

LPS CONSERVATORSHIP INFORMATION

January 2018

The Mental Health Conservatorship is part of the Lanterman-Petris-Short (LPS) Act 1967. An LPS Conservatorship is the legal term used in California which gives one adult (conservator) the responsibility for overseeing the comprehensive medical (mental) treatment for an adult (conservatee) who has a serious mental illness. The guidelines for this involuntary mental health treatment are under the California Welfare and Institutions Codes 5200. This pamphlet will also cover the LPS Conservatorship process.

The following information will help you to build a powerful written case for mental health treatment. This includes the person's mental health history, their symptoms and characteristics, and their gravely disabled status. Your written case will help to acquire resources and treatment including the LPS Conservatorship should this treatment be needed. A well written case will help the doctor to better diagnose and treat the person with mental illness.

The format, as show below from the template example, should be copied to a word document. Then delete what does not apply for your love one and add what does apply. Often our tendency is to write pages of information. This is not a wise idea. The doctors have heard it all before in one form or another. Their time is limited so a well written paper is more affective in

Use your written case to help you get the treatment needed for your love one. Give the case (medical history, symptoms and gravely disabled) to the police and to the psychiatric evaluation team (PET) when your request help to place your love one in the hospital. At the hospital give a copy of this information to the social worker at the hospital, and request that they give this information to the doctor. Give a copy to the public guardian's office only after the referral for the LPS Conservatorship is filed. Also use the written case for treatment when applying for SSI/SSDI and Medi-Cal. If health care providers refuse your information, provide them a copy of the CA Welfare and Institutions Code 5008.2 which states health care providers MUST take your information. This is the law.

Note: Do not put the person's social security number on these papers.

Directions for writing the Mental Health History

1. In chronological order, starting with the most recent event, list their history of hospitalizations, incarcerations, homelessness and any restraining orders which have taken place for your relative. Write the **EVENT** in bold. Then write the approximate date as best you know it to be, the facility where they were placed or if homeless the general area if known, and their diagnosis. If you do not know the diagnosis and the event occurred because of their mental illness, you can write, "psychotic behavior." Limit this information to only one page. Allow space at the bottom of the page to note any allergies, medical problems, or medicines they should not have. Note their insurances such as Medi-Cal, Medicare or private insurance. They can have all three insurances. Note what financial resources they receive such as SSI, SSDI, or Social Security. you have more information than one page, then write at the bottom

of the page either, they have been ill since (write their age or the years as you know it) and they have had (cite the approximate number) X amount of previous hospitalizations, incarcerations, homelessness.

2. This case example format is powerful. It is suggested that you print your case colored paper if possible. Be sure to bold the **EVENT** and underline the diagnosis. Do not give details or state why the person was hospitalized as that information should be in the symptoms. Do not state that they were placed on a 5150 which is understood if they are in the psych hospital. Only list information which you are aware. You are not expected to have access to all of your relative's medical history. If you are missing information, this is fine. Do the best you can.

HOSPITALIZATION; Date to Present; Name of Hospital; Diagnosis

If you do not have previous hospitalizations, incarcerations or homeless, it is still possible to acquire an LPS Conservatorship when the person is gravely disabled and there are no alternatives but to conserve them because they refuse medications and have no insight into their illness.

Template Example:

Mental Health History

Joe Doe's Mental Health/Medical History

Hospitalized; January 1 to Present; Cedar Sinai Hospital, Los Angeles; Diagnosed: Schizophrenia

Hospitalized; December 12- 28, 2017; UCLA Harbor, Torrence: Diagnosed: and Schizophrenia

Homeless; November 5- December 12, 2017; Venus area; Diagnosed: Exhibiting psychotic behaviors

Hospitalized; September 10- 23, 2017; College Hospital Long Beach; Diagnosed: Bipolar

Incarcerated; March 2- April 4, 2017; Twin Towers; Diagnosed: psychotic behaviors

Homeless; January 3- March 1, 2017; Santa Monica; Diagnosis: Exhibiting psychotic behaviors

NOTE: Do not give Biaxin or Haldal; Has diabetes; Insurance Medi-Cal and receives SSI income

Directions for Mental Health Symptoms and Characteristics

1.Prepare a short detailed summary of the DSM IV symptoms of the mental illness as it applies to your loved one. Use the template format below. Use short phrases. Bold the titles and bullet your examples.

Symptoms and Characteristics

Visual hallucinations

- Sees ghosts, dead people
- Sees people with pointed chins and beaked noses

Auditory hallucinations

- Laughs or smiles for no reason
- Hears television speaking to him/her (not the normal show)

Delusions- includes grandiose delusions

- Feels he/she is Christ
- Plans to open chain stores and make millions

Belief in or acting on the delusions

- Goes to the hospital to raise people from the dead
- Puts knives around bed to protect him/her from dead

Disorganized speech

- Rapid speech
- Does not make sense in conversation; can't follow conversation

Disorganized behavior

- Incapable of following directions
- Leaves stove on
- Parks car in middle of intersections
- Out of control spending sprees

Poor Hygiene

- Goes for days without showering
- Smells bad
- Dresses inappropriate for the weather
- Wears cloths for long periods of time without changing for cleaning
- Takes clothes off at inappropriate places and times

Paranoid thinking

- People are running him/her off the road while driving the car
- People are looking at him/her
- Mother/ Father molest him/her
- Government is watching him/her

Behaves in accordance to his/her paranoid thinking

- Throws food in garbage because it is poisoned
- Destroys cell phone, TV etc because FBI are listening
- Walks in front of traffic
- Lost significant weight from not eating

Mood Swings

- Cycles between moods- highs and lows
- Consistently depressed, suicidal
- Becomes extremely agitated easily

Unable to meet the needs of daily functioning

- Goes into other people's houses uninvited to get food, use computer
- Does not pay for items in stores, just takes things
- Can't handle finances

Difficulty understanding and following directions

- Cannot process information
- Cannot follow multiple directions
- Inability to maintain gainful employment
- Cannot keep a job
- Blames everyone for problems
- Inability to recognize their illness and difficulties associated with the illness
- Refuses medication or will not stay on medication due to anosognosia

Gravely Disabled

- May not come and live at home, Has no place to live safely
- Is not capable of safely living in a shelter or board and care
- Takes clothes off at inappropriate times and places or, dresses incorrectly for the weather- wears hooded sweatshirt and sweater building up excessive body heat causing concerns for heat stroke and/or if excessively cold weather wears sandals, shorts and no shirt outside-health risk or, wears clothes for long periods of time resulting in bacteria build up on skin
- Might not eat food because it is poisoned, loses excessive weight presenting a serious health risk
- Has no income and cannot provide for self or hold a job
- Has no insight into illness (anosognosia) and therefore will not take medication and has history of non compliance

If the police are reluctant to place your relative on a 5150 and they tell you that your loved one must do something before they can place them on the 5150, then refer to the case law below

and politely let the police know that your loved one lacks the provisional sense to care for themselves due to their mental illness. Give the police of copy of the case that you wrote for mental health treatment for your relative. Ask the police to keep this confidential and allow the doctor to handle the information.

"In the landmark case of Doe v. Gallinot (C.D. Cal. 1979) 486 F. Supp. 983, aff'd (9th Cir. 1981) 657 F.2d 1017, the court held that "standards for commitment to mental institutions are constitutional only if they require a finding of dangerousness to others or to self." 486 F.Supp. at 991 (citations omitted). The court added that "[t]he threat of harm to oneself may be through neglect or inability to care for oneself." Id., quoting from Doremus v. Farrell (D.Neb. 1975) 407 F.Supp. 509, 515."

...So harm to self is not jumping off the top of a building. It may be that the individual simply lacks the provisional sense to care for themselves due to their mental illness.

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1. Why is an LPS Conservatorship important to obtain?

An LPS Conservatorship is a tool which gives the conservator the power to work with the doctor to achieve recovery treatment for a mentally ill individual beyond the standard of “stable.” It helps the conservator in guiding the treatment team to get your loved one’s life back as they knew it to be before they became ill. It is involuntary treatment especially for those who have no insight into their illness and are non-compliant with treatment and medication. The patient can not refuse medication which is the essence of the LPS Conservatorship.

2. What is an LPS Conservatorship?

A Lanterman Petris Short (LPS) Conservatorship is the legal term used in California which gives one adult (conservator) the responsibility for overseeing the comprehensive medical treatment for an adult (conservatee) who has a serious mental illness. Under the LPS Conservatorship, medication can be mandated.

3. How long is an LPS Conservatorship granted?

An LPS Conservatorship is granted for one year term but can be renewed for another year. It is important to pay attention to the requirement required for renewal from the court and mark that date on your calendar. Once the conservatorship is terminated, the process must begin from the beginning.

4. Who can be conserved?

Conservatorships are only granted by the court for adults with a mental disorder as listed in the Diagnostic and Statistical Manual of Mental Disorders (DSM IV) and who are gravely disabled.

These are granted for people with:

- Schizophrenia
- Bi-Polar disorder (Manic Depression)
- Schizoaffective disorder
- Clinical Depression
- Obsessive compulsive disorder
- Chronic Alcoholism

5. What types of LPS Conservatorships do the courts grant?

There are two types of LPS Conservatorship which the court can grant.

The first is an LPS Conservatorship of the Person. A qualified psychiatrist initiates a petition to the public guardian's office, which in turn petitions the court for the conservatorship of the person.

The second is an LPS Conservatorship of the Estate. The public guardian's initial investigation determines if there is a need for the LPS of the Estate Conservatorship. The family can also request that the public guardian petition the court for the estate conservatorship at the time of the LPS Conservatorship hearing or they can request the LPS of the estate at some time later when the person is still under the LPS Conservatorship. The doctor is not involved with the LPS of the estate.

6. What are the responsibilities of the conservator with respect to the conservatee?

As a conservator you will be responsible for approving or disapproving a place for the conservatee to live, and approving or disapproving the treatment and the medication program for the conservatee. You should also participate in developing and overseeing a treatment plan that supports and encourages the conservatee to regain his/her life as close as it was prior to the illness. It is a good idea for you to learn about mental disorder. This can be done by taking the free Family to Family class which is offered by NAMI.

7. What are the responsibilities for the conservatee with respect to the estate?

As conservator of the estate, you will be responsible but not personally liable for all financial matters pertaining to the estate. You do not need an estate conservatorship to be the representative payee for their SSI benefits.

8. What qualifies a person to be placed under an LPS Conservatorship?

To qualify for the LPS Conservatorship, the person must be gravely disabled, have a serious mental illness and there are no other alternatives to help them in the recovery of their impairment.

9. How do I know if my loved one is considered a harm to himself or others?

You do not need to wait until your loved one tries to commit suicide or tries to hurt someone or themselves before you seek treatment for them. If your loved one has delusional conversations expressing the need for knives or other items to protect him/her self; if they walk in front of moving cars, oblivious of the vehicles; if they seemed obsessed with others killing them; if they leave gas burners on after cooking; or are losing weight because they are afraid the food is contaminated, these examples are some red flags that will help you get your loved one hospitalized which is usually the first process in acquiring a conservatorship. It is easier to conserve person is in the hospital rather than jail. If a person is in jail, the treating doctor at the jail must initiate the LPS Conservatorship.

10. What defines gravely disabled?

Gravely disabled means the mentally ill person cannot take care of his/her basic needs for food, clothing and/or shelter. With that said, state law states that if another person provides for their food, clothing or shelter, or if a person can get food or clothing from the shelters then they are not considered gravely disabled. The fact that a mentally ill person lives on the streets does not mean that they are gravely disabled either.

With this said, it is still possible to establish gravely disabled and get the person in treatment under the LPS Conservatorship even when they are living on the street. Refer to their basic needs as a safety problem and/or health risk, such as:

Shelter: "They have no place to live safely. They cannot handle a board and care or shelter safely."

Food: "They have lost significant weight causing a health risk."

Clothing: Or, they wear their clothes for long periods of time causing excess build-up of bacteria on their skin resulting in a health risk." Or they take their clothes off at inappropriate times or places, or they dress inappropriate for the weather.

The lack of their ability to not be able to provide for only one of their basic needs for food, clothing, or shelter is necessary to establish gravely disabled. They do not need to have the inability to provide for all three.

11. How does a person get a gravely disabled status?

When a person with mental illness is hospitalized or incarcerated for being a harm to self or others, then the family or others can provide pertinent information to establish "gravely disabled" for food, clothing or shelter. Gravely disabled by California definition means a person cannot provide for their food clothing "or" shelter. BUT if someone else provides for their food, clothing or shelter they are not considered gravely disabled. Meeting any one of these three criteria can establish gravely disabled.

Gravely disabled can be established if the person has 1. No place to live safely; they may not come home unless they are under the LPS Conservatorship and have gone through treatment, and/or 2. If the person has lost significant weight or is paranoid by food, or they have

compulsive eating causing overweight, and/or 3. A person creates a health risk by dressing inappropriate for the weather resulting in a health risk or they take their clothes off at inappropriate times or places, or they wear their clothes for long excessive periods, can be considered gravely disabled. This is very important in requesting an LPS Conservatorship. In addition, if the person is not compliant with treatment and medication this helps to build a case for the LPS Conservatorship.

To prove that a person cannot provide food or clothing is extremely difficult because if they can go to the Salvation Army or a dumpster to acquire clothes, pan handle for money, or find the food kitchens; then they are not considered gravely disabled.

12. Who can be the conservator?

- Public guardian- paid for by the state
- Private professional conservator
- You, a relative or a friend- the state prefers a family member for conservator

13. Why is it necessary to seek an LPS Conservatorship?

If a person with mental illness does not have insight into their illness, and they are not compliant with their medications, it is very wise to seek an LPS Conservatorship to keep them safe, out of the revolving doors for the hospitals and out of jail but especially to help them on their road to recovery. Lack of treatment results in their brain deterioration. Because treatment and medication can be given under the LPS Conservatorship, it has been found that the brain will not have to continue to suffer further damage. An LPS Conservatorship is one significant tool which will help your loved one regain his/her life.

14. How much does it cost to acquire an LPS Conservatorship?

You can hire an attorney to help you acquire the conservatorship, but this is not always necessary. The attorney cannot force the doctor to seek the conservatorship. Attorneys are somewhat expensive.

When the person is in the hospital or jail, then the treating doctor can initiate the LPS Conservatorship with the public guardian's office.

The public guardian submits a report to county counsel recommending that the person be conserved and whether or not a family member should be appointed as the conservator. County counsel who represents the public guardian, petitions the court for the LPS Conservatorship. From my experience, the county counsel deals with these situations every day. They are very knowledgeable and understand the proceedings of the conservatorship court. If the court sees a need for an attorney, the court can assign an attorney to represent the conservator. The judge will select from the court's panel of attorneys at the court's cost.

15. Where is the conservatorship court?

In Los Angeles County, the court is located at: 1945 S. Hill Street, Los Angeles, CA 90007. The hearings are usually heard on the fourth floor. Prior to any hearing, double check with the public guardian's office the location of the court. This facility is temporary in which the mental health court will be moved to a refurbished courthouse in Hollywood.

16. What is the usual process in seeking an LPS Conservatorship?

- First, the person who exhibits harm to self or others is placed on a 72 hour hold (5150) by a qualified police officer, psychiatrist or mental health personnel. Usually someone will call either the police or the crises intervention team to initiate this process. To prevent the person from being harmful to others, the police will make sure the person is contained. The crisis intervention team evaluates the individual and makes a recommendation for the 72 hour hold. Note that when the person is transported they are usually handcuffed to keep them safe.
- After the 72 hour hold in the hospital, the treating psychiatrist may initiate a 14 day hold AKA a 5250 hold, to continue the treatment for stabilization. A 14 day hold must have a Probable Cause hearing within 4 working days of the hold. Often families are not aware the probable cause hearing has taken place. This hearing allows the hospital to hold the patient for the 14 days. It does not mean the hospital will hold the patient for the full 14 days.
- After the Probable Cause hearing the doctor may request an LPS Conservatorship investigation from the public guardian's office. The public guardian will review the application and may petition the court for a Temporary Conservatorship AKA T-Con. They will also set the date for the LPS Conservatorship court hearing. The person will be held in the hospital under the Temporary Conservatorship AKA T-Con until the LPS court hearing. The T-Con can hold the person in the hospital up to 30 days.
- The treating psychiatrist initiates the LPS Conservatorship request with the public guardian's office.
- The public guardian will visit and evaluate the patient and make a recommendation to the court to either proceed or dismiss the LPS Conservatorship case.
- It is important to contact the public guardian's office and submit the written case of the history and symptoms papers and gravely disabled. Also, be sure to give a copy of these papers to the treating psychiatrist as soon as the person is taken to the hospital. If you don't know which hospital the person will be transported, then you might give those papers to the crisis intervention team to deliver to the hospital. You can contact DMH Family Advocate or Patient Advocate to locate your loved one if you do not know where they were transported. The transport is a civil matter so the police can inform you where they are transporting the patient. Once they cross the Hospital threshold, then HIPAA laws take place.
- An estate conservatorship is initiated through the public guardian's office and not through the psychiatrist. The family member may discuss the estate issues with the public guardian investigator. Or, the family conservator may request, if needed, the Estate LPS Conservatorship even after they are appointed as conservator of the person.
- If the person is in jail, then the treating doctor can initiate the LPS Conservatorship.

17. What is a Riese hearing?

This hearing is held at the hospital, often because the patient is becoming violent or agitated, and needs medication, but is unwilling to voluntarily to take medications. It is a capacity hearing that is held to require the patient to take medication to calm him/her.

18. Who can initiate a 5150 hold?

Certain trained designated officials may initiate the 72 hour hold/section 5150.

- Police officer

- Approved mental health professional
- Approved psychiatrist

Transportation to the hospital must be arranged by one of the above. In some counties if beds are not available, then the Crisis Intervention Teams may not respond because they have no place to put the person. Therefore, it is usually wise to contact the police first and have them contact the crisis teams. The police have access to the beds. Otherwise, if a bed is not available, then the crisis team would not be able to process the transportation, resulting in having to release the person.

Police are usually contacted for “harm to self or others” while the psychiatric evaluation teams are requested if the person is gravely disabled.

19. How do I get hospitalization for my loved one?

There are many ways to get hospitalization. Often, a person is willing to go to the hospital because they know something is not right. If they are not willing to go and they are harmful to themselves or others, you should contact the police and explain the situation. It is important to let the police know why you think the person is a possible harm to themselves or others. Just by being psychotic does not, by law, allow for a 5150 hold.

If your loved one has private insurance or Medi-Cal or Medicare, then the police can transport your loved one to a hospital covered by the insurance. Otherwise a county hospital is where they will usually transport them. County hospitals employ good psychiatrists and offer good treatment.

20. Does my loved one need Medi-Cal or insurance to get hospitalization?

No. But if you do not have insurance, the psychiatrist will tend to stabilize and put your loved one back on the streets. It is wise if you ask social security to help you fill the forms to apply for SSI and Medi-Cal so you can give these forms to the social worker at the hospital to get your love one to sign them. Without resources, the hospital will not be reimbursed. The doctor appreciates your initiate.

21. Does my loved one need SSI or Social Security to get hospitalized?

No. But I suggest that you go immediately to the social security office and ask them to help you fill the papers for SSI for your loved one. Let them know your love one is in the hospital and the social worker will get them to sign the forms. This establishes an application date. When SSI is granted, the payments will be retroactive to the date which you submitted the initial application. It is also important to request to be the “representative payee.” The doctor can complete a form to be given to the social security office stating that the patient is not capable of managing their money. When he/she is hospitalized this is the best time to notify the social security office and inform them your loved one is in the hospital.

Social security must have a doctor evaluate your loved one for approval for SSI. So when they are in the hospital, this is the best time to have them evaluated. If the patient is turned down for SSI, you need to appeal the decision within the 60 day time period. If social security has a copy of your written case for treatment, it is rare to have to appeal their decision. The case most likely will be approved.

When you are approved for SSI then usually MediCal is approved simultaneously. You can receive Medi-Cal without SSI. Therefore, also apply for Medi-Cal if SSI is refused.

22. All these officials, who are they and what are their roles?

- Office of the County Counsel- represent Los Angeles County in all legal proceedings, including Public Guardian in establishing conservatorship;
- Attorney- mental health court utilizes a panel of private attorneys and draws from this panel to assign the conservator an attorney when needed. This attorney may be paid for by the court. A conservator may also choose to retain their own attorney.
- Public Defenders- represents person to be conserved and not the family
- Public Guardian- investigates LPS Conservatorship referrals and makes recommendations to the court
- District attorney- represents the hospitals with involuntary treatment; also can be more involved in criminal matters
- Court- ensures fairness and compliance with the laws in all proceedings involving involuntary treatment and conservatorships

23. What powers and responsibilities are generally given when the conservatorship is granted?

Conservator Powers With Respect to the Conservatee

Generally these authorities are granted by the court but occasionally some are not granted by the judge to the conservator.

- To place the conservatee in a private residence, licensed psychiatric or non-psychiatric residential care facility, board and care, nursing or other State licensed facility where the conservatee has free access into or out of the premises
- To place the conservatee in a portion of a private acute care psychiatric hospital, State or County hospital operated by the Regents of the University of California or by the United States Government, where the conservatee has free access into or out of the hospital.
- To place the conservatee in a licensed medical acute psychiatric hospital or psychiatric nursing facility (Institute for Mental Disease AKA IMD) or other State or County licensed facility, where the conservatee does not have free access into or out of the premises. Pending further order of the Court, this power shall terminate within one year.
- To require the conservatee to have treatment related specifically to remedying or preventing the recurrence of his her being gravely disabled.
- To require the conservatee to accept psychotropic medications.

24. What limitations are suspended for the Conservatee? These limitations can be re-instated with the courts approval.

- The privilege of possessing a license to operate a motor vehicle is suspended. This power can be returned with the courts approval while under an LPS Conservatorship. The conservator can ask the psychiatrist to petition the court to allow the person to drive. It is up to the court to grant permission for driving and it is the DMV that evaluates and issues the license. Don't ask for this during the LPS hearing.
- The privilege of possessing, controlling or maintaining custody of a firearm or any other deadly weapon is suspended.

- The right to refuse or consent to psychiatric treatment related specifically to the conservatee's being gravely disabled. Another words, they must take the medications when the conservator consents and approves of the medications.
- The right to enter into any contract, in which the consideration for performance is money or property, is suspended. This power can be returned to the conservatee with the courts approval.
- The right to refuse or accept medical treatment is suspended. The court must approve the medical treatment for the conservatee.

25. What do I do if the conservatee refuses to take their medication or leaves a treatment facility?

The court has taken away the right of the conservatee to refuse medication. The CA Welfare and Institutions Code 5358.5 states that the conservator has the right to request a peace officer transport the conservatee to a treatment facility when the conservator deems necessary. Speak with the Watch Commander at the police station. Politely give them a copy of the law, copy of your conservatorship and a written statement requesting police transport. Do not wait for your love one to decompensate to harm to self or others. Do this also if the person leaves their treatment facility.

26. Why should I keep a journal?

It is important to keep a journal to document hospitalizations, medications, behaviors and symptoms and their side effects. Your journal will help to cover the doctor's blind spot. It will assist the doctor and treatment teams to better evaluate and assess the treatment for diagnosis and recovery.

Note:

An LPS Conservatorship is a powerful tool to help your loved one regain their life very closely as they knew it before the illness. That is, if you can get treatment early enough in this disease your loved one can and will live a “normal” life.

The LPS gives you the power to work with the doctor to find the best medications for your loved one. I strongly suggest that you search the procedures used in the TMAP (from Texas psychiatric process for establishing medications) and work with the doctor. In a nut shell, you are searching for the least amount of medications and the right amounts. Don't be afraid to search for some of the latest medications which tend to have wonderful results and virtually no side-effects. www.schizophrenia.com is a great web site.

Therapy is also vital in combinations with the medication. Cognitive Therapy tends to help our loved ones recognize their illness and also learn how to handle their “triggers.” NAMI offers free Peer to Peer classes for people with these illnesses and free Family to Family classes for the family members. These are powerful classes in helping people understand and deal with these illnesses. DMH and NAMI now offer a Class for Conservators to provide your rights and solutions once the person is placed under the LPS Conservatorship.

KEEP A SENSE OF HUMOR TO SURVIVE!

Gail Evanguelidi

cell 337-781-7609

TREATMENT PREVENTS STIGMA

California LAWS

This California law gives the family the right TO PROVIDE pertinent historical mental health history to health care providers.

Cite as: Cal. Welf. & Inst. Code §5008.2.

(a)When applying the definition of mental disorder for the purposes of Articles 2 (commencing with Section 5200), 4 (commencing with Section 5250), and 5 (commencing with Section 5275) of Chapter 2 and Chapter 3 (commencing with Section 5350), the historical course of the person's mental disorder, as determined by available relevant information about the course of the person's mental disorder, shall be considered when it has a direct bearing on the determination of whether the person is a danger to others, or to himself or herself, or is gravely disabled, as a result of a mental disorder. The historical course shall include, but is not limited to, evidence presented by persons who have provided, or are providing, mental health or related support services to the patient, the patient's medical records as presented to the court, including psychiatric records, or evidence voluntarily presented by family members, the patient, or any other person designated by the patient. Facilities shall make every reasonable effort to make information provided by the patient's family available to the court. The hearing officer, court, or jury shall exclude from consideration evidence it determines to be irrelevant because of remoteness of time or dissimilarity of circumstances.

(b)This section shall not be applied to limit the application of Section 5328 or to limit existing rights of a patient to respond to evidence presented to the court.

California law allows LPS Conservators the right TO PLACE a person in a county treatment facility.

California Welfare Institute Act---Code 5300 5358.5.

When any conservatee placed into a facility pursuant to this chapter leaves the facility without the approval of the conservator or the person in charge of the facility, or when the conservator appointed pursuant to this chapter deems it necessary to remove his conservatee to the county designated treatment facility, the conservator may take the conservatee into custody and return him to the facility or remove him to the county designated treatment facility. A conservator, at his discretion, may request a peace officer to detain the conservatee and return such person to the facility in which he was placed or to transfer such person to the county designated treatment facility, pursuant to Section 7325 of the Welfare and Institutions Code. Such request shall be in writing and accompanied by a certified copy of the letters of conservatorship showing the person requesting detention and transfer to be the conservator appointed pursuant to this chapter as conservator of the person sought to be detained. Either the conservator or his assistant or deputy may request detention under this section.

Your loved one is under and LPS Conservatorship and the doctor does not speak with you nor request your approval for treatment, placement and medication then you can use the notification below.

FORM TO PROVIDE TO TREATMENT FACILITY

This statement informs treatment facility that they must notify you for permission for all medications, treatment and change in placement.

COURT NOTIFICATION OF TREATMENT

Date _____

Dear _____:

_____ is under LPS conservatorship.
(name of conservatee)

The court requires that I, ____(name of conservator) _____, as conservator, approve any and all changes to medication and treatment for _____(name of conservatee)___.

The court further requires that I, as conservator, approve any change in placement of conservatee and that I notify the court and conservatee’s attorney of any change of placement.

Failure to comply with these requirements of the court is equal to treating a patient without informed consent.

I look forward to working with you and cooperating fully to achieve the best treatment for conservatee. Respectfully, I request that you comply with the LPS conservatorship requirements.

If you need to contact me, the best telephone number to reach me is _____.
Should you have any questions, please contact me.

Thank you for your attention to this request and for your treatment of conservatee.

Sincerely,

Printed name, LPS Conservator for
(name of conservatee)_____, Case No.

Department 95A, Los Angeles Mental Health Court

Suggestions When Incarcerated

1. Your love one is taken to jail and not to the hospital
2. Search internet to locate your love one: myinmatelocator.com
3. Fill out the form for mental health on the site
<http://www.nami.org/namiland09/convention/CONVINmateMedicationInformationForm.pdf>
4. Research for the arraignment court and time from <http://losangelesinmateinfo.com/>
5. Call the DMH mental health liaison advocate (626-403-4370) to determine who is the liaison for the court where your love one will be having their arraignment heard. Give the liaison the mental health history and symptoms. Ask the liaison to help you get your love one in treatment or to help you get an LPS Conservatorship
5. Take several copies of the history and symptoms to court. Ask the bailiff who is the public defender and DA for your love one.
6. Give a copy of the mental health history and symptoms to the public defender and ask him/her to have the mental health liaison involved with this case. It is the public defender who must request the liaison. If the public defender will not do this, then go to the DA and ask for help.
7. Ask the DA and public defender to request that the judge order a mental health evaluation for your love one. This is called a mental health forensic.
8. Request the jail's doctor to initiate and LPS Conservatorship.
The LPS Conservatorship can only be given when the person is gravely disabled and mentally ill. Gravely disabled is when the person cannot provide food, clothing or shelter. If someone else provides these basic needs, then the person is not considered gravely disabled. When the person is in jail, the doctor can initiate the LPS Conservatorship with the public guardian's office if the person is not eating, if they tend to take their clothes off at inappropriate times or places, if they do not make sense, or cannot follow conversations.
9. When a person is in jail there might be a court logistic problem because the criminal court's judge cannot request the conservatorship. The judge can postpone the criminal sentencing while waiting for the treating doctor to seek the LPS. After which, the criminal court judge will tend to follow the recommendations for treatment and placement by the LPS courts.

This is a difficult process to work because of logistics and most people have no idea how to work this process. The suggestions above may vary from court to court. Good luck.

Competency hearings is not same as the LPS Conservatorship hearing.

RESOURCES

Access800-854-7771

Psychiatric Mobile Response Team (PMRT)213-738-3433

Monica 310-482-3260

Charles Lennon213-996-1325

Adult Protective Services (APS)916-419-7545

Assisted Outpatient Treatment (AOT)213-738-2440

Linda Boyd lboyd@dmh.lacounty.gov213-738-4431

Board of Supervisors

Hilda L. Solis1st District 213-974-4111

firstdistrict@bos.lacounty.gov

Mark Ridley-Thomas2nd District 213-974-2222

markridley-thomas@bos.lacounty.gov

Sheila Kuehl3rd District213-974-3333

sheila@bos.lacounty.gov

Janice Hahn4th District213-974-4444

fourthdistrict@bos.lacounty.gov

Kathryn Barger5th District213-974-5555

kathryn@bos.lacounty.gov

Countywide Resource Management (CRM)213-738-4775

DMH Court Linkages see attached list of programs and phone numbers

Twin Towers Mental Health Dr. Joseph Ortega213-974-9083

Fax213-687-8044

Century Regional Detention Facility,323-568-4531

Century Regional Detention Facility Supervisor Aubrey Lovelace323-568-4946

Department of Health Services

Acting Director Christina R. Ghaly, M.D. 213-240-8101

Department of Managed Health Care California(DMHC)916-255-2405

Department of Mental Health

Director of DMH Dr. Sherin, jsherin@dmh.lacounty.gov213-738-4601

Medical Director Dr. Rod Shaner, rshaner@dmh.lacounty.gov213-738-4603

Family Advocate Helena Ditko hditko@dmh.lacounty.gov213-351-1900

Patient Rights Advocate Martin Hernandez

Supervisor mhernandez@dmh.lacounty.gov

213-738-2524

Public Guardian Deputy Director Connie D. Draxler213-974-0407

Public Guardian Private Cons Liaison Kathie
 Van Dyke kvandyke@dmh.lacounty.gov
 213-974-0549

Department of Health Services Office of Diversion and Reentry 213-250-8501
 Peter Espinoza pespinoza2@dhs.lacounty.gov
 Department of Public Health Substance Abuse Prevention 844-804-7500
 626-299-4595

Full Service Partnership (FSP) 213-738-4620
 Dennis Griffin, Program Manager 213-738-4620
 Nicole Beaubien, Older Adults 60+ 213-738-2327
 Hosun Kwon, Adults 26-59 213-639-2868
 Helen Camacho-Fuller, Young Adults 18-25 213-351-7737

Medi-Cal 800-633-4227
 Medicare 800-633-4227

NAMI Los Angeles County Council (LACC) (www.namilacc.org) 213-386-3615
 NAMI Westside LA (www.namila.org) 310-889-7200
 NAMI URBAN LA.
 (www.namiurbanla.org)(info@namiurbanla.org). 323-294-7814
 NAMI Antelope Valley (www.nami.org/sites/nami-av) 661-341-8041
 NAMI East San Gabriel Valley 626-974-8702
 NAMI Glendale (namiglendale@gmail.com) 323-478-1656
 NAMI Long Beach Area (www.namilongbeach.org) 562-435-2264
 NAMI Pomona Valley (www.namipv.org) 909-399-0305
 NAMI San Gabriel Valley (www.namisangabrielvalley.org) 626-577-6697
 NAMI South Bay (www.namisouthbay.com)(pstans5@aol.com) 310-533-0705
 NAMI San Fernando Valley (www.namisfv.org) 818-994-6747
 NAMI Los Angeles So Central (namisocentral@gmail.com) 310-668-4271
 NAMI Whittier (namiwhittier@aol.com) 562-692-8006

Social Security 800-772-1213

Superior Court 95 (LPS Conservatorship Court)
 Metropolitan Court House 1945 S. Hill St, Los Angeles. 90007
 Supervising Judge J. Bianco (Dept. 95 B) (Room 400) Writs 323-441-1893
 Judge Robert Harrison (Dept. 95 A) (Room 401) (conservatorships) 323-441-1894
 Judge R. Longorio (Dept. 95) (Room 612) (competency cases) 323-441-1895
 Clerk's Office for calendar of hearings 323-441-1895
 Public Defender Verah Bradford 213-744-4374

ADDITIONAL INFORMATION

Kathie Van Dyke, Sr. Deputy Public Conservator Private Conservator
Liaison
Office of the Public Guardian
320 W. Temple St. 9th Floor
Los Angeles, CA 90012
www.kvandyke@dmh.lacounty.gov 213-974-0549 Fax: 213-633-4741

Helping Your Loved One a family guide to conservatorship and involuntary treatment

http://file.lacounty.gov/dmh/cms1_162215.pdf

or through Dept. of Mental Health website <http://dmh.lacounty.gov>

Click on Our Services then Public Guardian then the link for the PDF file.

California Legal Code: www.leginfo.ca.gov/calaw.html

L.A. SUPERIOR COURT WEBSITE www.lasuperiorcourt.org

You may down-load the forms for reappointment from this website. Go to "Civil" then "Mental Health" then "Forms".

RESIDENTIAL CARE

State Community Care licensing www.cclid.ca.gov/default.htm

Facilities for Adults: 323-980-4934

Facilities for Seniors: North LA County 818-596-4334 South LA County 310-568-1807

California Registry 800-777-7575 or 800-451-2273

California Health Care Foundation www.calnhs.org

Medicare Website Search Medicare.gov nursing home compare.

Complaints 800-228-1019 or 626-569-3724

<https://www.medicare.gov/nursinghomecompare/search.html>

ACCESS line: 800-854-7771 for emergency services and referral to county clinics.

FINANCIAL ASSISTANCE

Social Security www.socialsecurity.gov 800-772-1213

Peoples Guide to Social Security www.hungeractionla.org

Veteran's Administration 800-827-1000

General Medi-Cal 877-597-4777
Medi-Cal Long Term Care (nursing facility patients) 626-854-4987
FAMILY ADVOCATE: 213-738-3948
PATIENT'S RIGHTS ADVOCATE: 213-738-4888
National Alliance on Mental Illness (NAMI) for meeting locations/information:
www.nami.org or call 800-950-6264 or 310-889-7200
LOS ANGELES COUNTY BAR ASSOCIATION
Referral to an Attorney: 213-243-1525; Information on Various Legal Topics:
213-243-1500
NATIONAL LEGAL AID & DEFENDER ASS'N 202-452-
0620 www.nlada.org

Tri-City Mental Health Services

Elizabeth Owens, LMFT

Director of Clinical Program Services
909) 837-9468
ewens@tricitymhs.org

Gary Slaton

Program Manager

909) 973-1589

gslaton@tricitymhs.org

Debbie Johnson

Children's Department Program Manager

909) 762-4284

djohnson@tricitymhs.org

Dr. Seeyam Teimoori, MD

Medical Director
909) 973-5280
steimoori@tricitymhs.org

Shawn Smith

Crisis Intervention and Medication Support
Manager

909) 782-1006

ssmith@tricitymhs.org

Rimmi Hundal

Director of Mental Health Services Act and Ethnic Services
909) 643-9507
rhundal@tricitymhs.org

If the treating doctor refuses to initiate the LPS Conservatorship and the patient meets the California criteria of having a serious mental illness and being gravely disabled then send the email of the following paragraph to the the people listed below. Tweak the paragraph specifically to reflect what the status situation is for your love one.

Address this to:

Dr. Jonathan Sherin, DMH Director

And CC to:

Dr. Rod Shaner, DMH Medical Director

all five LA Board of Supervisors. These emails are listed above.

your CA state assembly person. Find this on the internet

your CA state senator. Find this contact on the internet

CEO of the hospital. (This may have to be FAXED)

Head of the Psychiatric Department at the treating hospital where your love one is staying. Can be hand delivered or FAXED

“Dear Dr. Sherin,

NAME OF PATIENT meets the California Welfare and Institutions criteria for the LPS Conservatorship in that he/she has a serious mental illness (*state the mental health diagnosis*) and is gravely disabled. He/she is gravely disabled in that he/she cannot provide for their food, clothing and shelter in a safe manner. See attached paper. (This is the paper in which their history, symptoms and gravely disabled is written). Furthermore he/she has a history of non-compliance with treatment and has no insight into their illness.

Please help to encourage the treating doctor (*NAME OF DOCTOR*) at (*TREATING FACILITY PLUS PHONE CONTACT*) to initiate the LPS Conservatorship with the public guardians office.”

Sincerely,

Your *NAME & Contact info.*”