

# Lanterman-Petris-Short (LPS) Conservatorship in SF

*Policy Analysis Report to Supervisor Mandelman*

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Presentation to:

Public Safety & Neighborhood Services Committee

San Francisco Board of Supervisors

March 24, 2022

# Lanterman-Petris-Short (LPS) Conservatorship

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- ❑ Update to Nov. 2019 report on LPS conservatorships in SF
- ❑ State LPS Act
  - Uniform civil process for involuntary detention
    - Court determination of grave disability
      - Unable to care for basic needs
      - Severe mental illness/alcoholism (not substance use)
    - Appointment of public conservator
      - Responsible for decision making
  - Temporary and Permanent
    - Permanent re-established by Court each year

# Mental Health Conservatorships in SF

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## □ Traditional conservatorships

- Administered by Public Conservator – decision-making on behalf of individual during conservatorship
  - Individual place in appropriate (least restrictive) residential setting, or
  - Community based programs
    - Community Independence Participation Program – conserved individuals, give up right to refuse medication
    - Post-Acute Community Conservatorship – required by Court to comply with medication

# Mental Health Conservatorships in SF

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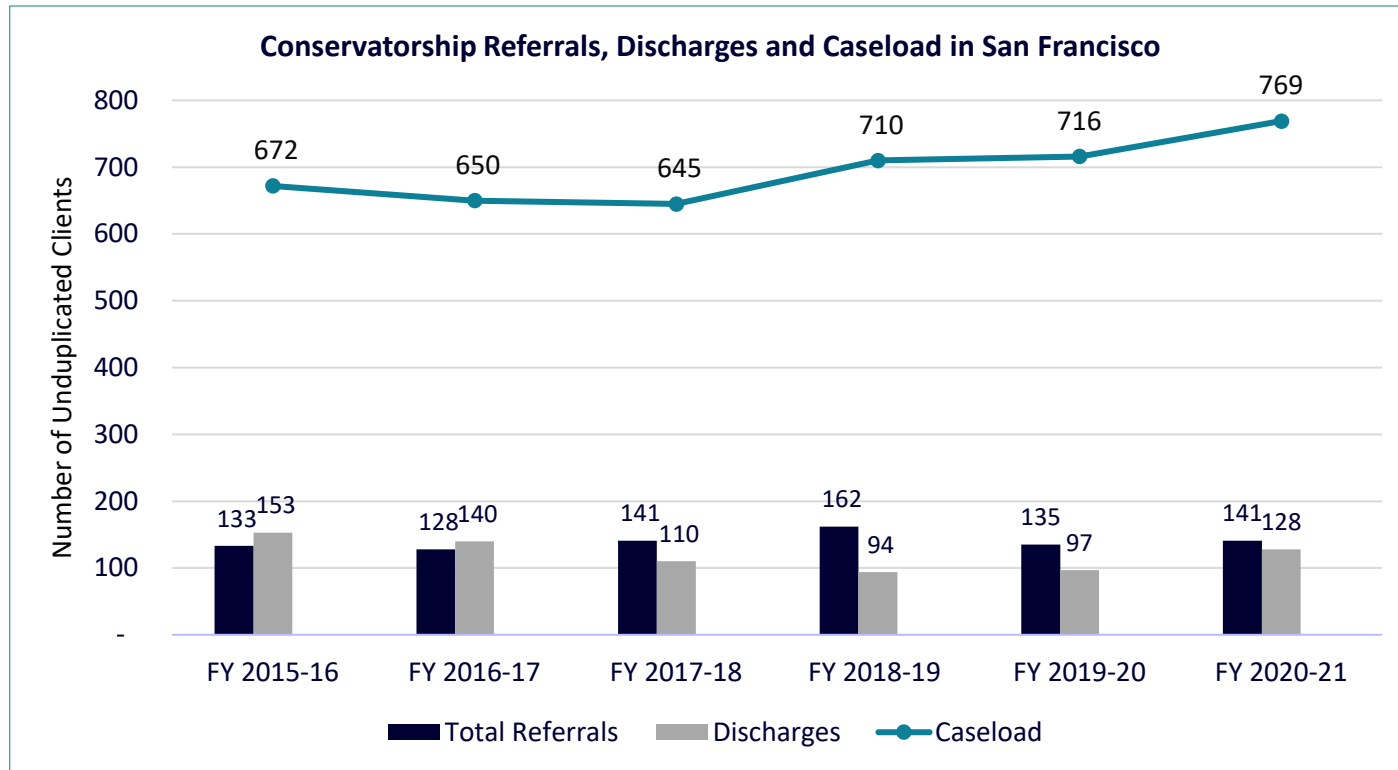
## ❑ Other mental health conservatorships

- Murphy conservatorship
  - Individuals in criminal justice system
  - Unable to understand nature of proceedings
- Housing conservatorship
  - Severe mental illness or substance use
  - At least 8 psychiatric (5150) holds in 12 months

## ❑ Outpatient referral pathway

- 2019 through June 2021 pilot
- Referrals from outpatient providers without hospitalization
- Court exercised higher level of scrutiny
  - 12 of 16 temporary conservatorship approved
  - Additional 2 approved after investigation

# LPS Conservatorships in SF – FY 2015-16 to FY 2020-21



Source: San Francisco Human Services Agency, Department of Disability & Aging Services

## ☐ Increase in caseload beginning in FY 2018-19

- FY 2017-18 - FY 2020-21 → New referrals > discharges

## State Audit Finding – Grave Disability Definition Appropriate

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### ☐ Grave disability:

- LPS Act: individuals unable to provide for basic needs
- Unhoused individuals / future likelihood of harm – does not meet grave disability definition

### ☐ State audit:

- “Grave disability” interpreted & applied similarly across SF, LA, and Shasta counties
- Revising definition – lead to increase in involuntary holds

### ☐ SF & LA – disagreed with State audit

- SF: “Room for improvement...to ensure that those with significant behavioral health needs are able to receive acute care, and not just crisis services, when in need”

## State Audit Finding – Lack of Connection to Services

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### □ Audit finding:

- “San Francisco’s lack of coordination with medical facilities has often left individuals who are released from involuntary holds without connections to county mental health treatment services”
- SF able to identify discharges from SFGH but not other inpatient psychiatric facilities

### □ SF response

- Participation in intensive outpatient services after discharge is voluntary

### □ Mental Health SF – implemented after state audit

- Office of Coordinated Care – provides case management & referrals
- Not yet able to hire sufficient staff

# Treatment on Discharge from LPS Conservatorship

- ❑ Public Conservator/Public Health:
  - Prior to discharge: appropriately housed, compliant with meds, participation in outpatient treatment
  - After discharge: case management / medication management / appropriate placement

## ❑ Patients cycle through – 58% previously conserved

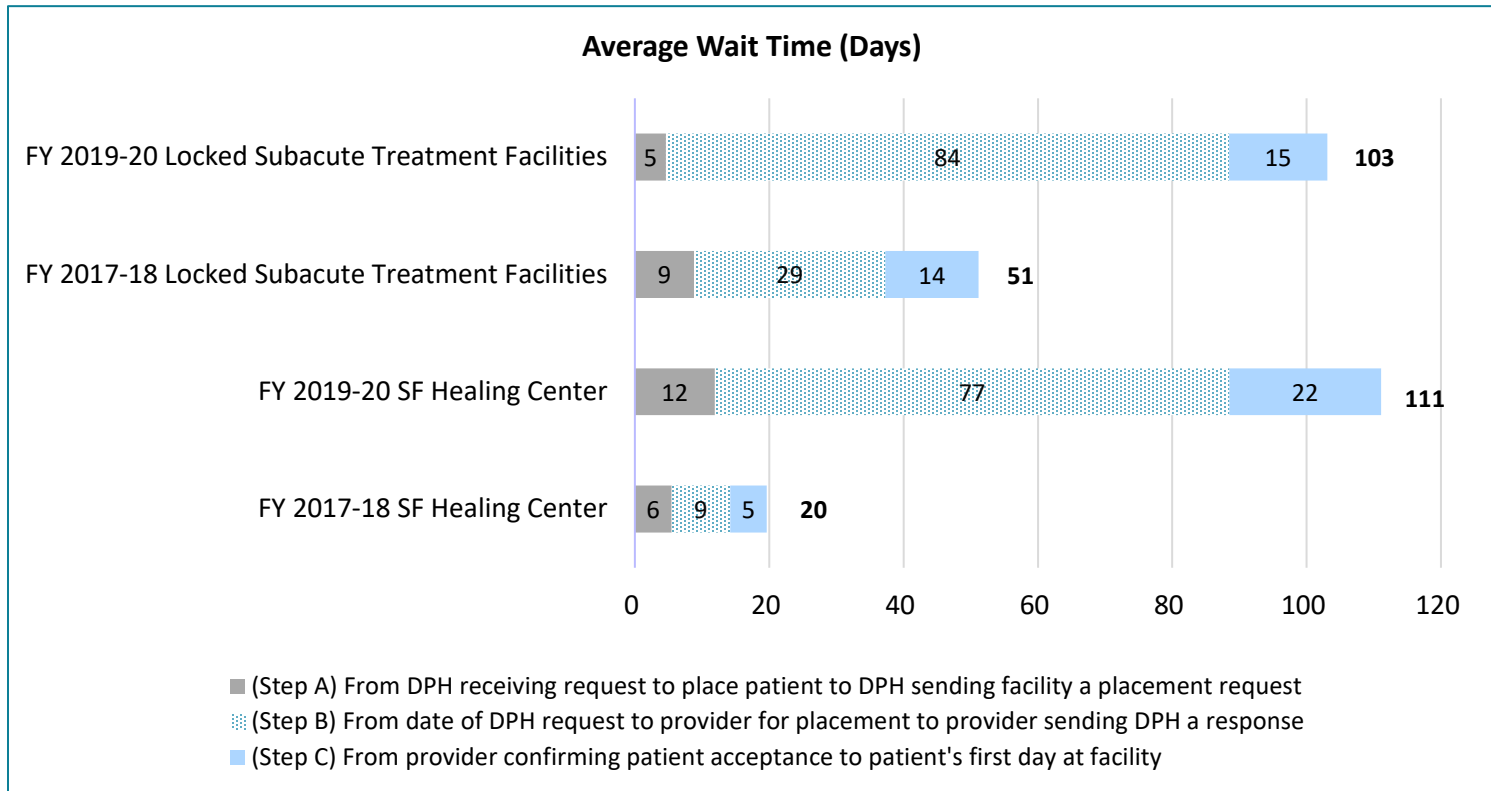
Conservatorship Episodes	Number	Percent
No previous episode	272	42%
1 previous episode	145	23%
2-5 previous episodes	167	26%
6-10 previous episodes	47	7%
10+ previous episodes	12	2%
<b>Total</b>	<b>643</b>	<b>100%</b>

Source: Public Conservator



# Need for Mental Health Beds

- ❑ Locked subacute wait time FY 2017-18 - FY 2019-20
  - Doubled for most locked subacute
  - Increased five-fold for SF Healing Center



Source: Department of Public Health

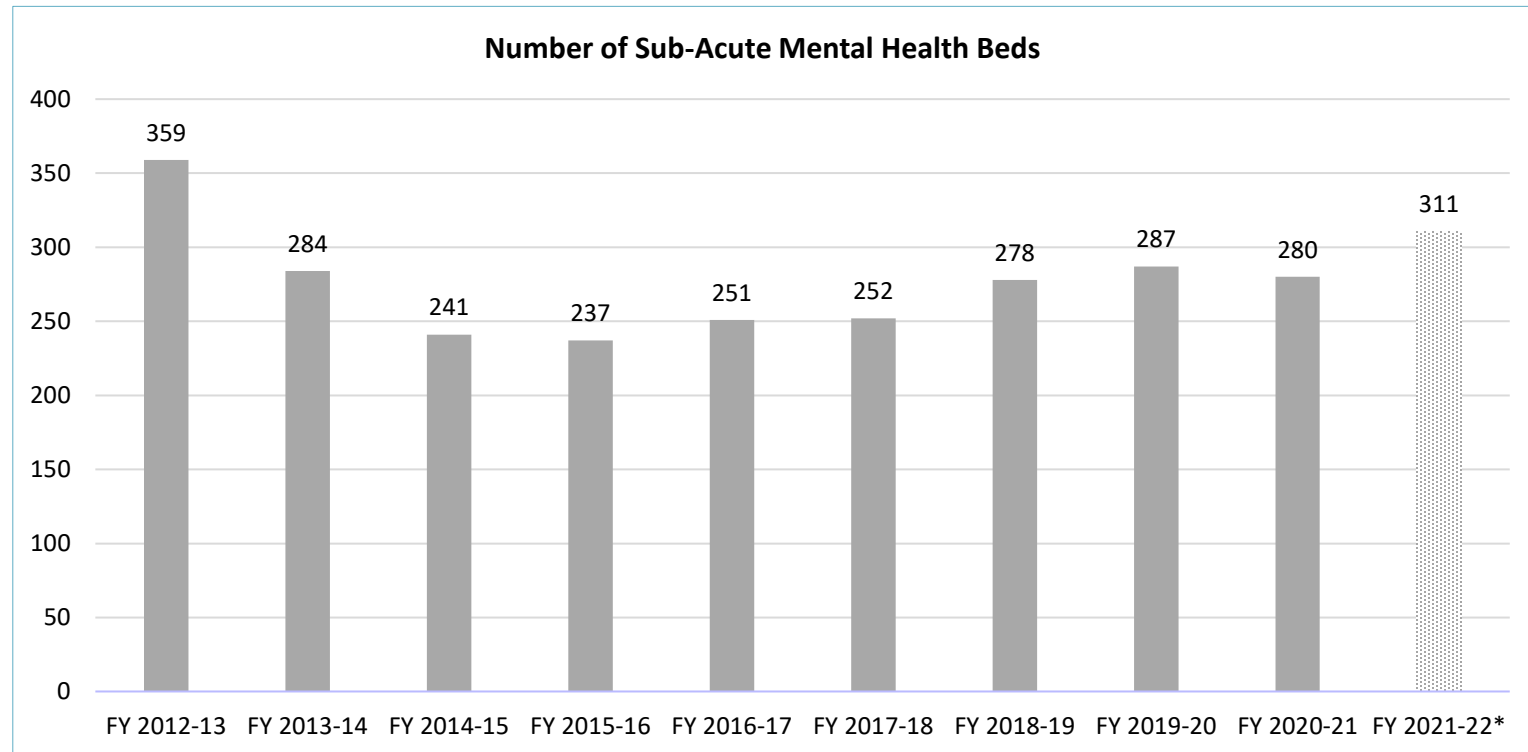
## Need for Mental Health Beds

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- ❑ Impact of shortage of beds:
  - State audit: lack of state hospital beds compromised treatment
  - Academic study: perceptions of the availability of treatment beds affected conservatorship referrals
- ❑ SF Plan: 408 new beds
  - Purchasing facility – longer process to identify & negotiate purchase
  - Contracting beds – out of county, compete with other counties

# Need for Mental Health Beds

- ❑ The 311 subacute beds in FY 2021-22 include 31 locked subacute beds to be acquired in the fiscal year; as of November 2021, 20 of the 31 locked subacute beds had been acquired



Source: Department of Public Health

## Status of New Beds FY 2021-22

- 137 planned beds appropriate for LPS Conservatorship – 40 beds opened in FY 2021-22

Bed Type	Description	Goal	Opened in FY 2021-22
<b>Psychiatric Skilled Nursing Facility</b>	Out-of-county secure 24-hour medical care	13	0
<b>Locked Subacute Treatment</b>	Out-of-county psychosocial rehabilitation, conserved in a locked setting	31	20
<b>12-month Enhanced Board and Care</b>	Pilot, out-of-county supervised living and treatment	20	20
<b>Residential Care Facility (aka Board and Care)</b>	Supervised residential program for individuals who require assistance with activities of daily living	73	0
<b>Subtotal</b>		<b>137</b>	<b>40</b>


# Policy Considerations

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## □ San Francisco FY 2015-16 to FY 2020-21

- Increase in caseload from 672 to 769
- Referrals > discharges
- Higher caseload per 10,000 than other large counties in BLA survey

## □ Population need for LPS conservatorship not known

- Grave disability condition can change
- Example of population at risk - FY 2019-20:
  - 314 higher users of emergency/urgent care services  eight – Psych Emergency admissions & three 5150 (72-hour) psych holds
  - 135 referrals to LPS Conservatorship

# Policy Considerations

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- ❑ Lack of mental health treatment beds impacts referrals to conservatorship
  - Need is locked subacute & psych skilled nursing beds
  - Of 408 planned beds – 44 or 11% are locked subacute & psych skilled nursing
  
- ❑ Recommendation: DPH presentation to BOS prior to June 2022 on the purchase / contracting of beds
  - Timelines
  - Barriers, actions to address barriers
  - Occupancy & wait times by type of beds

# Policy Considerations

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- ❑ Individuals discharged from:
  - Psychiatric holds not systematically connected to outpatient care
  - Conservatorship who decline ongoing care not systematically tracked
  
- ❑ Recommendation: DPH report to BOS on implementation:
  - State Auditor's recommendation  $\implies$  systematic approach to identify/ connect to services on release from psych holds
  - The Office of Coordinated Care
  
- ❑ Recommendation: Public Conservator/DPH MOU
  - Public Conservator: MOU is underway w/ completion in Spring 2022



# Questions and Comments

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