

An Educational Guide for Families and Caregivers of Young People

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You are reading this because you are a parent, guardian, caregiver, or another supporter of a young person experiencing a mental health crisis. This is likely a stressful and confusing time. You have an important role in the care and recovery of your loved one. The purpose of this tool is to make things a little easier.

First, please know that your young person is not alone. Globally, one in seven 10 to 19 year olds experiences a mental disorder, according to the World Health Organization. Closer to home, we have seen an increase in the number of children and adolescents needing mental health care, particularly since the onset of the COVID-19 pandemic in early 2020.

This guide is designed to assist you in supporting youth during and following a mental health crisis. It includes information about how to recognize the signs of a mental health crisis, what resources are available to you, options for treatment, what to expect in the process, and more.

Your loved one may choose to access a variety of services, including temporary psychiatric hospitalization. Depending on the severity of individual circumstances, they may also require involuntary care. In California, the Welfare & Institutions Code provides guidance on when a person — including youth — can be taken into custody, initially for a period of up to 72 hours, for crisis intervention, assessment, safety, and discharge planning.

This document will guide you in making informed decisions involving your youth's mental health needs, prepare you for what might come next, and equip you with knowledge of minor consent and confidentiality laws, patient rights, and possible recourse if there is a problem with patient care.

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While evidence of mental health crisis can vary from person to person, it often shows as changes in behavior that include:

- Rapid mood swings
- Agitation
- Aggressive behavior
- Confused thinking or irrational thoughts
- Verbally stating, writing, or insinuating they'd like to hurt themselves or someone else
- Talking about death or dying
- Giving away belongings
- · Texting, posting, or saying goodbye
- · Extreme energy or lack of energy
- Changes in the completion of daily tasks
- Withdrawing from typically attended social situations
- · Changes in diet, not eating, or eating all the time
- · Hallucinations, delusions, or paranoia
- Losing touch with reality



If your youth is struggling with how they are feeling or thinking and needs to talk with someone, contact local crisis programs for help. There is no crisis that is too big or too small, so do not hesitate to reach out for help.

- Talk to a counselor at your child's school.
- · Contact your insurance company for a list of covered providers who work with children and adolescents.
- For youth with Medi-Cal, contact your county behavioral health department.

Local Resources

El Dorado County

- · Crisis Hotline: Placerville West Slope, (530) 622-3345 and South Lake Tahoe, (530) 544-2219
- · 988 Suicide & Crisis Lifeline: Call, text, or chat

Placer County

- Placer County Intake and Mobile Crisis Team: (916) 787-8860
 In-person response is available Monday-Friday, 9 a.m.-7 p.m. for all youth; and Saturdays, 10 a.m.-7 p.m. for youth ages 16 and older
- Call 211: A 24-hour hotline that connects you to help and resources; information is also available online

Sacramento County

- The Source: Call or text 916-SUPPORT (916-787-7678) or chat 24/7 online
- Mental Health Urgent Care Walk-in Clinic: 2130 Stockton Blvd., Building 300, Sacramento or call (916) 520-2460

San Joaquin County

24-hour crisis line: (209) 468-8696
Prevention services: (209) 468 2005

Sutter-Yuba counties

- 24-hour crisis/warm line: (530) 673-8255 or (888) 923-3800
- Psychiatric Emergency Services Clinic: 7 a.m.-11 p.m., 1965 Live Oak Blvd., Yuba City
- Adventist-Rideout emergency department, 24/7 if it's a life-threatening emergency: 726 Fourth St., Marysville

Yolo County

- 2-1-1 Yolo County: Information hub linking residents to vital health and human services resources and highly trained specialists 24/7
- Yolo County Mental Health Crisis and Access Line: (888) 965-6647, available 24/7 for individuals who have a mental health crisis or who are seeking to access mental health treatment

Help During an Urgent Mental Health Crisis (continued)

State and National Resources

Behavioral Health California

· Find and access quality behavioral health care providers in California.

Disability Rights California

 Disability Rights California serves as California's advocacy system for human, legal, and service rights for individuals with disabilities.
 (916) 504-5800

National Alliance on Mental Illness (NAMI) & NAMI California

National Suicide Prevention Lifeline

(800) 273-8255

Crisis Text Line

Text 741-741 to connect with a trained crisis counselor to receive free, 24/7 support via text message



When other local resources are not enough, your child or adolescent may need more intensive, more immediate care.

- If they are at risk of suicide, call 988.
- For other mental health emergencies call 911, or you may take them to the hospital emergency room.
- If someone wants to hurt themselves or others, SEEK HELP RIGHT AWAY.

What Can You Expect at the Hospital?

If your youth is experiencing a mental health emergency, going to your hospital emergency department is the right next step. If eligible, they may agree to voluntary hospitalization. You may also consent to voluntary hospitalization on their behalf. While there, your youth's health care team (doctors, nurses, social workers, et. al) will determine your youth's medical needs and short-term mental health recommendations. The team will help your youth get the appropriate urgent medical treatment and will make recommendations for follow-up medical care. During this time, your youth may receive a medical assessment, including vital signs, diagnostic tests, lab tests, etc.

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Many young patients will not need to go into an inpatient psychiatric hospital, but for those who do, the transfer process can take anywhere from several hours to several days. Various factors affect how long your youth may stay at the hospital while waiting to be transferred to a psychiatric hospital, including:

- Treatment of a critical medical condition or injury
- · Assessment of the cause of your youth's crisis, which may be due to a mental illness
- Insurance

Planning for Discharge

A member of the treatment team, who could be a social worker, therapist, counselor, nurse, or other hospital staff, will speak with you prior to discharge to discuss the family's goals, preferences, and needs to begin developing a discharge plan for when your youth leaves the hospital. The primary provider overseeing your youth's care will also be involved to ensure that this plan aligns with your family's goals for the care and treatment.

Seeking Care for a Mental Health Emergency (continued)

The following elements will be used to develop your youth's plan and connect you to providers who can offer support after discharge:

- · Your youth's diagnosis and treatment needs
- · Medical issues and past medical history
- · Your insurance company's provider list
- · Ongoing needs after discharge
- · Any safety risks that may require inpatient treatment
- · Your social, family, psychological, employment, food, housing, and transportation needs
- · Communication needs, language barriers, diminished eyesight or hearing, and literacy

When the member of the treatment team meets with you and your youth, they will help you select a provider. You and your youth should be involved in the development of the discharge plan so that you can prepare for the next steps after discharge.

Discharge options may include:

- · Releasing youth to you or another family member, guardian, or caregiver
- Having your youth continue treatment in the hospital on a voluntary basis (and the hold may be released if applicable)*
- Transferring your youth to a psychiatric hospital you have the right to request a specific location depending on availability

*You may have concerns about releasing the hold (if applicable) — these concerns can be discussed with the treatment team to identify options.

When the member of the treatment team meets with you and your youth, they will help you select a provider. You and your youth should be involved in the development of the discharge plan so that you can prepare for the next steps after discharge.



Types of Mental Health Holds

5150 and 5585: According to state law (Welfare & Institutions Code 5150 and 5585), when there is probable cause that a youth — as a result of a mental health disorder— is a danger to themselves or others or is gravely disabled, they may be taken into custody for an initial period of up to 72 hours for crisis intervention, assessment, and safety and discharge planning by the following individuals:

- A peace or probation officer
- · A professional person in charge of a facility designated by the county for mental health evaluation and treatment
- · A member of the attending staff of a facility designated by the county for mental health evaluation and treatment
- · A designated member of a mobile crisis team or a professional person designated by the county

1799 or 1799.11: These sections in California's Health and Safety code permit emergency department physicians to involuntarily detain a patient for a psychiatric evaluation, if they believe that the patient is a danger to self, others, or gravely disabled as a result of a mental health condition. A 1799 hold is different from a 5150 hold because it only allows a patient to be held for 23 hours. A 5150 hold lasts for 72 hours on admission to a designated acute psychiatric hospital. 5150 holds are intended for county-designated psychiatric facilities and 1799 holds are for non-designated facilities (like an emergency department). The 1799 hold gives the emergency department time for qualified and credentialed staff to conduct an assessment for 5150 eligibility.

What Happens While on a Mental Health Hold?

If your youth has been placed on a Welfare & Institutions Code 5150 hold, they will be taken to a medical hospital for a medical clearance evaluation, or you may take them to the emergency room.

Medical Clearance: Prior to admission to an acute inpatient psychiatric hospital, medical clearance is often needed to determine if a patient would be physically safe and stable enough to receive treatment in that facility. Medical clearance or a medical examination involves evaluation of the patient by a physician, nurse practitioner, or physician's assistant to identify specific health needs and medical conditions that may require stabilization, follow-up, and/or monitoring. Before being discharged from a medical setting, the patient's medical condition must have resolved or they must be stable enough to be medically treated as an outpatient. The scope of most acute inpatient psychiatric hospitals is limited to basic life support, so they are unable to treat ongoing medical conditions.

Youth Mental Health Hold Overview (continued)

How Long Can a Mental Health Hold Last?

Under **Welfare & Institutions Code 5150,** the initial assessment, evaluation, and crisis intervention hold can last up to 72 hours.

Under Welfare & Institutions Code 5250, a youth can be detained longer if:

- The professional staff of the agency or facility has analyzed the person's mental health condition and has found the youth is a danger to self or others or is gravely disabled
- The facility providing intensive treatment is designated by the county to provide intensive treatment, and agrees to admit the youth
- The youth has been advised of the need for but has not been willing or able to accept treatment on a voluntary basis

The youth has the opportunity to contest the hold. A hearing will be set **within four days** to determine whether the youth meets the criteria to be certified (held) for **not more than 14 days** of intensive treatment related to the mental health disorder.

For more information, contact Disability Rights California at (916) 504-5800.

Note: Under Welfare & Institutions Code 5585.25, a "gravely disabled minor" means that as a result of a mental health condition a minor is unable to meet the basic needs that are essential to health, safety, and development. This includes food, clothing, and shelter, even though it may be provided to the minor by others. Intellectual disability, epilepsy, or other developmental disabilities, alcoholism, other drug abuse, or repeated antisocial behavior do not — by themselves — constitute a mental condition.

Under Welfare & Institutions Code 5270.15, upon the completion of a 14-day period of intensive treatment resulting from the 5250 hold, the youth may be certified for an additional period of not more than 30 days of intensive treatment under both of the following two conditions:

- The professional staff of the agency or facility treating the person has found that the person remains gravely disabled as a result of a mental disorder or chronic alcoholism
- · The youth remains unwilling or unable to accept treatment voluntarily

The youth has the opportunity to contest the hold. A hearing will be set within four days to determine whether the youth meets the criteria to be certified (held) for not more than 14 days of intensive treatment related to the mental health disorder.



Every effort should be made to provide treatment in the least restrictive setting in your community; however, psychiatric hospitalization may be necessary in circumstances where a youth cannot keep themselves safe.

What Does Inpatient Treatment Include?

Treatment starts with an evaluation that includes talking to you and your youth about why they are in the hospital, reviewing current and past mental health symptoms, getting information from people who know them, and any records from doctors and hospitals that have served them in the past. In some facilities it may also consist of a physical exam and laboratory tests to find out if there are medical conditions or medications that may be affecting the way your youth is feeling or acting.

The treatment team will use the evaluation findings to diagnose any mental health conditions. They will get input from you and your youth to develop a plan for treatment and discharge. While at the hospital, activities may include individual and/or group therapy and taking medications orally or via injection.

What is a Typical Inpatient Day Like?

Each day, the youth follow a structured schedule that may include assessment and treatment planning, group therapy, individual therapy, recreational activities, family sessions, vitals checks, medication evaluations, and private time for reflection and working on written assignments.

Are Families Involved?

Yes! It is extremely important that family members participate in treatment. This requires your youth to sign a Release of Information form. Family members and other supporters are essential members of each youth's treatment team and assist in healing. It is also very helpful for families to understand and participate in the discharge and after-care plans in order to have a smooth transition back to home, school, and the community. Your encouragement can help your youth continue practicing the skills they have learned. Your support makes a difference.

What if I Don't Have Insurance to Pay for Treatment?

There are several options for those who do not have insurance but need mental health treatment. Hospital staff will work with you to ensure your youth get the care they need. The following options are available:

- Many young people are eligible for Medi-Cal, which will allow you to access private hospitals that offer inpatient mental health services at no cost to you. Ask your social worker or hospital staff how to access.
- If you have private insurance, hospital staff may contact your insurance provider to discuss options and eligibility for inpatient hospitalization.



Every family's situation is unique, and you may need to explore different providers to find the right fit for ongoing services after discharge. It is essential to work with your discharge planner and insurance provider for coordinating care to find out what affordable and helpful options are available.

Safety Planning

Safety planning is about brainstorming ways to stay safe that may also help reduce the risk of future harm. It can include planning for a future crisis, considering options, and making decisions about the next steps. This sample safety plan can be used when working with your treatment team to develop a safety plan that is tailored to your youth's specific needs.

Sample Safety Plan

STEP 1: Warning Signs (thoughts, images, mood, situation, behavior) that a crisis may be coming	
1.	
2.	
3.	
STEP 2: Coping Skills – Things I can do to take my mind off my problems without talking to another person (examples: relaxation, music, exercise, breathing)	
1.	
2.	
3.	
STEP 3: People and social settings that distract me	
1.	
2.	
3.	
STEP 4: People I can ask for help	
1.	
2.	
3.	
New providers' names, contact information and appointment details	
1.	
2.	
3.	
Other helpful resources	
1.	
2.	
3.	



California Minor Confidentiality and Consent Laws

Generally, if the minor did not and could not have consented to care, a parent or guardian has the right to access the minor's medical information pursuant to Civil Code section 56.10.

However, under Health and Safety Code section 123115(a)(2), the parent or guardian of a minor shall not be entitled to inspect or obtain copies of the minor's patient records where the health care provider determines that access to the patient records requested by the parent or guardian would have a detrimental effect on the provider's professional relationship with the minor patient or the minor's physical safety or psychological well-being. The decision of the health care provider as to whether a minor's records are available for inspection under this section shall not attach any liability to the provider, unless the decision is found to be in bad faith.

Under this section, the health care provider shall make a written record, to be included with the mental health records requested, noting the date of the request and explaining the health care provider's reason for refusing to permit inspection or provide copies of the records, including a description of the specific adverse or detrimental consequences to the patient that the provider anticipates would occur if inspection or copying were permitted.

Patient Rights

During hospitalization, the hospital will provide you with information on patient rights.

The California Department of Health Care Services is required to ensure that mental health laws, regulations, and policies for the rights of mental health service recipients are observed in licensed mental health facilities.

- · Patients' rights
- County Offices to Apply for Health Coverage, Medi-Cal, and Other Benefits

The <u>California Association of Mental Health Patients' Rights Advocates</u> (CAMHPRA) is a statewide organization comprised of county patients' rights advocates mandated by state law, private and public interest attorneys, consumers of mental health services, and representatives from other advocacy organizations. CAMHPRA is dedicated to protecting and advancing the legal rights and treatment interests of individuals with mental health disabilities.

What if I'm Not Happy with the Care My Youth is Receiving?

Hospitals strive to provide the best care possible. However, there may be times when you are not satisfied with the care your youth is receiving. If you believe you or your youth's rights have not been observed, the following actions may help:

Discuss your concern with any staff member in person and/or in writing.

Appendix (continued)

- Request to speak to a patient advocate at the hospital, who can help you navigate the hospital's complaint and
 grievance process. This person serves as an advocate for those admitted to the hospital. The patient advocate is
 available to both young people and their families, and can assist in clarifying information, supporting your rights, and
 connecting people to the right resources. The patient advocate can also help with grievances and can pass along
 complaints regarding your rights and the quality of care and service at the hospital.
- If you have a concern about your rights, you may discuss your concerns with your attorney.

Complaints and Grievances

- California Department of Health Care Services, Behavioral Health Care Compliance (888) 466-2219
- Department of Managed Health Care
- Department of Insurance