



From:

Lynne Gibbs <gibbslyn2@gmail.com> Thursday, December 7, 2023 7:16 PM

Sent: To:

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Cc:

Tanja Heitman; Das Williams; Spencer Brandt; Joan Hartmann; Gina Fischer; Laura Capps;

Aaron Hanke; Cory Bantilan; Steve Lavagnino; Bob Nelson; Chris Henson

Subject:

Statement for 12/12 BOS, Dept. Agenda Item # 3

Attachments:

BOS Statement Gibbs 2023 12 07 02.docx

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Please see attached. Thank you, Lynne Gibbs To: Chair Williams and the Santa Barbara County Board of Supervisors

Subject: Please Adopt the California Grave Disability Standard

Date: December 7, 2023

I serve as Public Policy Chair of NAMI SBCO and an Advisor to Families Act! Here I write you as a mother, and a community member who regularly hears from family members of persons with serious mental illness (SMI) and substance use disorders (SUD).

In its' pleading to you to postpone Santa Barbara County's adoption of the Grave Disability bill by 2 years, the Dept. of Behavioral Wellness states:

"By expanding LPS to capture any person who has a severe SUD, this change in policy will significantly expands [sic] the number of persons subject to detention and conservatorship from about 1% to around 10% of the population."

It is impossible to read this projection of 10% as other than an hysterical overestimation. Just as the vast majority of persons with mental illness do not meet the high legal bar necessary for involuntary treatment, neither do those with SUD. Only the most ill, at-risk individuals qualify so that the rights of those who have the capacity for self-determination are protected.

Who would benefit from SB 43 adoption? Here are several county examples over the past several years:

- --A young woman who jumped from a UCSB overpass, thinking this was a shortcut to where she was going, was paralyzed as a consequence, but still did not qualify for temporary, involuntary mental health care. She subsequently died of a drug overdose.
- --Another young woman with SMI who developed a boil the size of a grapefruit as the consequence of failing to treat a drug-resistant staph infection, yet didn't qualify for a 5150 involuntary hold.
- --The son of a NAMI board member who delayed treatment of cancer. He still does not quality for LPS conservatorship.
- --A young man who suffered a brain aneurysm and chose to leave Cottage hospital to return to the street with a brain bleed.
- --Another young man with MS.

These are clear cases wherein a sophisticated assessment tool is not needed to determine these persons should qualify for mandated mental health care under the new Grave Disability standard. Yet, such poor souls are to wait two more years for life-saving treatment?

Stakeholder passion concerning the urgency of implementing SB 43 is reflected in the change.org petition at Petition · Don't Postpone Treatment for the Most Seriously III · Change.org. In less than a week, its' posting garnered 538 signatures and 147 petition shares.

San Diego County is postponing implementation by a year. LA County's Dept. of Mental Health's recommendation is the same. Why would we in Santa Barbara County need twice as long to prepare?

It's not as if the legislative handwriting hasn't been on the wall for several years. Our Behavioral Health leadership has a history of ideological opposition to any even temporary form of involuntary care. That needs to change. California has recognized the failure to treat has engendered ever more costly disability among persons with mental illness. The county could have applied for funding for a locked treatment facility under the BHCIP Round 5, and chose not to. We'd be further along toward implementation at this point if we had. Cottage Hospital could have applied for an expansion of 5 East, and chose not to.

We have an urgent need to save the lives of the most severely affected. If time is needed for planning (as it undoubtedly is), it seems reasonable and judicious to provide 6 months for a plan, as proposed by Behavioral Wellness, and another 6 months to begin implementing. The BOS and county CEO's office should track milestones and progress. Building out an adequate system of care will not be accomplished in even a 2 year period. It is bound to be a phased implementation over more years. We can and should continue to build out our community-based and inpatient systems of care in these coming years while granting attention to the most ill at greatest risk at the soonest possible date.

This is an urgent matter. Imagine if you as a family member were told by an outreach worker that there is nothing to be done for your loved one except to hope he or she is arrested as the only means for securing mental health treatment to save his/her life. Please do not extend this suffering by two additional years.

Thank you for your consideration,

Lynne Gibbs, Santa Barbara District 2