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FROM: Nadia Privara Brahms, MPA, Director
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UPDATE ON CHANGES TO INVOLUNTARY BEHAVIORAL HEALTH TREATMENT IN SAN DIEGO COUNTY – ONE YEAR POST-IMPLEMENTATION

In October 2023, Senate Bill (SB) 43 was signed into law and amended the Lanterman-Petris-Short (LPS) Act which governs the involuntary detention and conservatorship of individuals with behavioral health conditions. On December 5, 2023 (6), the San Diego County Board of Supervisors (Board) directed the Chief Administrative Officer to establish a process to implement SB 43 on January 1, 2025.

On April 9, 2024 (19), the Board received an update on the progress and key actions needed to support readiness for the changes brought forth by SB 43, and since then, the following updates have been provided to the Board by the County of San Diego (County) Behavioral Health Services (BHS) via memoranda:

- On July 12, 2024, October 11, 2024, and January 10, 2025, comprehensive updates on advancing critical activities to establish readiness for the effective implementation of SB 43 were reported. This included updating involuntary hold evaluation criteria and assessment policies, which not only affected individuals with behavioral health conditions, but also had key operational impacts across sectors such as health care providers and law enforcement.
- An additional update was provided on July 1, 2025, with a summary of readiness activities and an interpretation of initial data post-implementation.

Today's final memorandum provides a summary of SB 43 implementation in San Diego County and includes interpretation of year one data and expansion of substance use treatment capacity for people with behavioral health conditions.

I. Data Review

Operational Monitoring

As part of preparations for SB 43, BHS monitored utilization trends across acute and crisis service levels that could be affected. Because hold-related information is not received in real time, service utilization was the most reliable early indicator. A review of utilization data across acute and crisis service lines before and after January 1, 2025, showed no changes that could be correlated with SB 43.

San Diego County Lanterman-Petris-Short State-Reporting

Lanterman-Petris-Short (LPS) involuntary hold and conservatorship data are received quarterly from San Diego County LPS designated facilities pursuant to SB 929 (2022). As noted in prior updates to the Board, SB 929 has been implemented through a phased rollout beginning in 2023. The statute seeks to improve transparency in involuntary behavioral health treatment by standardizing reporting on 5150 holds, temporary and permanent conservatorships, and selected demographic indicators, with data published annually. County-reported data now include holds conducted under the expanded grave disability criteria established by SB 43, effective January 1, 2025. These data are summarized in Table A below.

Analysis of 5150 holds, temporary conservatorships, and permanent conservatorships before and after SB 43 implementation (see Table A) does not show statistically significant increases. However, because these data are reported quarterly, the number of post-implementation data points remains limited. As additional data become available, the County will continue to monitor these trends closely to better understand the impacts of SB 43 over time.

Table A: State LPS Data Quarterly Trends in San Diego County

Hold Type	FY 23-24 Q4	FY 24-25 Q1	FY 24-25 Q2	FY 24-25 Q3	FY 24-25 Q4	FY 25-26 Q1	FY 25-26 Q2
5150 Holds	3,187	3,177	3,120	3,094	3,038	3,214	3,494
Temporary Conservatorships	44	61	27	44	48	69	61
Permanent Conservatorships	109	80	103	105	103	95	125

Office of the Public Conservator Data

On October 11, 2022 (3), the Board shifted the oversight of the Public Conservator to BHS. Since that time, BHS has worked to strengthen transparency of reporting and to utilize data for system planning, consistent with the requirements of the Behavioral Health Services Act (BHSA). The State also provides counties with conservatorship data as part of BHSA Phase 1, enabling comparisons to statewide trends.

According to the most recent Department of Health Care Services (DHCS) data from the California Involuntary Detentions Report, San Diego County's rate of newly established or re-established conservatorships, self-reported by LPS designated facilities only, is comparable to the California rate for Temporary conservatorships and above the California rate for Permanent conservatorships, as shown in Table B below.

Table B: Temporary and Permanent Conservatorship Rates Per 10,000 Residents

Conservatorship Type	California Rate	San Diego County Rate
Temporary	0.7 per 10,000	0.8 per 10,000
Permanent	2.8 per 10,000	3.9 per 10,000

Source: California Involuntary Detentions Data Report, Fiscal Year 2021/2022, California Department of Health Care Services – Licensing and Certification Division. Accessed online 12/2025 at <https://www.dhcs.ca.gov/services/MH/Documents/FY21-22-IDR.pdf>. *Note that this is the most recent data available at this time

Stand-Alone Involuntary Treatment for Chronic Alcoholism and Substance Use Disorder

In addition to total hold trends, LPS designated facilities now report when grave disability is due to alcohol use disorder or any substance use disorder. Since implementation, some individuals progressed from 5150 holds to extended holds (14-day or longer) and none progressed to conservatorship, demonstrated in Table C below.

Table C: Grave Disability due to Alcohol Use Disorder/Substance Use Disorder Stand-Alone Diagnosis by Fiscal Year (FY)

Hold Type	FY 24-25 Q3 1/1/25 - 3/31/25 (Start SB 43 Implementation)	FY 24-25 Q4 4/1/25 - 6/30/25	FY 25-26 Q1 7/1/25 - 9/30/25	Total
5150	37	20	43	100
14-day	2	15	8	25
30-day	1	1	2	4
Post-Cert 180-day	0	0	0	0
Temporary Conservatorship	0	0	0	0
Permanent Conservatorship	0	0	0	0

II. Substance Use Disorder Optimal Care Pathways (SUD OCP) Model and System Expansion Updates

The SUD OCP model continues to guide the County’s systemwide planning for building a continuum of substance use disorder services that improves health outcomes. Using local and national benchmarks, the SUD OCP identifies the ideal distribution of withdrawal management, residential, outpatient, and recovery support programs to meet community demand, improve treatment flow, reduce emergency system impacts, and increase access to clinically appropriate levels of care. Consistent with Board direction, BHS will return with relevant updates on the SUD OCP expansion efforts, including progress on network expansion, capital development initiatives, and additional capacity investments aligned with demonstrated community need.

In addition to the progress update to the Board on August 26, 2025 (25), BHS has made two new advances:

1. *Release of a Request for Statement of Qualifications (RFSQ) for Withdrawal Management and Residential Treatment Programs*

The new RFSQ is designed to expand provider participation, increase the diversity and geographic distribution of withdrawal management and residential treatment options, and ensure alignment with OCP-recommended service levels. This will allow BHS to onboard

additional providers as system demand grows and as SB 43 contributes to increased referrals for SUD-related care.

2. *Submission of a Grant Proposal for the Behavioral Health Wellness Campus*

BHS submitted a competitive grant application to support capital development for the region's planned Behavioral Health Wellness Campus (Wellness Campus). This project will expand access to a co-located continuum of services, including residential SUD treatment, crisis stabilization, outpatient behavioral health services, and supportive housing, intended to reduce fragmentation and strengthen care transitions. The Wellness Campus is a critical component of long-term OCP growth and regional capacity building. Funding awards are expected to be announced in Spring 2026.

Today's update serves as the final memorandum to the Board on progress with implementing SB 43 updates. The first year of operating under SB 43 reflects a system that was deliberately prepared, closely monitored, and responsive to emerging service needs. BHS will continue to assess utilization trends, conservatorship activities, and system impacts as data quality and reporting mature. Future reports to the Board will coincide with significant changes in trends.

For questions, please contact Nicole Esposito, MD, Chief Population Officer, Behavioral Health Services via phone at (619) 563-2700 or email Nicole.Esposito@sdcounty.ca.gov.

Respectfully,



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Director

Behavioral Health Services

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