforcement agency or peace officer, who shall retain custody of the firearm or other deadly weapon. “Deadly weapon,” as used in this section, has the meaning prescribed by Section 8100.

(b)(1) Upon confiscation of any firearm or other deadly weapon from a person who has been detained or apprehended for examination of his or her mental condition, the peace officer or law enforcement agency shall issue a receipt describing the deadly weapon or any firearm and listing any serial number or other identification on the firearm and shall notify the person of the procedure for the return, sale, transfer, or destruction of any firearm or other deadly weapon which has been confiscated. A peace officer or law enforcement agency that provides the receipt and notification described in Section 33800 of the Penal Code satisfies the receipt and notice requirements.

(2) If the person is released, the professional person in charge of the facility, or his or her designee, shall notify the person of the procedure for the return of any firearm or other deadly weapon which may have been confiscated.

(3) Health facility personnel shall notify the confiscating law enforcement agency upon release of the detained person, and shall make a notation to the effect that the facility provided the required notice to the person regarding the procedure to obtain return of any confiscated firearm.