



AGENDA ITEM NO.
D-7

COUNTY OF HUMBOLDT

For the meeting of: *April 5, 2016*

Date: March 1, 2016
To: Board of Supervisors
From: Supervisor Virginia Bass
Subject: Laura's Law Presentation

RECOMMENDATION(S): That the Board of Supervisors hear the presentation and take appropriate action, if required.

SOURCE OF FUNDING: N/A

DISCUSSION: Connie Beck, Director of Health and Human Services will provide the Board with a presentation related to "Laura's Law" (also known as Assisted Outpatient Treatment/AOT), a process that allows the courts to compel individuals with severe mental illness and a past history of arrest or violence stay in treatment as a condition for living in the community, and equally commits the county mental health system to providing the treatment.

FINANCIAL IMPACT: N/A

OTHER AGENCY INVOLVEMENT: N/A

ALTERNATIVES TO STAFF RECOMMENDATIONS: Board discretion.

ATTACHMENTS: Laura's Law Fact Sheet

Prepared by Kathy Hayes Signature *Virginia Bass*

REVIEW: Auditor _____ County Counsel _____ Personnel _____ Risk Manager _____ Other _____

TYPE OF ITEM:
____ Consent
____ Departmental
____ Public Hearing
 Other Special Presentation (15 minutes)
PREVIOUS ACTION/REFERRAL:

BOARD OF SUPERVISORS, COUNTY OF HUMBOLDT
Upon motion of Supervisor _____ Seconded by Supervisor _____
Ayes _____
Nays _____
Abstain _____
Absent _____

SEE ACTION SUMMARY

Board Order No. _____
Meeting of: _____

and carried by those members present, the Board hereby approves the recommended action contained in this Board report.

Dated: _____
By: _____
Kathy Hayes, Clerk of the Board

Laura's Law Fact Sheet

[\(PDF Version\)](#)

What is Laura's Law?

Laura's Law (also known as Assisted Outpatient Treatment/AOT) is a process that allows courts to compel individuals with severe mental illness and a past history of arrest or violence to stay in treatment as a condition for living in the community. Equally important, it commits the mental health system to providing the treatment. When Laura's Law was implemented in Nevada County

- Hospitalization was reduced 46%;
- Incarceration reduced 65%;
- Homelessness reduced 61%;
- Emergency Contacts reduced 44%;
- Saved of \$1.81-\$2.52 for every dollar spent as result of reducing incarceration, arrest, and hospitalization.

NY research found AOT helped

- **Keep the public, patients, and law enforcement safer** by reducing physical harm to others (47%); and property destruction (43%).
- **Help the seriously mentally ill** by reducing homelessness (74%); suicide attempts (55%); and substance abuse (48%);
- **Save money** by reducing arrests (83%); incarceration (87%); and hospitalization (77%).

Who is eligible?

It is *only for a very small group* of severely mentally ill revolving door patients well known to law enforcement officers: those with severe mental illness who repeatedly get arrested or hospitalized due to their failure to stay in treatment. Eligible individuals must have a history of non-compliance with treatment that has been a significant factor in being hospitalized or incarcerated at least twice within the last 36 months or resulted in one or more acts, attempts or threats of serious violent behavior within the last 48 months.

Why does Law Enforcement Support Laura's Law?

Laura's Law reduces the number of people entering the criminal justice system and helps ensure those leaving it don't come back. LEOs only step in when one condition has been met: the mentally ill person has been abandoned by the mental health system. At that point, the individuals may be dangerous and are certainly time-consuming. Implementing Laura's Law is formally supported by The California Peace Officers' Association, the California State Sheriffs' Assoc., and various local Police Chiefs because:

- Laura's Law would reduce the 5150, EDP, Suicide and Revolving Door calls that are placing a tremendous time burden on law enforcement resources (*Approximately 250,000 incarcerated individuals in CA have severe mental illness. A person with mental illness in CA is 3.8 times more likely to be incarcerated than hospitalized*).
- Laura's Law would keep LEOs safer. (*LEOs are more likely to be killed by a person with a mental illness [13%] than by assailants who had a prior arrest for assaulting police or resisting arrest [11%]. Nationwide, over 115 LEOs have been killed by people with untreated mental illness. People with mental illnesses killed LEOs at a rate 5.5 times greater than the rest of the population.*)
- Laura's Law can help ensure those released as a result of Brown v. Plata and realignment receive the care they need.
- 1000 homicides a year are attributable to severe mental illness
- Laura's Law could reduce officer-involved shootings of people with mental illness. (*People with severe mental illnesses are killed by police in justifiable homicides at a rate nearly four times greater than the general public. These incidents also create friction between police departments and the communities as recent events in CA show.*)
- Laura's Law returns treatment of people with severe mental illness back to the mental health system (*20% of San Mateo jail population has a serious mental illness*).
- Laura's Law saves criminal justice money (*When NV County implemented Laura's Law, 521 days of pre-AOT incarcerations fell to just 17 days post-AOT--a 97% reduction in incarceration days. With the cost amounting to approximately \$150 per day, the cost savings in this small county from decreased incarcerations amounted to \$75,600.*)

Does Laura's Law work?

New York City introduced Kendra's Law (the model for Laura's Law) over fifteen years ago. Because of its success, it was taken statewide over ten years ago. A study in *Psychiatric Services* found *the odds of arrest for a violent offense were 8.61 times greater before participants entered Kendra's Law than after.*

"(B)oth the general public and people (in AOT) benefit—the former through a reduction in crime and violence and the latter through a reduction in experienced coercion and all of its untoward consequences."

Nevada County, CA found Laura's Law reduced use of incarceration 97% (504 days); and hospitalization 61% (pre and post AOT).

Why is Laura's Law needed?

There is a small group of people with severe mental illness who are so ill, they don't believe anything is wrong with them ("anosognosia"). For example, they don't "believe" they are Jesus, or the FBI planted a transmitter in their head—they "know" it. A subset of this group rejects treatment, then experiences hallucinations and delusions and becomes needlessly homeless, hospitalized, arrested, incarcerated, dangerous or suicidal. 5150 interventions *require* dangerous behavior. Laura's Law *prevents* it. It is the only community-based program for individuals with mental illness *who refuse treatment.*

Why hasn't Laura's Law been implemented in each county?

California is far behind the rest of the nation. Similar laws exist in 42 states. Counties may implement it only after the Board of Supervisors passes a resolution (enc.) to do so. Mental Health Departments have not recommended it to supervisors, perhaps because they fear it would require them to prioritize the most severely ill—those who refuse treatment. Supervisors could implement it based on the recommendation of the law enforcement communities, but so far law enforcement officials have failed to communicate their support or the resolution to the supervisors.

Is Laura's Law is expensive?

No. Laura's Law does not provide any services individuals are not already entitled to. It does help ensure the mental health system gives the severely ill the same services they offer others who are less ill. Incremental costs are the relatively small court costs to ensure individuals receive due process protections and these are offset by savings in arrest, trial, incarceration, and parole for the criminal justice system; and reductions in hospitalizations for the mental health system. Nevada County saved \$1.81 for every dollar invested including \$346,950 of hospitalization costs. Judge Tom Anderson is a big supporter.

Where will the money come from?

Voters passed Prop 63/Mental Health Services Act (MHSA) specifically to provide funding for "severe mental illness". The county mental health departments have accepted this funding, but not the requirement to spend it on the most severely ill. California DMH ruled MHSA funds can be used for patients regardless of whether they have voluntary or involuntary status but some mental health officials are reluctant to do so. Nevada and LA Counties do fund their Laura's Law programs with MHSA funding. They supplement it with private insurance, Medicaid, Medi-Cal, and patient fees. It is also possible that Sec. 118 funds can be used.

Prepared by Mental Illness Policy Org <http://lauras-law.org>

1. Sources for quoted studies and facts can be found at <http://mentalillnesspolicy.org>

The information on Mental Illness Policy Org. is not legal advice or medical advice. Do not rely on it. Discuss with your lawyer or medical doctor. Mental Illness Policy Org was founded in February 2011 and recently received 501(c)(3) status. In order to maintain independence MIPO does not accept any donations from companies in the health care industry or government. That makes us dependent on the generosity of people who care about these issues. If you can support our work, please send a donation to Mental Illness Policy Org., 50 East 129 St., Suite PH7, New York, NY 10035. Thank you. For more information, [contact DJ Jaffe, Executive Director](mailto:contact@mentalillnesspolicy.org) <http://mentalillnesspolicy.org>.