




Agenda Date:

Board Briefing Report

DATE: May 16, 2025

TO: Board of Supervisors

FROM: Susan Holt, Director, Department of Behavioral Health Services 
Susan Holt (May 16, 2025 11:34 PDT)

SUBJECT: Senate Bill 43 Implementation and Countywide Impacts

EXECUTIVE SUMMARY

The purpose of this report is to provide an update on Fresno County's implementation progress for Senate Bill 43 (SB 43). Fresno County has deferred implementation until January 1, 2026, as allowed by law and consistent with most California counties. This report outlines planning efforts to date, anticipated impacts on behavioral health services, fiscal considerations, and next steps.

BACKGROUND

- SB 43 expands the definition of "gravely disabled" to include individuals unable to provide for basic personal needs for food, clothing, shelter, personal safety, or necessary medical care due to a mental health disorder, severe substance use disorder (SUD), a co-occurring disorder, or impairment from chronic alcoholism.
- On December 12, 2023, your Board approved Resolution 23-395 allowing for the deferment of SB 43 implementation in Fresno County until January 1, 2026.

ANTICIPATED IMPACTS

- Fresno County anticipates an increase in individuals receiving behavioral health services, particularly those with severe SUD who may now qualify for involuntary detention or conservatorship. This will require significant coordination with hospitals, courts, law enforcement, the Public Guardian, Patients' Rights Advocates, Certification Review Hearing Officers, and contracted providers.
- Training protocols are being developed for Landerman-Petris-Short (LPS) Act-designated facility staff and law enforcement to recognize behaviors indicative of severe SUD. Training aligns with guidance from the County Behavioral Health Directors Association of California and California State Association of Public Administrators, Public Guardians and Public Conservators and emphasizes identifying probable cause for

detention. SB 43 also introduces new data collection and reporting requirements that will increase operational and fiscal demands.

- Facility capacity remains a key issue. Licensed settings for individuals detained under the expanded criteria are limited and must be assessed for compliance and service delivery readiness. Staffing, training, and credentialing needs are under review. Fresno County continues to monitor models from early adopters, such as San Diego County's partnership with Exodus Recovery, Inc.

BENEFITS AND CONSIDERATIONS

- SB 43 presents opportunities to improve access to care for individuals with severe SUD who previously fell outside the LPS framework. Early intervention may prevent further deterioration and support long-term recovery. Safeguards will remain in place to avoid inappropriate use of involuntary treatment. Fresno County remains committed to protecting civil liberties while ensuring access to high-quality care. Public education and reducing stigma around involuntary intervention are ongoing priorities.
- There are currently no established evidence-based models for locked involuntary SUD treatment in California. The state also lacks dedicated facilities for this population. Fresno County continues to engage with state partners and is committed to building both voluntary and involuntary treatment capacity, including long-term residential and outpatient options.

CURRENT PROGRESS

- The Department of Behavioral Health (DBH) is preparing for the fiscal and operational impacts of SB 43, focusing on infrastructure readiness, service delivery expansion, and alignment across the behavioral health system. A central challenge is identifying facilities that can serve individuals detained under the expanded "grave disability" criteria.
- Under current law, only General Acute Care Hospitals (GACHs) with chemical dependency units and Acute Psychiatric Hospitals (APHs) with chemical dependency units may provide extended involuntary treatment (14 to 60 days). Fresno County currently lacks such facilities; however, contracts are in place with two APHs, and additional agreements are being pursued.
- Effective January 1, 2025, SB 1238 expands licensure of Psychiatric Health Facilities (PHFs) and Mental Health Rehabilitation Centers (MHRCs) to treat individuals with severe SUD on involuntary holds. Fresno County holds agreements with six MHRCs, including two local and four in other counties, providing a total of 466 beds.
- The County is working with Exodus Recovery, Inc., which operates Fresno's Adult PHF, to explore conversion of that facility for SB 43 compliance. Exodus has transitioned its San Diego CSC for this purpose. Given the PHF's 16-bed capacity and near-full

occupancy, a detailed analysis is underway to assess clinical, operational, and regulatory needs for treating the SB 43 population.

- To address capacity needs, Fresno County submitted an application for funding under the Behavioral Health Infrastructure Bond Act for the construction of a new PHF dedicated to persons with severe SUD or co-occurring severe SUD and mental health conditions. This 16-bed facility would double Fresno County's adult PHF capacity overall and provide dedicated SUD focus for the expanded SB 43 population.
- Regional coordination is ongoing with Merced and Stanislaus Counties to share planning strategies, policies, and potential resource alignment. These efforts support broader system readiness given the lack of existing locked treatment models for involuntary SUD care.
- On April 28, Fresno County held a SB 43 Convening with 92 participants representing the full crisis care continuum, including law enforcement, the courts, Emergency Medical Services (EMS), hospitals, emergency departments, behavioral health and SUD providers. The session provided a SB 43 overview and collected input on implementation challenges. Subgroup work is underway in May to address key issues identified in the Needs Assessments completed during the session.

RECOMMENDATION

Fresno County anticipates being fully compliant with SB 43 by the January 1, 2026 implementation deadline. Achieving this compliance will require ongoing policy, programmatic, and fiscal support from the state. While the full fiscal impact remains under evaluation, DBH is collaborating with state and local partners to refine cost projections and will provide the Board with updates and recommendations as necessary.

CONTACT PERSON

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