



7.2.30 MENTAL HEALTH DIVERSION – CLIENT PLACEMENT RECOMMENDATION

Issue Date: 5/12/2026

Revision History: Not Applicable

References: Penal Code (PC) section 1001.36 and Welfare and Institutions Code (WIC) 4361

Policy Owner: Behavioral Health Division, Acute & Forensic Services Section Manager

Director Signature: Signature on File

I. Policy Statement

The California Department of State Hospitals (DSH) requires clear guidelines and procedures for operating the Felony Mental Health Diversion (MHD) Program. This policy was created to enable the Sonoma County Behavioral Health (SCBH) Felony MHD team to demonstrate compliance with Penal Code (PC) section 1001.36 and Welfare and Institutions Code (WIC) 4361, and to serve as a reference for staff.

II. Scope

This policy applies to all Sonoma County Department of Health Services, Behavioral Health Division (DHS-BHD) staff who are assigned to provide Specialty Mental Health Services (SMHS) in the Felony MHD Program.

III. Definitions

A. ACCESS Sonoma County Interdepartmental Multidisciplinary Team (IMDT): ACCESS (Accessing Coordinated Care Empowering Self Sufficiency) Sonoma County IMDT. The ACCESS Sonoma County program identifies the most vulnerable residents, often high utilizers of county services across multiple county departments, and provides holistic, wraparound services using the IMDT approach of care coordination and case management.

- B. Department of Health Services, Behavioral Health Division (DHS-BHD): The Sonoma County entity responsible for administering publicly funded behavioral health services.
- C. Felony Mental Health Diversion (MHD) Program: DHS-BHD operates a Specialty Mental Health Services (SMHS) outpatient treatment program for individuals participating in the MHD Court. The program provides SMHS using the Assertive Community Treatment (ACT) model of care.
- D. Health Program Manager (HPM): A DHS-BHD staff management position that oversees one or more outpatient treatment programs for clients receiving services within the SCBH network continuum of care.
- E. Incompetent to Stand Trial (IST): A legal term that denotes a defendant's lack of capacity to participate in legal proceedings or assist in their own legal defense.
- F. Mental Health Diversion (MHD): Pursuant to Penal Code (PC) section 1001.36 and Welfare and Institutions Code (WIC) 4361, allows felony IST defendants to participate in intensive community mental health treatment in lieu of inpatient DSH competency restoration treatment.
- G. Pronoun Usage: Throughout this policy, the singular "they/their" is used as a gender-neutral pronoun to promote clarity, readability, and inclusivity.
- H. Specialty Mental Health Services (SMHS): SMHS include, but are not limited to, the following: Assessment, Plan Development, Rehabilitation Services, Therapy Services, Collateral, Medication Support Services, Targeted Case Management, Crisis Intervention, Intensive Care Coordination (ICC), Intensive Home-Based Services (IHBS), and Therapeutic Behavioral Services (TBS). SMHS are provided to Medi-Cal members through Sonoma County Mental Health Plans (MHPs). All the MHPs are part of Sonoma County Mental Health or Behavioral Health departments. The MHP may provide services through its own employees or through contracted providers.

IV. Policy

This policy is to ensure all program staff assigned to the DHS-BHD MHD Program adhere to the requirements set forth by the DSH under Penal Code (PC) section 1001.36 and Welfare and Institutions Code (WIC) 4361. This policy also provides procedural guidelines for making placement recommendations for participants in the MHD Program.

V. Procedures

A. Placement Recommendations

1. Assigned Staff Positions

a. Eligible Positions

- i. Staff positions eligible to complete eligibility determinations and suitability reports, including providing placement recommendations for clients screened for the MHD Program, are as follows:

- (1) Health Program Manager.

- (2) Diversion Court Liaison.

- (3) MHD Program Suitability Evaluator.

- ii. Clinical Licensure

- (1) Positions must hold a clinical license in one of the following professions:

- (a) Psychiatrist.

- (b) Licensed Psychologist.

- (c) Licensed Clinical Social Worker.

- (d) Licensed Marriage & Family Therapist.

- (e) Licensed Professional Clinical Counselor.

- (f) Registered Nurse with an MA Degree.

B. Identifying Placement Recommendation

1. Process

- a. The DHS-BHD MHD Program Suitability Evaluator, or their designee, will identify and provide placement recommendations when responding to court orders requiring MHD eligibility and suitability determination reports to Sonoma County Superior Court.
- b. The DHS-BHD MHD Program Suitability Evaluator, or their designee, will always consider the least restrictive placement when making placement recommendations.

- i. Assessments will be based on the individual treatment needs of the client.
- c. The DHS-BHD MHD Program Suitability Evaluator, or their designee, will utilize Policy No. 7.2.32, *Mental Health Diversion – Identification, Referral, and Evaluation*, for eligibility determinations and evaluation procedures.
- d. In order to provide an accurate and least restrictive placement recommendation, the MHD Program Suitability Evaluator will obtain and review the following collateral records (if available):
 - i. Research of justice history using Sheriff’s Department Crim-Net platform.
 - ii. Arrests records, including instant offense and criminal history.
 - iii. DHS-BHD clinical records of treatment, both current and historical.
 - iv. Alienist reports, both current and historical.
 - v. Clinical treatment records from in-custody mental health providers and other healthcare entities.
 - vi. Making collateral contact with family members and caregivers, pending an appropriate release of information.
- e. Final Determination of Placement
 - i. A DHS-BHD Diversion Court Liaison will be the primary point of contact for the final placement recommendation.
 - ii. The MHD Court will authorize Felony MHD Program participation upon determination of client’s suitability and dangerousness.

C. Recommended Treatment Plan

1. Treatment Plan Focus

- a. A comprehensive recommended treatment plan will be developed upon the completion of each court ordered eligibility determination and suitability evaluation report. The treatment plan should consider:
 - i. Client choices and preferences.
 - ii. Client’s personal goals.
 - iii. Least restrictive settings.

- iv. Specific and viable treatment interventions.
- v. Whole person approach.
- vi. A writing style that is easy to read and comprehend.
- vii. Recommendations that are linked to actual treatment needs as established by any:
 - (1) Unaddressed mental health, medical, or substance use treatment need.
 - (2) Factors related to instant offense.
 - (3) Unresolved criminogenic factors.
 - (4) Unaddressed functional impairment.

2. Placement Types

- a. The MHD Program Suitability Evaluator will identify placement recommendations as a part of each recommended treatment plan. The types of placements under consideration include:
 - i. Inpatient Psychiatric Hospitalization.
 - ii. Crisis Residential Unit (CRU).
 - iii. Crisis Stabilization Unit (CSU).
 - iv. Crossroads to Hope – Transitional Housing.
 - v. Community Homeless Shelter.
 - vi. Sober Living Environments.
 - vii. Transitional Housing.
 - viii. Supported Living.
 - ix. Independent Living.
- b. Designated DHS-BHD staff will attempt to identify and coordinate potential placements at the weekly ACCESS Sonoma IMDT meetings.

D. Client Notification

1. Notification

- a. The Defense Counsel will review both the recommended treatment plan and the placement recommendation, prior to completing the contract for MHD Court.
 - i. Clients should be provided a copy of their recommended treatment plan, including the placement recommendation, upon request and/or at their first appearance in MHD Court.

VI. Forms

None

VII. Attachments

None