

RESOLUTION NO. 2021-__

**RESOLUTION OF THE NAPA COUNTY BOARD OF SUPERVISORS,
STATE OF CALIFORNIA, DESIGNATING PROFESSIONAL PERSONS
WHO MAY DETAIN PERSONS WITH MENTAL HEALTH DISORDERS,
EFFECTIVE JULY 20, 2021**

WHEREAS, sections 5150 and 5585.50 of the California Welfare and Institutions Code (WIC) authorize a county to designate professional persons who may, upon probable cause, take, or cause to be taken, into custody persons for a period of up to 72 hours who, as a result of a mental health disorder, pose a danger to themselves or others, or are gravely disabled, and require assessment, evaluation, and crisis intervention, or placement for evaluation and treatment in a facility designated by Napa County or another county and approved by the State Department of Health Care Services; and

WHEREAS, on June 7, 2011, the Board of Supervisors passed Resolution number 2011-57 designating professional persons who may detain persons with such mental health disorders; and

WHEREAS, on April 18, 2017, due to the opening of a crisis stabilization unit, the Board of Supervisors passed Resolution number 2017-63 revising the County's list of designated professional persons; and

WHEREAS, due to the need for a broader array of clinical staff who may detain persons with mental health disorders, the County wishes to further revise its list of designated professional persons; and

WHEREAS, the County finds that the professional persons identified below have the experience and shall receive the training necessary to detain persons pursuant to WIC sections 5150 and 5585.50.

NOW, THEREFORE, BE IT RESOLVED that the Napa County Board of Supervisors authorize, pursuant to WIC sections 5150 and 5585.50, that the following professional persons, while on duty or in the scope of their employment, or in the course of providing services on behalf of the County, may, upon probable cause, take, or cause to be taken, into custody persons for a period of up to 72 hours who, as a result of a mental health disorder, pose a danger to themselves or others, or are gravely disabled, and require assessment, evaluation, and crisis intervention, or placement for evaluation and treatment in a designated facility:

1. Napa County Psychiatric Medical Director; and
2. Napa County Mental Health Director; and
3. Psychiatrists employed by or provided through a contract with Napa County Mental Health; and
4. Licensed or Registered Clinicians employed by or provided through a contract with Napa County Mental Health.

BE IT FURTHER RESOLVED that the professional persons enumerated above shall attend initial and ongoing training, as determined by the Napa County Mental Health Director, and shall be certified to initiate involuntary detentions in order to acquire and retain the authority granted herein.

BE IT FURTHER RESOLVED that failure of a professional person to comply with the provisions of this Resolution or to attend required training and maintain certification shall result in the immediate and automatic revocation of the authority granted to that professional person by this Resolution.

BE IT FURTHER RESOLVED that effective with the adoption of this Resolution, the Board of Supervisors hereby rescinds prior Resolution regarding designations of professional persons to the extent they are in conflict with this Resolution.

BE IT FURTHER RESOLVED that this Resolution shall take effect immediately upon its adoption by the Board of Supervisors.

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THE FOREGOING RESOLUTION WAS DULY AND REGULARLY ADOPTED
by the Napa County Board of Supervisors, State of California, at a regular meeting of the Board
held on the 20th day of July 2021, by the following vote:

AYES: SUPERVISORS _____

NOES: SUPERVISORS _____

ABSTAIN: SUPERVISORS _____

ABSENT: SUPERVISORS _____

NAPA COUNTY, a political subdivision of
the State of California

By: _____
ALFREDO PEDROZA, Chair of the
Board of Supervisors

<p>APPROVED AS TO FORM Office of County Counsel</p> <p>By: <u>Rachel L. Ross (e- signature)</u> Deputy County Counsel</p> <p>Date: <u>June 24, 2021</u></p>	<p>APPROVED BY THE NAPA COUNTY BOARD OF SUPERVISORS</p> <p>Date: Processed By: _____ Deputy Clerk of the Board</p>	<p>ATTEST: NEHA HOSKINS Clerk of the Board of Supervisors</p> <p>By: _____</p>
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