

**ASSISTED OUTPATIENT TREATMENT
(W&I CODE 5345) (AB 1421)
“LAURA’S LAW”**

MARCH 20, 2014

The Nevada County Experience

Background

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- Jan 2001, 3 people were killed by an individual with an untreated mental illness in Nevada County, including Laura Wilcox, “Laura’s Law”
- Jan 2003, California enacted court-ordered outpatient treatment, known as Assisted Outpatient Treatment (AOT), as an option for Counties
- Modeled after Kendra’s Law in New York
- 45 states have similar laws

Nevada County Process

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- County resolved to use any available means to prevent future tragedies
- May 2007, approval from Department of Mental Health to use MHSA funds to implement treatment components of AOT, May 2007
- Extensive community planning process
- May 2008, implemented and began services

AOT Criteria

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- County resident, minimum age 18
- Serious Mental Disorder (WIC 5600.3)
- The person is unlikely to survive safely in the community

AOT Criteria

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Lack of compliance with treatment, indicated by:

- 2/36 months; hospital, prison, jail or
- 1/48 months; serious and violence acts, threats, attempts to self /others

AOT Criteria

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- The person has been offered an opportunity to participate in treatment and failed to engage, or refused
- Condition is deteriorating
- Least restrictive placement
- Necessary to prevent 5150 condition
- Will benefit from treatment

5150 and 5350 Criteria-Not Met

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- These individuals do not pose an imminent danger to self or others, and do not meet 5150 criteria
- These individuals are not gravely disabled, and do not meet 5350 criteria
- The LPS was essentially modified by WIC 5345 to provide an additional strategy of involuntary treatment for the 'gap' individuals

Who Can Request AOT?

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- Any person 18 and older with whom the person resides
- The person's parent, spouse, sibling or child, who is 18 or older
- A peace officer, parole or probation officer
- The director of a public or private agency providing mental health services to the person
- The director of a hospital where the person is being treated
- A licensed mental health provider who is supervising or treating the person

AOT Services

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- Community-based, multi-disciplinary treatment
- 24/7 on-call support
- Individualized Service Plans
- staff to client ratios of no more than 10 clients per one staff
- Must include a Personal Service Coordinator

AOT Services

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- Comprehensive wraparound mental health, social, physical health, substance abuse, psychiatric, nursing, employment, and housing services
- Assistance with entitlements (Social Security, Medi-Cal, CalFresh, etc.)
- A Full Service Partnership, similar to Assertive Community Treatment Teams

Voluntary v. Involuntary-SB 585

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- Senate Bill 585 was recently enacted, to clarify language and specifically allow the use of MHSA funds
- No locks, restraints, seclusion, or forced medication
- AOT services provided by the treatment team are voluntary; the mandate, legal status, and order originate from the court



AOT Services and Recovery

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- Flexible engagement process
- Personal choices offered
- Harm reduction philosophy
- Needs for food, clothing, shelter considered first
- Motivational Interviewing

No Forced Medication

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- Medication may be part of the court-ordered, individualized service plan
- Medications are not “forced”, but they are court-ordered
- Court-ordered treatment is commonly provided throughout the California mental health system



Court-Ordered Treatment

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County mental health department typically provide court ordered treatment:

- LPS Conservatees
- Individuals on probation/parole
- Parents ordered into treatment in dependency court
- Mental Health Court participants
- Court Wards and Dependents



Court & Legal Process

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- Pre-hearing notice of investigation and hearing
- Superior Court hearings and due process requirements
- Collaborative supervision of AOT after the court order
- Similar to other problem solving courts: Prop 36, Drug Court, Mental Health Court, LPS



How to Enforce the Order?

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- No criminal charges=no flash incarceration
- No contempt of court
- If the individual refuses the evaluation, or refuses to follow the Service Plan, the Judge may order psychiatric hospitalization for up to 72 hours (this is not a 5150!)
- The Black Robe Effect

Providence Center AOT Data

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Since May 2008:

- 78 referrals and evaluations (60 unduplicated individuals)
- The majority of people engaged in treatment with no court order
- 28 court orders (including Settlement Agreements) for treatment (24 unduplicated individuals)
- 4 adversarial hearings (i.e. where the person appeared with counsel and challenged the petition.)
- 4 hearings where the person did not appear and an evidentiary hearing was held before the judge to present the evidence that the person met criteria.

Costs and Savings

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- Actual cost per individual varies; approximately \$15,411/year/individual
- \$1.81 is saved for every \$1 invested
- a net savings to the County of \$503,621 for first 31 months (hospitalization and jail)



Funding

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Need funding for these components:

- Assertive Community Treatment
- Behavioral Health Administration
- County Counsel
- Public Defender
- Judge and court staff
- Law Enforcement
- Psychiatric Hospital

Actual Outcomes: For 43 unduplicated individuals, for the most recent 12 months pre-treatment vs. 12 months post-treatment

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- # of Psychiatric Hospital Days
212 days vs. 76 days post-treatment = 64.2% ↓
- # of Incarceration Days
156 days vs. 123 days post-treatment = 21.2% ↓
- # of Homeless Days
1114 days vs. 72 days post-treatment = 93.5% ↓
- # of Emergency Interventions
93 contacts vs. 12 contacts post-treatment = 87.1% ↓

Final Thoughts

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- 45 states have implemented AOT programs
- Provides treatment *before* an individual becomes gravely disabled, or does harm to self or others
- AOT allows for a treatment option that is less restrictive than Conservatorship and locked inpatient care
- AOT saves lives, protects civil rights, increases public safety, and improves the quality of life for the individual

Contact Information

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