

# Sacramento County Mental Health Board Adult System of Care (ASOC) Meeting

## MINUTES – IN PERSON MEETING HYBRID PARTICIPATION OPTION

Monday, June 3, 2024  
6:00 PM – 7:30 PM

Members Present: Patricia Wentzel, Brad Lueth, Mallika Walsh, Melinda Avey (staff: Korlany Roche)

Members Absent: Laura Bemis

### Agenda Item

#### I. Welcome and Introductions

- Introductions
- Acknowledgement of [Conduct Agreement](#)
- Announcements by MHB ASOC Committee Members

Chair Wentzel commenced the meeting at 6:10pm, introductions were made and Conduct Agreement acknowledged.

No announcements were made.

#### II. Public Comments Relating to the Sacramento County Behavioral Health Services Adult System of Care – Items Not on Agenda

- Public Comment #1: Dana (BHS) announced that they are working on integrating their Access line and System of Care line into one integrated front door to BHS. Dana will include the survey link in the minutes to vote on the name for this new integrated system. **Integrated Access and System of Care Name Survey Link:** <https://www.surveymonkey.com/r/KTMDJGR>

#### III. Presentation on SB43 Implementation Followed by Questions From Members

- Presentation by Dana Sebastian, BHS Health Program Manager. See attached presentation.
- Presentation included: overview of SB43, implementation timeline, workgroups, current action items, future action items, priorities, and anticipated challenges.

##### Member Comments/Questions:

- Member Lueth asked about law enforcement and how the decision will be made and possibly taking the redirection into voluntary care. Typically in those interactions with law enforcement LE, are they going to be given information and the ability to give resources to voluntary care instead of 5150? Dana: will provide a workflow of how to provide resources for these situations. We'd like to implement a two-pronged approach where the LE officer may do the 5150 application and it will be up to the ER to certify the hold. We want to make the process as concrete as possible, with step-by-step instructions.
- Chair Wentzel asked whether hospitals will have access to previous records so that they can make decisions? Dana: not to our EHR but we have the ability to call into our ACCESS line or MHTC. In 2027, we will have an information exchange system for counties and providers. We are also trying to determine how to differentiate grave disability due to substance use.
- Member Lueth: regarding data and making in-the-moment decisions, how is LE going to know that the individual has been hospitalized in the past and has previous interaction with BHS? That would be important information to have and make decisions.
- Member Walsh asked whether the LPS conservatorship would be longer with temporary conservatorship. Will it be 72 hours initially? Dana: yes, it will be the same process as if it were co-occurring but adding that eligibility criteria. Member Walsh explained that if a member is in acute crisis and placed on a 5150, if it is primarily due to substance use disorder, it may not go to temporary conservatorship and will most likely be discharged after that acute phase. Using severe substance use and the DSM classification but being retained and held on the new definition, people will most likely be discharged or released within 3 days. Dana: we are trying to determine which population this will affect and the types of scenarios. The population that will meet this criteria is very small and trying to put this

legislation in place so that this population does not fall through the cracks. Member Walsh expressed concern that people who are writing the applications are non-clinical and it will be up to the behavioral health or medical clinic to write the hold and certify it. Will these LE be certified by Sacramento County to write the hold? Dana: we have to follow the guidelines on the BHIN, and people who can write 5150s will be based on their credentialing. We are providing training on how to write the application and wait on the clinical person to certify the 5150.

- Member Walsh inquired about joining the workgroup. Dana will include her contact in the minutes: [SebastianD@sacounty.gov](mailto:SebastianD@sacounty.gov). The statewide workgroup is mainly for directors but can look into the hospital workgroup. Chair Wentzel shared we already have MHB representation at the hospital workgroup.
- Member Avey would like to know how sobering centers will play a part of the solution. Hospital ERs are in a panic and afraid they cannot absorb this number of people. Dana: what we are hoping is based on what we already know about people placed on 5150 that are actively using, they do take a couple of days to metabolize. We get a phenomenon where we place them on hold and the hold is broken because they no longer meet criteria – if they're amenable to going to a sober center, we're hoping to reduce the quickness of the in and out and reserve their rights.
- Chair Wentzel would like to ask Dana to come back in September to provide updates and how things are going at that point. There are tremendous concerns about those who are only presenting with substance use disorder issues. I have concerns that there is an expansion of the GD definition for people who cannot maintain their safety that are not being dealt with under the current GD concerns. Dana: these concerns have been raised and shared, we will want further clarity on the law from the state. We want to make sure to get patients' rights advocates involved. Currently we are focusing on substance use disorder and trying to put in place the facilities to meet the needs of this population. Chair Wentzel shared the importance of bringing in the particular perspective of patients' rights advocates since there is more than one way of looking at involuntary treatment for people who have severe medical conditions. Dana: that is a great point, we are trying to figure out the line between probate conservatorship for medical issues and determining whether it's a co-occurring medical and mental health issue. We need to discern when things fall under probate and LPS conservatorship issues.
- Member Avey thanked Dana for the information, it is important we respect people's rights. Some people need to be held against their will, but a lot of people don't. With substance use, if you're under the influence, you can be considered as GD, if you're drunk or high enough, in the moment you are GD according to the definition but they shouldn't be conserved or on a hold. We need to be cautious.
- Chair Wentzel thanked Dana for presentation and will put on the agenda in September for Dana to return and provide updates.

#### **IV. Closing Remarks by Committee Chair and discussion**

- Chair Wentzel was able to get contact information for 3 of the FSPs to do site visits (TAY, Justice Involved, and Unhoused). She will be in communication with the FSPs and is hoping to set up site visits as well as opening up the opportunity to the MHB. She will alert the members once she's established connection and will try her best to facilitate before she goes on vacation. Chair Wentzel will also determine whether site visits can be done on a Saturday to accommodate other members' schedules.
- Chair Wentzel will be on vacation the last 2 weeks of June and does not anticipate being back in time for the July meeting. Chair Wentzel will set up the agenda and ask Member Lueth to hold the meeting in her absence. She would like to continue discussing what we see as our work product, determine whether we have specific questions that are still not answered after our visits to the FSPs and given the information we receive. We can ask staff to return and provide answers.

#### **V. Adjournment**

- Next meeting will be on July 1, 2024 from 6:00pm-7:30pm
- Chair Wentzel adjourned the meeting at 6:59pm.