Involuntary Hold Guidelines

All code sections cited refer to the Welfare and Institutions Code.

In all cases, a patient who meets the legal definition of voluntary status, should be allowed to receive treatment on a voluntary basis.

5150: Initiated after face-to face assessment with patient, when it is determined that inpatient treatment is necessary, and patient is not willing or able to stay voluntarily. The detention can be ended before the conclusion of the 72-hours, if patient is ready to be discharged, if patient signs in voluntarily, or is placed on a subsequent hold.

5250: Needs to be initiated before the end of the 5150. Requires a face-to-face assessment of patient. **First signature** on form needs to be the professional person (or their designee) in charge of the agency or facility providing the evaluation services.

 A designee of the professional person in charge of the agency or facility shall be a physician or a licensed psychologist who has a doctoral degree in psychology and at least five years of postgraduate experience in the diagnosis and treatment of emotional and mental disorders.

Second signature should be a physician or psychologist who participated in the evaluation. The physician shall be, if possible, a board-certified psychiatrist. The psychologist shall be licensed and have at least **five** years of postgraduate experience in the diagnosis and treatment of emotional and mental disorders.

If the professional person in charge, or his or her designee, is the physician who
performed the medical evaluation or a psychologist, the second person to sign
may be another physician or psychologist unless one is not available, in which
case a LCSW, LMFT, LPCC, or a registered nurse who participated in the
evaluation shall sign the notice of certification.

A copy of the form needs to be given to the patient.

5270: Needs to be initiated before the end of the 5250, but not before 72-hours prior to the expiration of the 5250. Same signatory requirements from the 5250 exist.

A copy of the form needs to be given to the patient.

If, related to any of the above holds, patient signs in voluntarily, but then is later put on a hold (or back on a hold), the patient gets "credit" for the time they spent in the hospital voluntarily (the new hold date would backdate to the date of the expiration of the original hold). Put another way, the "clock" starts ticking when the patient is placed on the first detention, and any counting of total days should be started from that point.

Temporary Conservatorship: Must be filed no later than 9 days into the 14-day hold, or on the FIRST day of the 5270.

Permanent Conservatorship: Must be filed by the end of the T-Con. Patient is then able to request a trial by jury.

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