

March 1, 2023

Senate Rules Committee
California State Senate
State Capitol, Room 400
Sacramento, CA 95814

RE: SB 43 / 363 (Eggman) Conservatorship Reform and Behavioral Health Bed Database – SUPPORT

Dear Senators,

As Mayors of XX cities in Santa Clara County we are writing in strong support of SB 43, Conservatorship Reform, and SB 363, Behavioral Health Bed Database, which will strengthen and reform our conservatorship system while also establishing a statewide database for behavioral health resources.

California faces a startling dearth of behavioral health services across the state. The abusive approach of past psychiatric institutions was rightfully phased out in California decades ago. While well-intentioned, the elimination of these facilities created major gaps in beds and services for those with a serious mental illness (SMI) or substance use disorder (SUD). Last century, [our country hit a peak](#) of 337 psychiatric beds per 100,000 individuals. In 2016, that number plummeted to 12 beds per 100,000 people. Without a robust healthcare infrastructure and the ability to compel treatment, thousands of Californians have been left without critical assistance in managing and recovering from behavioral health issues.

According to the California Health Care Foundation, [one in 26 Californians suffer from a serious mental illness](#) that impairs their daily activities. [One in three jailed Californians suffer from a mental health issue](#). Estimates for the frequency of behavioral health issues among our unhoused population ranges from [one in three](#) to [as high as two in three](#). As public servants, we must identify and promote the most effective, evidence-based care suited to each individuals' needs across the behavioral health continuum. The outcomes we effectuate now for our most vulnerable residents will be a profound measurement of our success to future generations.

We thank Senator Eggman for introducing SB 43 and SB 363 as essential steps towards our collective goal of expanding access to treatment. SB 43 will modernize the Lanterman–Petris–Short Act to consider individuals with the most acute conditions for conservatorship. Individuals who experience SMI, SUD, homelessness, or all three are far more unlikely to recognize the severity of their condition, let alone the need for treatment. Family members, medical providers, first responders and community members are often desperate to get someone into treatment, but face extraordinary difficulty in doing so under current law. People with severe mental health challenges also tax our vital health and safety systems, impact neighborhoods and small businesses, and cycle in and out of emergency departments and jail. These are often the most expensive, least effective ways to provide them the services they need.

Conservatorships are a last-resort attempt to care for an individual who has become “gravely disabled,” which is currently defined as not being able to provide ones’ self with food, clothing and shelter. SB 43 would enhance the definition of “gravely disabled” to a renewed focus on those who are unable to prevent serious physical or mental harm to themselves or others due to an inability to provide for their own basic needs. In addition to families, the Public Guardian can petition for conservatorship, allowing local governments to redirect individuals away from the criminal justice system and emergency departments and link them to effective care. Expanding our use of conservatorships is a practical and moral imperative. [Governor Newsom has led valuable reforms in this area](#), such as the expansion of Laura’s Law, CARE Court, and advocating for additional utilization of public conservatorships.

Additionally, SB 43 addresses the inability for medical experts to present documented medical analysis from healthcare providers in the adjudication process. Due to the 2016 California Supreme Court Case, *People v. Sanchez*, out-of-court statements not presented by the commentator are labeled hearsay, and therefore inadmissible. Experts on the stand often rely on the analysis of medical professionals to argue as to why someone may need to be placed under conservatorship. Their clinical evaluation can provide critical context for why an individual should be considered for conservatorship. Under SB 43, courts will receive a more holistic medical background regarding the potential conservatee, ensuring juries are further equipped to determine whether conservatorship is justifiable.

We also applaud SB 363, a long-overdue creation of a state-run virtual dashboard for behavioral health beds. Some counties, [including ours](#), independently operate dashboards displaying available bedcount of county-owned and contracted facilities specializing in treatments across the behavioral health continuum. Generally, these dashboards are updated daily rather than in real-time, meaning there is no standardized sharing of data between facilities when hours, minutes, or seconds count towards getting someone into treatment. SB 363 would direct the State Department of Health Care Services to create a database of behavioral health facilities and share bed capacity as it is changing in real-time. A comprehensive repository of specialized services such as chemical dependency recovery hospitals, acute psychiatric hospitals, and mental health rehabilitation centers will provide breathing room for overwhelmed emergency departments and link individuals to condition-specific resources.

SB 43 and 363 jointly confront our behavioral health crisis with valuable tools and will provide meaningful, measurable outcomes for our shared goal of aiding vulnerable Californians and reducing the community impacts of serious behavioral health issues.

Thank you for your leadership on this important issue.

Sincerely,

[MUST INCLUDE SIGNATURE]

[NAME]

[POSITION]

[ORGANIZATION]