

**REPORT/RECOMMENDATION TO THE BOARD OF SUPERVISORS  
OF SAN BERNARDINO COUNTY  
AND RECORD OF ACTION**

**June 13, 2023**

**FROM**

**GEORGINA YOSHIOKA, Director, Department of Behavioral Health**

**SUBJECT**

**Resolution Related to Mental Health Services Assisted Outpatient Treatment**

**RECOMMENDATION(S)**

1. Rescind Resolution No. 2021-44, approved on April 6, 2021, which resulted in opting out of the requirements of Assembly Bill 1976 related to Assisted Outpatient Treatment.
2. Adopt **Resolution No. 2023-90** making certain findings to participate in Senate Bill 507 that amended Assembly Bill 1976 related to Assisted Outpatient Treatment.
3. Authorize the addition of 13 new regular positions for the Department of Behavioral Health, under the following classifications:
  - a. One Administrative Manager, Management Unit, Range 70 (\$91,250-\$125,715)
  - b. Two Business Systems Analyst II, Administrative Services Unit, Range 63, (\$76,814-\$105,726)
  - c. Two Clinical Therapist I, Professional Unit, Range 57A (\$66,498-\$96,075)
  - d. One Clinical Therapist II, Professional Unit, Range 59A (\$70,179-\$101,421)
  - e. One Mental Health Program Manager I, Management Unit, Range 66C (\$84,157-\$115,814)
  - f. Two Peer and Family Advocate III, Administrative Services Unit, Range 31 (\$35,173-\$48,360)
  - g. One Program Specialist II, Administrative Services Unit, Range 56 (\$64,813-\$89,066)
  - h. Two Social Worker II, Administrative Services Unit, Range 47 (\$52,062-\$71,427)
  - i. One Staff Analyst II, Administrative Services Unit, Range 56 (\$64,813-\$89,066)

(Presenter: Georgina Yoshioka, Director, 252-5142)

**COUNTY AND CHIEF EXECUTIVE OFFICER GOALS & OBJECTIVES**

**Promote the Countywide Vision.**

**Provide for the Safety, Health and Social Service Needs of County Residents.**

**FINANCIAL IMPACT**

This item does not impact Discretionary General Funding (Net County Cost). The Assisted Outpatient Treatment (AOT) program annual cost of \$1,789,827 will be funded by the Mental Health Services Act (MHSA). Adequate appropriation and revenue have been included in the Department of Behavioral Health's (DBH) 2022-23 budget. Approval of the necessary budget adjustments to DBH's 2023-24 recommended budget are not requested at this time but will be included in a future item presented to the Board of Supervisors (Board) for approval, and included in future recommended budgets.

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**BACKGROUND INFORMATION**

On September 25, 2020, State Assembly Bill (AB) 1976 was chaptered into law amending the current legislation associated with Assisted Outpatient Treatment (AOT), commonly known as Laura's Law, effective July 1, 2021. Specifically, as defined by California Welfare and Institutions Code (WIC) sections 5345-5349.5, Laura's Law creates an AOT program that provides court-ordered treatment (not medication) for persons with severe mental illness who meet the following criteria:

- Must be 18 years of age or older;
- Is suffering from a mental illness;
- Is unlikely to survive safely in the community without supervision;
- Has a history of lack of compliance with treatment;
- Has a substantially deteriorating condition;
- Participation in AOT would be the least restrictive placement;
- Treatment is needed to prevent relapse or deterioration that would likely result in grave disability or serious harm to self or others; and
- Benefit is expected from AOT services.

AOT provides community treatment for individuals who have a history of untreated mental illness and meet the criteria outlined above. AOT is intended to interrupt the cycle of hospitalization, incarceration, and homelessness for adults ages 18 and older who are living with serious mental illness and have been unable or unwilling to participate in mental health services on a voluntary basis.

On April 6, 2021 (Item No. 16,) the Board approved Resolution No. 2021-44 which resulted in the County opting out of the Requirements of AB 1976 related to AOT as DBH had been providing services that strongly mirrored the AOT program under Laura's Laws, including Full Services Partnerships (FSP), Specialized Mental Health Court, Recovery Based Engagement Support Teams (RBEST), Conservatorship Investigation Unit, and Forensic Integrated Mental Health Services, which are described below:

- FSP: These programs are designed to do "whatever it takes" to assist people with severe, long term mental illness. The programs did not exist when Laura's Law was passed, however, they are very similar in structure to the AOT program and are demonstrating excellent outcomes for participants.
- Specialized Mental Health Court: The Superior Court supervises intensive treatment for those whose crime has been attributed to their illness. Additionally, there are Drug Courts and a Veterans Court established in the County. Each of these specialized court programs has proven outcomes reducing recidivism and improving behavior among individuals.
- RBEST: The teams provide community (field-based) services in the form of outreach, engagement, case management services, family education, support and therapy for the most challenging diverse adult clients in the community who suffer from untreated mental illness.
- Conservatorship Investigation Unit: When an individual's mental illness creates such a grave disability that they are unable to provide for their own care, a conservatorship can be established based on specific criteria. In collaboration with the Office of the Public Guardian (OPG), DBH's conservatorship unit evaluates individuals, which under current law, allows the OPG to assume legal responsibility for an individual's finances, treatment and placement needs, including mental health services.

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- Forensic Integrated Mental Health Services: The Supervised Treatment After Release program is a voluntary program for defendants who agree to make treatment part of the terms and conditions of their probation. The Forensic Assertive Community Treatment program provides services utilizing an Assertive Community Treatment model. This model includes mental health rehabilitation services, case management, medication support, housing assistance, benefits and entitlements assistance, education and employment assistance, family support and crisis intervention 24 hours a day, 7 days a week.

Senate Bill (SB) 507, effective September 30, 2021, amended AB 1976 to expand the criteria for when AOT services may be court-ordered to include the requirement that AOT is needed to prevent a relapse or deteriorations that would be likely to result in grave disability or serious harm to the person or others, without also requiring that a person's condition be substantially deteriorating. The bill added "eligible conservatees" as qualified persons to be petitioned for the AOT program. Additionally, the bill requires the examining mental health professional to determine if the subject of the AOT petition has the capacity to give informed consent regarding psychotropic medication in the subjects' affidavit to the court and allows the subject of the petition or the examining mental health professional to appear before the court for testimony by video conferencing. As a result of the expansion of the criteria for AOT services under SB 507, DBH does not have a current program that mirrors these additional requirements and, therefore, intends to expand its RBEST program and recommend AOT services if applicable.

As a result of these legislative changes, DBH requests that the Board rescind Resolution No. 2021-44 Opting Out of the Requirements of AB 1976 related to AOT, and adopt a Resolution to participate in SB 507 that amended AB 1976 related to AOT services.

To meet the obligations of the AOT services, DBH proposes an expansion of the RBEST program to develop a secondary team that will evaluate and recommend AOT services, if applicable, to the court for approval, as stipulated in WIC sections 5345-5349.5 for those consumers who do not engage voluntarily with the RBEST team. Specifically, the RBEST AOT program will provide FSP evidence-based services including intensive outpatient groups and individual treatment, psychiatric services, and community-based case management and rehabilitation services provided by a multidisciplinary team. Staffing will include a 1:10 ratio and utilize a "whatever it takes" approach to provide services focused on building therapeutic relationships that facilitate trust, linkage to services and, ultimately, treatment adherence. The expansion team will be known as RBEST FSP AOT and include 15 staff members. The 13 new regular positions are comprised of those identified in Recommendation No. 3, and two existing DBH staff positions of a Clinical Therapist I – Psychologist and a General Service Worker II. DBH anticipates up to 80 clients may be served through this newly developed program at an annual estimated cost of \$22,373 per client.

**PROCUREMENT**

N/A

**REVIEW BY OTHERS**

This item has been reviewed by Behavioral Health Contracts (Ellayna Hoatson, Contracts Supervisor, 388-0858) on June 2, 2023; County Counsel (Dawn Martin, Deputy County Counsel, 387-5455) on June 5, 2023; Finance (Christopher Lange, Administrative Analyst, 386-8393) on June 5, 2023; and County Finance and Administration (Cheryl Adams, Deputy Executive Officer, 388-0238) on June 5, 2023.

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Record of Action of the Board of Supervisors  
San Bernardino County

**APPROVED (CONSENT CALENDAR)**

Moved: Joe Baca, Jr. Seconded: Curt Hagman

Ayes: Col. Paul Cook (Ret.), Jesse Armendarez, Dawn Rowe, Curt Hagman, Joe Baca, Jr.

Lynna Monell, CLERK OF THE BOARD

BY   
DATED: June 13, 2023



cc: w/Resolution  
File - Behavioral Health  
CCM 06/15/2023