5150 Motion Background Report:

The Lanterman–Petris–Short (LPS) Act (Cal. Welf & Inst. Code, sec. 5000 et seq.) regulates involuntary civil commitment to a mental health institution in the state of California. The act set the precedent for modern mental health commitment procedures in the United States. The bipartisan bill was coauthored by California State Assemblyman Frank D. Lanterman (R) and California State Senators Nicholas C. Petris (D) and Alan Short (D), and signed into law in 1967 by Governor Ronald Reagan. [1] The Act went into full effect on July 1, 1972. It cited seven articles of intent:

• To end the inappropriate, indefinite, and involuntary commitment of mentally disordered persons, people with developmental disabilities, and persons impaired by chronic alcoholism, and to eliminate legal disabilities; • To provide prompt evaluation and treatment of persons with serious mental disorders or impaired by chronic alcoholism;

- To guarantee and protect public safety;
- To safeguard individual rights through judicial review;

• To provide individualized treatment, supervision, and placement services by a conservatorship program for gravely disabled persons;

• To encourage the full use of all existing agencies, professional personnel and public funds to accomplish these objectives and to prevent duplication of services and unnecessary expenditures;

• To protect mentally disordered persons and developmentally disabled persons from criminal acts.

As administered today in Los Angeles County, it does not adequately address the thousands of mentally ill homeless individuals languishing on public property throughout our communities. The three-day psychiatric holds that are permitted are employed only in the most extreme circumstances and are relatively useless in gaining the long-term psychiatric care that is often needed to improve patients' mental and physical conditions. The longer conservatorships allowed under the Act are even more rare due to the severe lack of psychiatric beds. Los Angeles County only has 22.7 out of the recommended 50-per-100,000 mental health beds. (http://file.lacounty.gov/SDSInter/bos/supdocs/131546.pdf, https://www.treatmentadvocacycenter.org/storage/documents/backgrounders/bed-supply-need-per-capita.pdf).

Dr. Jonathan Sherin, of the County Department of Mental Health, in response to a motion in the LA Alliance case, identified the many deficiencies in the county's mental health system, and recommended the county add an additional 500 beds. Of those 500 beds, the county has only added a little over 100. http://file.lacounty.gov/SDSInter/bos/supdocs/132696.pdf.

LA Alliance attorney Elizabeth Mitchell recently wrote: "If you talk to folks who run the county psych facilities, they will tell you horror stories about people sitting in emergency wards for months waiting for interim and long term mental health beds, which means they have nowhere to put new patients in crisis, and literally have to turn away people being brought in on 5150 holds. Courts won't conserve even desperate mental health patients because there's nowhere to put them."

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