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May 7, 2021

To: Supervisor Hilda L. Solis, Chair
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         Supervisor Kathryn Barger

From: Songhai Armstead, Executive Director   *S. Armstead*
         Alternatives to Incarceration Office

BUILDING A SYSTEM OF ALTERNATIVES TO INCARCERATION: STATUS REPORT (ITEM NO. 2, AGENDA OF MARCH 10, 2020)

On March 10, 2020, the Board of Supervisors (Board) adopted a motion to work toward building a system of alternatives to incarceration, helping the Board achieve the vision of providing "Care First, Jails Last." The motion directed the Chief Executive Office (CEO) to establish an Alternatives to Incarceration (ATI) Initiative/organizational unit, and take necessary steps to assess, and where possible, operationalize the 26 ATI foundational recommendations in the ATI report. The Board further directed the CEO to report back in 180 days with a written analysis of the fiscal, legal, and operational components of each of the 26 foundational recommendations.

On December 18, 2020, the CEO provided a preliminary report on efforts to staff the ATI Office and began an initial assessment of the foundational recommendations, while also maintaining an open and inclusive community engagement environment.

This report further details the ATI Office's activities related to philanthropic partnerships, efforts on the part of the ATI Initiative to analyze the 26 foundational recommendations and begin identifying projects, through development or expansion, that operationalize the 26 ATI foundational recommendations. County Counsel will provide an updated, separate report to the Board regarding its legal analysis of the 26 foundational recommendations and the various programs operationalizing the recommendations.

"To Enrich Lives Through Effective And Caring Service"

Background

On March 10, 2020, the Board accepted the ATI Working Group's Report (Report), adopted the Report's five overarching strategies, and directed the CEO to establish a new ATI Office within the CEO's office. This ATI Office serves as the County's new nerve center and regional convener of public and private sector entities committed to realizing a "Care First, Jails Last" model. It is charged with driving policy development, data analysis, and evaluation; coordinating efforts among County of Los Angeles (County) departments and community-based organizations; prioritizing competing or duplicative delivery and implementation efforts; and making data-driven funding recommendations.

On November 3, 2020, the voters of Los Angeles County approved Measure J, which "annually allocates no less than ten percent of the County's locally generated unrestricted revenue in the general fund (NCC)" to address the disproportionate impact of racial injustice through community investments such as youth development; job training; small business development; supportive housing services; and alternatives to incarceration. On November 10, 2020, the Board adopted a motion to establish an inclusive and transparent recommendation process for allocating funds as outlined in Measure J.

The November 10, 2020 Measure J motion builds on the ATI and recent Anti-Racism, Diversity, and Inclusion (ARDI) efforts by fully integrating each into the Measure J spending and planning process. The executive directors of both the ATI Office and ARDI co-facilitate and advise the work of the Measure J Advisory Committee, ensuring the Board's "Care First, Jails Last" vision, articulated through the ATI Initiative, is fully integrated in the Measure J spending and planning process.

ATI Organizational Structure

The work of the ATI Office is divided into four areas of concentration:

- Alternatives to Incarceration Initiative
- Alternative Crisis Response
- Measure J
- Youth Justice Reimagined

While there is considerable overlap between the concentrations, each requires distinct attention, planning, and development; the CEO continues to map out a suitable organizational structure to strategically address each of these areas. This includes additional staffing considerations to ensure appropriate capacity and expertise for the ATI Office. As part of the FY 2021-22 Recommended Budget, the CEO recommends that the following positions be added to the existing staff within the ATI Office:

- 1.0 Principal Analyst, CEO
- 2.0 Senior Analyst, CEO
- 1.0 Analyst, CEO
- 1.0 Special Services Assistant
- 1.0 Senior Secretary III

This new staffing will supplement the core existing staff and increase the overall capacity of the ATI Office to meet the needs of the four concentrations and the Board's vision of "Care First, Jails Last."

ATI Initiative Implementation Progress Update

In the December 24, 2020 Board report, the CEO outlined community engagement activities, an ATI Office staffing plan, and development efforts related to the foundational recommendations. The Attachment provides updates on those efforts and recent additional activities undertaken.

Among the shovel-ready programs referenced (Attachment, Exhibit), several have launched or are near launching. To assist in the expansion and launching of these efforts, the ATI Office has teamed with the Center for Court Innovation, accessing their deep justice reform experiences to more efficiently and expeditiously stand up these programs. They include:

1) Incubation Academy:

   In collaboration with the third-party administrator, Local Initiatives Support Corporation (LISC), we have begun to solicit feedback from community-based partners, service provider coalitions, and individuals with lived experience to map out curriculum themes and program components of planned Incubation Academies. These efforts should expedite the ability of LISC to launch the effort and begin capacity-building efforts.

2) Pre-Filing Diversion Program:

   The ATI Pre-Filing Diversion Program is set to launch its first location in late May 2021, quickly followed by nine additional locations by August 2021. This effort will divert individuals arrested for most misdemeanor and non-violent/non-serious/non-sexual felony offenses to community-based treatments and housing in lieu of prosecution or transport to County jail. Through this program, community-based providers are being placed in jails to screen arrestees and transport them to housing and services as deemed appropriate.
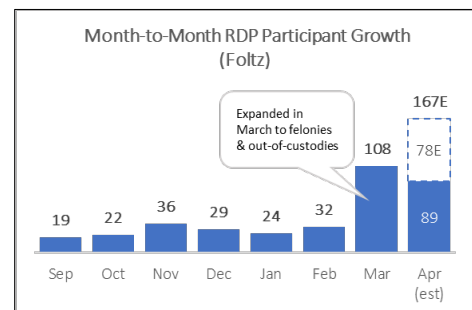
3) Rapid Diversion Program:

In partnership with the Superior Courts, Public Defender, Alternate Public Defender, District Attorney, Department of Mental Health, Los Angeles City Attorney, Long Beach Prosecutor, San Monica City Attorney, and Special Service Groups Project 180, this effort expands the in-court pilot diversion program that began in 2019 with grant funding and targets individuals with a mental health and/or substance use disorder diagnoses. Individuals in this program participate in programming, receive housing resources, and are case managed for a period of time recommended by the service provider and approved by the court. Cases are dismissed for individuals who successfully complete the program.

The program began at the Criminal Court in downtown Los Angeles and has now expanded to five additional court locations – Airport, Van Nuys, Lancaster, Long Beach, and East Los Angeles. The final two courthouse locations – Compton and Pomona – are expected to launch in early June 2021. The "RDP Participant Volume through April 16, 2021" chart below details the number of participants in the program at each court location as of mid-April.   The chart below "Month-to-Month RDP Participant Growth" shows a month-over-month case volume increase as a result of expanding to felonies and out-of-custody cases beginning in March 2021.

RDP Participant Volume through April 16, 2021

	Courthouse	Data From...	Service Provider	# RDP Participants
Pilot	Foltz (CCB)	Jun 2019	SSG	1,105
Expansion	LAX	Sep 2020	SSG	80
	Van Nuys West	Sep 2020	SSG	77
	Long Beach	Dec 2020	SSG	40
	East LA[1]	Jan 2021	SSG	10
	Lancaster	Feb 2021	SSG	67
Next Up	Pomona	TBD	SSG	n/a
	Compton	TBD	SSG	n/a

1 Misdemeanors-only court
Source: LA County Public Defender

1,379 cases to date

Month-to-Month RDP Participant Growth (Foltz)

Expanded in March to felonies & out-of-custodies

Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr (est)
19	22	36	29	24	32	108	89 / 78E / 167E

4) Needs Assessment and Service/Bed Availability System:

The ATI Office has partnered with the Chief Information Office (CIO) to develop an application that offers a strength/needs-based assessment and real-time service and bed availability to assist navigators in matching clients to needed resources. On February 4, 2021, the ATI Office in conjunction with the CIO convened stakeholders and users to gather input and feedback on system infrastructure and components, and to ensure community and user values were incorporated into all

design elements. A Request for Information to solicit cost estimates from various vendors will be live this week. We expect this process to conclude by June 2021.

Next Steps

The ATI Office will continue its efforts to implement the projects previously referenced, integrate the work of other justice initiatives and partners, and drive coordinated and cohesive justice-related policy and program development. Additionally, the ATI Initiative will remain responsive to the evolving changes in the justice system and the increased focus and need for pre-arrest and pre-trial alternatives.

Should you have any questions concerning this matter, please contact me at (213) 974-1664 or sarmstead@ceo.lacounty.gov.

FAD:JMN:TJM
SA:VH:lac

Attachment

c: Executive Office, Board of Supervisors
        County Counsel

Alternatives to Incarceration (ATI) Office Implementation Progress Update

Community Engagement and Outreach

To accomplish the Board of Supervisors' (Board) directives to transform the justice system into a "Care First, Jails Last" model, the ATI Office has maintained strong ties and engagements with various community stakeholders, treatment providers, individuals with lived experience, justice system partners, nonprofit organizations, and County departments. The ATI Office maintains the following committees to ensure strong community participation and feedback in the development of programming intended to impact arrest, detention, court involvement, and reentry:

- *ATI Public Convening:*
  - o Convened bi-monthly, this meeting provides an opportunity for the community at large to be apprised of all ATI-related efforts and to offer recommendations regarding the ATI's Initiative direction.
- *ATI Community-Cabinet Meeting:*
  - o Comprised of leaders from advocacy, service community, faith-based organizations, academia, and those with lived experience, the Cabinet serves as a think tank representing diverse interests and views. The Cabinet meets monthly and has formed subcommittees focused on the following key areas:
    - Capacity building and expansion
    - Treatment, housing, and diversion
    - Faith-based supports
    - Data and metrics
    - Pre-trial services
    - Youth Justice
- *Alternative Crisis Response Planning Meeting:*
  - o In response to a Board motion directing the ATI's Office Executive Director and the Director of the Department of Mental Health to lead a planning process developing civilian-based crisis responses and in preparation for the commencement of the "988" crisis line, ATI convenes a bi-monthly planning meeting open to the community at large. To date, the effort has identified a community partner to facilitate and triage "988" calls. The planning continues related to "911" system coordination, training protocols, staffing, employment opportunities, and funding.

ATI Staffing

Since the inception of the ATI Office, its purview has increased from exclusively ATI-related efforts to three additional areas. The ATI Office now leads four Countywide efforts:

- Alternatives to Incarceration Initiative
- Alternative Crisis Response

- Measure J
- Youth Justice Reimagined

As a result, the CEO and the ATI Office are lending additional consideration to developing a strategic organizational structure, including staff required to facilitate strategic planning, program development and implementation, systems of care coordination, data analysis and evaluation, and budget associated with each of these concentrations. The CEO is also identifying additional administrative support to assist the ATI Office, ARDI, and the Homeless Initiative with increased contracting and administrative responsibilities.

<div align="center">Philanthropic Partnerships</div>

The County has identified funding to support many programs related to the ATI Initiative, and Measure J funding may also provide additional supports. Additionally, the ATI Initiative has partnered with the philanthropic community to identify opportunities to collaborate. Philanthropic funding can serve as a dynamic catalyst for creative pilots and initiatives. The ATI Office, in collaboration with the Center for Strategic Partnerships, will be convening a group of philanthropic partners to brief them on ATI efforts and seek their support and guidance in the development of programming and policies.

<div align="center">Review of Foundational ATI Recommendations</div>

The ATI Foundational Recommendations (Recommendations) provide a blueprint for the types of projects, initiatives, or programs, either in existence or in concept, that the ATI Office in collaboration should identify, develop, and expand. They also provide policy direction to ensure the programming executed continues to move the County towards the Board's vision of "Care First, Jails Last." Our analysis of the Recommendations continues to suggest that programming being developed aligns with the intercept model and that 1) focuses on reducing the flow of individuals into the justice system with community-based treatment and housing alternatives; 2) removes individuals from custody as soon as possible, connecting them to community-based housing and services; 3) provides pre-trial services in custody with strong connections to community-based services; and 4) begins the process of reentering individuals into the community while in custody with a strong emphasis on treatment, housing, and employment. The library of programs developed to deliver these services must then be tracked, measured, and explored for efficacy.

The Exhibit outlines the 26 Foundational Recommendations, their alignment with the ATI overarching strategies, ATI efforts to operationalize recommendations, program cost, and progress updates on the implementation stage. Many of the projects being implemented align with multiple recommendations and operationalize many of the remaining eighty-eight (88) ATI recommendations still being reviewed.

ATI-Related "Shovel-Ready" Projects

The ATI Office continues to focus on the implementation or expansion of "shovel-ready" programs implementable in 120 days, using the following criteria:

- Projects that best leverage existing departmental staffing and funding resources to complement ATI funding;
- Projects that support direct community investments;
- Projects that build and enhance the capacity of community organizations;
- Projects where existing contractual relationships can be easily accessed; and
- Projects that have data metrics that are being tracked, measured, and show successful outcomes.

Among the shovel-ready programs referenced are several that have been identified for additional prioritization both because of the critical need they serve, and their foundational impact on the overall work of the ATI Initiative.

Program	Description	Department Lead	Annual Cost	Project Status
Pre-Filing Diversion Program	A misdemeanor and felony offense diversion program at the point of arrest in lieu of prosecution and transport to County jail.	ATI	$15,500,000 (ATI Funded Program)	The program being launched at 10 locations in the County and targeting implementation by the end of May 2021.
Rapid Diversion Program	In-Court Diversion Program with co-located navigators to assess and coordinate the connection to housing and other services for defendants with the intent of increasing release, linkages to services, and pre-plea diversion.	ATI	$12,400,000 (ATI Funded Program)	Misdemeanor and Felony cases – in and out of custody – fully launched as of March 1, 2021, at 6 court locations. Two additional locations will begin in late May 2021.
Incubation Academy	Build capacity of trusted grassroots community-based organizations to deliver prevention and intervention services and housing to justice-involved individuals in their communities, by providing training and funding, and increasing their ability to compete for County/public funding.	ATI	$1,392,500 (ATI Funded Program)	The contract with Local Initiatives Support Corporation (LISC), as the third-party administrator, has been executed. LISC is holding listening sessions to gather community feedback on training elements and the direction of the Incubation Academy.

To date, no legal impediments have been identified related to implementation.

The ATI Office has also identified additional projects that represent opportunities to transition individuals back into the community more strategically and with the support that links them to resources, housing, and treatment. The details and status are as follows:

Program	Description	Department Lead	Annual Cost	Project Status
Returning Home Well	State-funded reentry program for individuals sentenced to prison. Being expanded to strategically include individuals sentenced to State prison but still in County jail custody awaiting transport. The program will coordinate the release of these individuals with a community-based partner who will provide housing, treatment, and employment development services.	ATI, Public Defender, Superior Court, LASD	$0	ATI is convening justice stakeholders to ensure the coordinated release of individuals into services. Coordination of releases should be completed by May 7, 2021.
Returning Home Well Los Angeles	Modeled after the State program, the ATI Office is exploring the feasibility of coordinating the release of locally sentenced individuals and partnering with a community-based partner who will provide housing, treatment, and employment development services.	ATI, Public Defender, Superior Court, LASD, ODR	TBD	Feasibility meetings have begun; will report further as the analysis continues.
Fire Camp Program	Partnership with the State to house and train parolees and probationers interested in becoming firefighters or first responders. Two former County Probation youth facilities are being considered and would be renovated to serve this new purpose.	ATI, Probation, County Fire	TBD	Exploratory meetings have begun with the State, philanthropy, and California Conservation Corp to determine the feasibility and potential partnership.

Fiscal Analysis: ATI Departmental Diversion Inventory

As previously reported, County departments were directed to identify and provide a description and budget information for programs that:

- Keep individuals from entering/reentering the criminal justice system;
- Minimize the time spent in custody;
- Stabilize the condition(s) that led to their arrest; and
- Provide the services and resources to help them return and remain in the community.

The programs that departments identified as implemented are funded through various sources, including locally generated revenue, AB 109, Board of State and Community Corrections Grant, California Department of Corrections and Rehabilitation, CalWORKS, Court assessed fees, Drug Medi-Cal, General Relief, Inmate Welfare Fund, Juvenile

Justice Crime Prevention Act, Measure H, Medi-Cal, Mental Health Services Act, Proposition 47, SB 82 California Health Facilities Financing Authority, SB 678, Substance Abuse Prevention and Treatment Block Grant, Tobacco Master Settlement Agreement, Whole Person Care, and various public and private grants. We are also in preliminary discussions with the California State Association of Counties on a collaboration to convert the ATI inventory into a management tool encompassing budget analysis, program and intercept evaluation, and monitoring of the justice system and systems of care.

An online ATI Service Provider Survey has been released that will be used toward our strategic objective of coordinating the various systems of care within the County and as a resource for ATI's efforts to transform the justice system. In addition to the distribution of the survey through community networks, the 2-1-1 registry of 10,000 providers/facilities is being used by ATI's California State University, Los Angeles interns as an outreach resource. The survey will remain open indefinitely to allow community and faith-based service providers to not only contribute to our understanding of community capacity, but also to identify service providers in communities that are targeted for potential justice reform projects. The ATI Service Provider Survey database will also be used as a resource to identify providers for the ATI Incubation Academy.

ATI Recommendations and Related Projects

LOS ANGELES COUNTY
ATI OFFICE

| ATI | YJR | ACR | Meas J |

Alternatives to Incarceration
"Care First, Jails Last"

STRATEGY 1: Expand and scale **community-based, holistic care** and services through sustainable and equitable **community capacity building** and service coordination

	RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST	PROJECT STATUS
2	Create and expand decentralized, coordinated service hubs (ex: MLK Behavioral Health Center) in strategic locations across the eight Service Planning Areas (especially SPA 1, 3, and 7) where people, their families, and support network can seek referral and/or immediate admission 24 hours a day to a spectrum of trauma-informed services that include but are not limited to mental health, including Psychiatric Urgent Care Centers; supportive housing via a coordinated entry system; and substance use disorder services such as withdrawal management, medication-assisted treatment (MAT), and recovery intake centers (i.e., sobering centers).	ACR: Crisis Facility Expansion	Several crisis facility projects in the pipeline, including the development of a behavioral health urgent care center (UCC), a sobering center, and more crisis residential treatment programs (CRTPs).	**DMH,** UCLA Psychiatry, Exodus	FY 2020-21: $71,652,000 (Funded through a combination of MHSA and Medical Reimbursement.) FY 2021-22: $110,998,000 (Measure J funding was requested for expansion efforts)	* New Antelope Valley (Lancaster) UCC fully operational March 31, 2021 (18 total beds/chairs - 12 adults, 6 teens) * New Willowbrook sobering center at MRT Behavioral Health Center to be fully operational December 31, 2021 (15 beds) * New CRTPs in pipeline across four of LAC medical campuses/Restorative Care Villages: LAC+USC, Olive View, Rancho Los Amigo, MRT BHC - all fully operational by December 31, 2021 (240 beds total) * Additional 32 CRTP beds in development at two more sites, operational by July 31, 2021 and December 31, 2021
3	Expand family reunification models and connect families to low-cost or no-cost parenting groups. Family reunification models and parenting groups should be evidence-informed and have demonstrated they are correlated with better outcomes for participants and their children. These resources should be provided by community organizations and there should be ready availability of resources tailored to the unique needs of cisgender women who identify as mothers as well as LGBQ+ and TGI parents.	DCFS Family Support	Integrate Los Angeles County (County) Department of Children and Family Services (DCFS) Prevention & Aftercare Network providers into the justice system to deliver supportive services and resources for justice-involved individuals and their families.	CEO-ATI, Public Defender, Office of Child Protection (OCP), **DCFS**, Alternate Public Defender (APD), and Courts	TBD	* Provider list sent to PD February 4, 2021 * New contracts being finalized in March 2021 - ATI team to follow up at the end of the month and provide PD with updated list

STRATEGY 1: Expand and scale **community-based, holistic care** and services through sustainable and equitable **community capacity building** and service coordination

RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST	PROJECT STATUS
	My Brother's Keeper Fostering Resiliency Project (MBK)	Develop program to support successful transition to adulthood of Black male children, ages 12 – 18+, in foster care. Improve educational and life course outcomes while preventing and reducing youth contact with law enforcement.	DCFS, **CEO-SIB**, CEO-ATI, CEO-CSP, and Friends of the Children	TBD	* September 2020 effort received $500K grant from Hilton Foundation, allowing implementation for at least 1 yr. to provide services to ~100 participants * Program launched March 1, 2021
	Youth Justice Reimagined	Transform the juvenile justice system by eliminating Probation Juvenile Services and transferring reimagined responsibilities to a new Department of Youth Development.	CEO-ATI, **ODR-YDD**	TBD	* CEO, YDD identifying consultant to coordinate next steps * CEO reviewing YDD staffing and budget requests to expand pre-arrest diversion services and will report findings to Board in April 2021
7 Establish effective restorative justice programs for the adult justice-involved population by learning from existing County and other programs, especially those serving youth.	Youth Justice Reimagined	Transform the juvenile justice system by eliminating Probation Juvenile Services and transferring reimagined responsibilities to a new Department of Youth Development.	CEO-ATI, **Office of Diversion and Reentry (ODR)-Youth Diversion and Development (YDD)**	TBD	* CEO, YDD identifying consultant to coordinate next steps * CEO reviewing YDD staffing and budget requests to expand pre-arrest diversion services and will report findings to Board in April 2021
11 Optimize and increase the appropriate use and process for mental health conservatorship and assisted outpatient treatment, and resource them accordingly.	*[Project TBD]*	*[exploring opportunities]*			* Conducting initial assessment, preliminary plan anticipated early May, identifying potential programs or other next steps (e.g. legislative action)
12 Support and broaden implementation of community-based harm reduction strategies for individuals with mental health, substance use disorders, and/or individuals who use alcohol/drugs, including, but not limited to, sustained prescribing of psychiatric medications and MAT.	*[Project TBD]*	*[exploring opportunities]*			* Planning in-progress

STRATEGY 1: Expand and scale **community-based, holistic care** and services through sustainable and equitable **community capacity building** and service coordination

RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST		PROJECT STATUS
20 Expand or refine affordable successful housing models designed for and tailored to justice-involved individuals with mental health and/or substance use disorder needs, specifically: (a) short-term treatment inclusive of acute inpatient, AB 109 and forensic inpatient (FIP) and IMD subacute beds; (b) interim housing inclusive of clubhouse living with supportive employment, recovery bridge housing and sober living; and (c) permanent subsidized housing inclusive of independent living and board and care facilities.	ACR: Crisis Stabilization Facilities	Crisis receiving and stabilization services including behavioral health UCC, overnight care (peer respite), and short-term care.	**DMH**, UCLA Psychiatry, Exodus		TBD	* Planning in-progress
	ATI Incubation Academy	Build capacity of trusted grassroots CBOs (prioritize Black-, Latinx-, and Justice Involved-led CBOs to deliver prevention and intervention services to justice involved individuals in their communities, by providing training and funding, and increasing their ability to compete for County/public funding.	**CEO-ATI,** DMH, CEO-CSP and (DCBA)	$	1,392,500	* Contract with Local Initiatives Support Corporation (LISC) as third-party administrator executed. LISC holding listening sessions to gather community feedback on training elements and direction of Incubation Academy *Funded by the ATI Initiative
	Pre-Filing Diversion Programs	Develop misdemeanor and felony offense diversion program at the County Sheriff's and Police Stations or site of arrest in lieu of arrest or transport to County jail.	**CEO-ATI**, City Attorney, LAPD, Public Defender, DA, APD, LASD, Law Enforcement Agencies, DHS-ODR, and Service Providers	$	15,500,000	* Pilot at 77th to launch mid/end of April 2021 * Additional pilots anticipated at Santa Monica and Long Beach immediately following * Funded by the ATI Initiative

STRATEGY 1: Expand and scale **community-based, holistic care** and services through sustainable and equitable **community capacity building** and service coordination

RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST		PROJECT STATUS
	Rapid Diversion Program Expansion	Expand the Rapid Diversion Project which co-locates Navigators (Community Service Workers) with lived experiences or County Departments of Health Services (DHS) or Mental Health (DMH) peer navigators) in courts Countywide to assess and coordinate the identification and connection to housing and other services for clients with the intent of increasing their likelihood of being released and linked to services for themselves and their families.	**Public Defender (PD)**, Center for Court Innovation (CCI), CEO-ATI, Alternate Public Defender (APD), DHS, DMH, DMH Court Linkage, DPH, DPSS, District Attorney (DA), City Attorneys, Courts, and Service Providers	$	12,400,000	* Misdemeanor and Felony cases – in and out of custody – fully launched as of March 1, 2021 at 6 locations. The two remaining locations are expected to begin in late April 2021. * Funded by the ATI Office
31 Remove barriers to treatment, employment, and affordable housing, including recovery housing, based on stigmatization and discrimination due to record of past convictions through local and state legislative intervention or updating County policies.	Youth Justice Reimagined	Transform the juvenile justice system by eliminating Probation Juvenile Services and transferring reimagined responsibilities to a new Department of Youth Development.	CEO-ATI, **ODR-YDD**		TBD	* CEO, YDD identifying consultant to coordinate next steps * CEO reviewing YDD staffing and budget requests to expand pre-arrest diversion services and will report findings to the Board in May 2021

STRATEGY 1: Expand and scale **community-based, holistic care** and services through sustainable and equitable **community capacity building** and service coordination

RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST	PROJECT STATUS
92 Utilize County capacity-building programs, in conjunction with equity analysis, to expand the community-based system of care by: (a) finding and supporting smaller organizations in different Service Planning Areas to qualify for and access funds while providing seed funding (i.e. philanthropic partnerships, business loans, flexible government funding, pay for success models, and/or zone area investments, etc.); including those organizations with a history of serving people who are system-involved and identify as cisgender women, LGBQ+ and/or TGI; (b) promoting existing providers as potential incubators; and (c) supporting training and technical assistance to become service providers accessing Medi-Cal Fee Waiver, County and State funding, and organizational coaching as well as training in evidence-informed practice in serving TGI / LGBQ+ people.	ACR: Crisis Stabilization Facilities	Crisis receiving and stabilization services including behavioral health UCC, overnight care (peer respite), and short-term care.	**DMH**, UCLA Psychiatry, Exodus	TBD	* Planning in-progress
	ATI Incubation Academy	Build capacity of trusted grassroots community-based organizations (CBOs) (prioritize Black-, Latinx-, and Justice Involved-led CBOs) to deliver prevention and intervention services to justice involved individuals in their communities, by providing training and funding, and increasing their ability to compete for County/public funding.	**CEO-ATI,** DMH, CEO-Center for Strategic Partnership (CSP), and County Department of Consumer and Business Affairs (DCBA)	$ 1,392,500	* Contract with Local Initiatives Support Corporation (LISC) as third-party administrator executed. LISC holding listening sessions to gather community feedback on training elements and direction of Incubation Academy * Funded by the ATI Initiative
	Philanthropic Partnership	Team with the Center for Strategic Partnership (CSP) and their ongoing effort to coordinate Countywide capacity building efforts and align effort.	**CEO-ATI**, CEO-Chief Information Office (CIO), and CEO-Human Resources (HR)	TBD	* Through its Justice Reform Initiative, Microsoft has agreed to fund additional technical assistance for ATI's diversion efforts, via a one-year, $200K grant to CCI and its Data and Applied Analytics Research (DAAR) team, which will advise on how ATI can use existing data systems to augment ATI's data-driven approaches to diversion (and/or shore up the Justice Metrics Framework (JMF) for this purpose)

STRATEGY 1: Expand and scale **community-based, holistic care** and services through sustainable and equitable **community capacity building** and service coordination

RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST	PROJECT STATUS
108 Increase employment and retention of Community Health Workers (CHWs) to expand service capacity, cultural competency, and client/provider trust, by: (a) hiring, training and professionally advancing CHWs with lived experience of the justice system and/or who identify as LGBQ+, TGI, and/or cisgender women; (b) creating pathways for CHWs to move up to full-time, salaried County jobs with benefits; and (c) including continual evaluation and improvements made to ensure the CHW program is effective in building this innovative workforce.	ACR: Crisis System Peer Workforce Expansion	Recruit staff with lived experience who provide empathetic care for those in need, rooted in their experience. Enabled by California bill, Senate Bill 803, which DMH co-sponsored. Peers utilized as part of care teams throughout all three of LAC crisis system's components: crisis call center network, mobile crisis response, and crisis facilities.	**DMH**	TBD	* Planning in-progress * Currently investigating funding opportunities to expand peer workforce; submitted proposal for Measure J funding
	ACR: PMRT / Therapeutic Transportation Program Expansion	PMRT is not currently a 24/7 program, nor is program capacity where it needs to be to serve as a reliable alternative to law enforcement around the clock for indicated crisis calls. Hence, capacity expansion is needed for the Psychiatric Mobile Response Teams (PMRT) program, and at least some of this expansion should include an expansion of the transportation capacity featured in our Therapeutic Transportation pilot. This in turn may also lead to an increase in the peer workforce (staff with lived experience), in line with ATI Foundational Recommendation #108.	**DMH**	TBD	* Planning in-progress * Currently investigating funding opportunities to expand PMRT and Therapeutic Transportation programs to meet the need, and DMH has submitted a proposal for Measure J funding to this effect

STRATEGY 1: Expand and scale **community-based, holistic care** and services through sustainable and equitable **community capacity building** and service coordination

RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST	PROJECT STATUS
	Community Health Worker / Care Coordinator Apprenticeship Program	Develop a Workforce Pre-Employment Training and Case Management program for individuals with high barriers to employment to become health care workers. Could feed into ATI App project (building provider network undergirding app).	**Workforce Development, Aging and Community Services (WDACS)**, Public Social Services (DPSS), DMH, DHS, Public Health (DPH), and Community Provider	TBD	* Planning in-progress

STRATEGY 2: Utilize behavioral health responses for individuals experiencing mental health and/or substance use disorders, homelessness, and other situations caused by unmet needs; **avoid and minimize law enforcement responses**

FOUNDATIONAL RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST	PROJECT STATUS
35 Significantly increase the number of Department of Mental Health Psychiatric Mobile Response Teams (PMRTs) to reduce service wait times.	ACR: Crisis Call Center Interconnectivity with 9-1-1 Network and 9 8-8 Implementation	The current 9-1-1 diversion pilots rely on a manual call transfer process between 9-1-1 and Didi Hirsch/DMH that is less efficient than the process used to coordinate calls between 9-1-1 call centers themselves.	**DMH,** Didi Hirsch, LASD, LAPD	TBD	* Exploring avenues to bring the Didi Hirsch and DMH call centers up to a similar level of interconnectivity as 9-1-1 call centers have with each other, e.g., via designation of the Didi Hirsch and DMH call centers as secondary public safety answering points (PSAPs) * Working with legislative advocates to inform draft legislation regarding the implementation of 9-8-8 in California, to ensure that this need for improved connectivity between 9-1-1 systems and the 9 8-8 crisis call center network is addressed in a uniform and rigorous way throughout the State
	ACR: PMRT / Therapeutic Transportation Program Expansion	PMRT is not currently a 24/7 program, nor is program capacity where it needs to be to serve as a reliable alternative to law enforcement around the clock for indicated crisis calls. Hence, capacity expansion is needed for the PMRT program, and at least some of this expansion should include an expansion of the transportation capacity featured in our Therapeutic Transportation pilot. This in turn may also lead to an increase in the peer workforce (staff with lived experience), in line with ATI Foundational Recommendation #108.	**DMH**	TBD	* Planning in-progress * Currently investigating funding opportunities to expand PMRT and Therapeutic Transportation programs to meet the need, and DMH has submitted a proposal for Measure J funding to this effect.

STRATEGY 2: **Utilize behavioral health responses** for individuals experiencing mental health and/or substance use disorders, homelessness, and other situations caused by unmet needs; **avoid and minimize law enforcement responses**

FOUNDATIONAL RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST	PROJECT STATUS
	ACR: Therapeutic Transportation Pilot	DMH partnership with the City of Los Angeles Fire Department (LAFD), to pilot creation of non-law enforcement, civilian mobile crisis response teams capable of transporting clients to a crisis facility if needed. Pilot teams staffed by DMH but dispatched by LAFD, either via incoming 9-1-1 calls or by LAFD EMTs on the ground already. Pilot increases the civilian mobile crisis response resources as well as increasing transportation capacity for individuals in crisis. This is a critical need as wait times for ambulance transport can increase service times in our Psychiatric Mobile Response Teams (PMRT) program significantly and contribute to long wait times for response. This pilot also creates a truly 24/7 civilian mobile crisis response program for the first time in LAC as PMRT does not currently operate 24/7.	**DMH,** LAFD	TBD	* Pilot in progress

STRATEGY 2: **Utilize behavioral health responses** for individuals experiencing mental health and/or substance use disorders, homelessness, and other situations caused by unmet needs; **avoid and minimize law enforcement responses**

FOUNDATIONAL RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST	PROJECT STATUS
43 Non-law enforcement response to mental health crisis emergency calls	ACR: 9-1-1 Diversion	Pilot with the City of Los Angeles and Didi Hirsch Mental Health Services to divert non-violent behavioral health calls from LAPD's 9 1-1 communications center to Didi Hirsch's Suicide Prevention Center (SPC). DMH also recently established a direct line to the DMH Help Line (ACCESS) call center for law enforcement, and is piloting the use of this line with the LAC Sheriff's Department (LASD). Call diversion pilot is pending finalization of the criteria used to assess candidate calls for diversion, as well as final testing of the mechanism that LASD will use to facilitate call transfers. In addition, we are working to align this pilot with the LAPD and Didi Hirsch 9-1-1 diversion pilot to ensure consistency and to lay a foundation for expanding 9-1-1 diversion, to both Didi Hirsch and DMH as indicated, to all 78 primary 9-1-1 call centers (public safety answering points or PSAPs) Countywide.	DMH, Didi Hirsch, LASD, **LAPD**	TBD	* Pilot in progress, currently operating from 12 pm to 8 pm, 7 days per week, in preparation for an eventual full-scale 24/7 9-1-1 diversion program * Currently investigating funding opportunities to help expand 9-1-1 diversion to the entire LAC 24/7, and DMH has submitted a proposal for Measure J funding to this effect
	ATI Assessment and Referral System (ATI App)	Develop and pilot an application comprised of a strength-based assessment tool, and real time bed availability/type (Service Bed Availability Tool (SBAT) / DPH SAPC, MERLIN / DMH, Ready Net / Hospital Assn) to assist Navigators in matching clients to needed resources.	**CEO-CIO**, DMH-MET, LASD, **CEO-ATI**, CEO-SIB, ISAB, DCFS, DPSS, DHS, DHS-ODR, and DPH-SAPC	TBD	* ATI Service/Bed Availability Navigator System Requirements Workshop held February 4, 2021 with various stakeholders to gather user requirements and feedback * Met with Microsoft, IBM to discuss potential tech partnership to build out app; IBM still in talks to explore partnership
	Youth Justice Reimagined	Transform the juvenile justice system by eliminating Probation Juvenile Services and transferring reimagined responsibilities to a new Department of Youth Development.	CEO-ATI, **ODR-YDD**	TBD	* CEO, YDD identifying consultant to coordinate next steps * CEO reviewing YDD staffing and budget requests to expand pre-arrest diversion services and will report findings to Board in April 2021

STRATEGY 2: Utilize behavioral health responses for individuals experiencing mental health and/or substance use disorders, homelessness, and other situations caused by unmet needs; **avoid and minimize law enforcement responses**

FOUNDATIONAL RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST	PROJECT STATUS
48 Establish a needs assessment pretrial release process	ACR: Co-Response Program Expansion	Some crisis calls require a law enforcement response, typically due to the presence of a serious and imminent threat to public safety. In these scenarios, co-response with behavioral health crisis professionals and law enforcement ensures the individual in crisis is getting the "care first" services they need. Co-response program pairs behavioral health professional with specially trained law enforcement on the same team, ensuring individuals in crisis get the right care even when law enforcement must also be present. There is a need for more capacity in our co-response programs to ensure that all crisis calls needing a law enforcement response are also served by a behavioral health co-response.	**DMH,** LAPD, LASD	TBD	* Currently investigating funding opportunities to expand co-response programs to meet the need, and DMH has submitted a proposal for Measure J funding to this effect (to fund only the DMH staff who are part of these co-response teams; no proposed Measure J funding may go to any law enforcement agency)
	Bail Project	Expand use of The Bail Project –where private funds are used to post bails, normally ten percent of bail.	DA, **PD,** APD, Courts, and Bail Project	TBD	* In-progress
	Get Them Out (GTO)	Expand GTO Get Them Out (Women /Trans-women) focused on removing women and those who identify as women from jail.	**PD**, APD, DA, and Courts	TBD	* Directly contacting attorneys representing clients in the targeted populations groups, women housed at CRDF, people housed in the K6G modules at MCJ, people between the ages of 18-20 and Black women as a specific subgroup based on the Vera Institute data; working with LASD to get updated lists * Also working in conjunction with GRAC on training and presentations for justice partners about pathways to incarceration, needs of people in custody and best healing practices to promote individual wellness and public safety

STRATEGY 2: Utilize behavioral health responses for individuals experiencing mental health and/or substance use disorders, homelessness, and other situations caused by unmet needs; **avoid and minimize law enforcement responses**

FOUNDATIONAL RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST	PROJECT STATUS
	Pre-Filing Diversion Programs	Develop misdemeanor and felony offense diversion program at Sheriff's and Police Stations or site of arrest in lieu of arrest or transport to county jail.	**CEO-ATI**, City Attorney, LAPD, Public Defender, DA, APD, LASD, Law Enforcement Agencies, DHS-ODR, and Service Providers	$ 15,500,000	* Pilot at 77th to launch mid/end of March 2021 * Additional pilots anticipated at Santa Monica and Long Beach immediately following
	Test Reminders (UpTrust)	Expand the Text Reminder Program (UpTrust) where individuals are sent text reminders of upcoming court dates.	**PD**, APD, and Courts	TBD	* In-progress

STRATEGY 3: Support and deliver meaningful **pre-trial release and diversion services**

	FOUNDATIONAL RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST		PROJECT STATUS
53	Improve and expand return-to-court support services to reduce failures to appear.	Test Reminders (UpTrust)	Expand the Text Reminder Program (UpTrust) where individuals are sent text reminders of upcoming court dates.	**PD**, APD, and Courts		TBD	In-progress
55	Develop a strengths and needs-based system of pre-trial release through an independent, cross-functional entity, situated outside of law enforcement, to coordinate voluntary needs and strengths assessments expeditiously upon booking, and to provide relevant information to court officers to make informed release decisions.	[Project TBD]	[exploring opportunities]				* Currently identifying programs
56	Institute a presumption of pre-trial release for all individuals, especially people with clinical behavioral health disorders, whenever possible and appropriate, coupled with warm handoffs to community-based systems of care, to provide targeted services, if necessary, to help individuals remain safely in the community and support their return to court.	Pre-Filing Diversion Programs	Develop misdemeanor and felony offense diversion program at Sheriffs and Police Stations or site of arrest in lieu of arrest or transport to county jail.	**CEO-ATI**, City Attorney, LAPD, PD, DA, APD, LASD, Law Enforcement Agencies, DHS-ODR, and Service Providers	$	15,500,000	* Pilot at 77th to launch mid/end of April 2021 * Additional pilots anticipated at Santa Monica and Long Beach immediately following * Funded by the ATI Initiative

STRATEGY 4: Provide effective treatment services in alternative placements, instead of jail time

	FOUNDATIONAL RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST		PROJECT STATUS
58	Improve equal access to all treatment resources for justice-involved individuals, wherever they may be (in or out of custody) by: (a) directing health agencies to change eligibility criteria and increase capacity and funding to ensure behavioral health treatment facilities are available in all stages of the court process; (b) creating a more rapid referral and response process for mental health and co-occurring placements at all levels; (c) developing a coherent strategy and connecting every qualifying individual to an appropriate court-based program at the inception of the diversion dialogue; (d) refining multiple points of entry within Intercept three for mental health and substance use disorder services; (e) ensuring in-custody involvement of CBOs for services; and (f) expanding capacity and removing archaic barriers at all levels of care. Ensure consistent, culturally appropriate, and sufficient availability of the full range of services and court-based programs for people who identify as cisgender women, LGBQ+, and/or TGI so no one is left without care or diversion because of gender identity or sexual orientation.	ODR Mental Health Formal Diversion Expansion	Increase access to mental health diversion in the justice system related to felonies for those who are severely mentally ill and homeless.	**DHS-ODR,** Public Defender, APD, DA, and Courts		TBD	* Expanded to 2 courtrooms downtown
		Rapid Diversion Program Expansion	Expand the Rapid Diversion Project which co-locates Navigators (Community Service Worker with lived experience or DHS or DMH peer navigators) in courts Countywide to assess and coordinate the identification and connection to housing and other services for clients with the intent of increasing their likelihood of being released and linked to services for themselves and their families.	**PD,** CEO-ATI, DMH, DMH Court Linkage, DHS, DPH, DPSS, APD, DA, City Attorneys, Courts, CCI, and Service Providers	$	12,400,000	* Misdemeanor and Felony cases – in and out of custody – fully launched as of March 1, 2021 at 6 locations. The two remaining locations are expected to begin in late April 2021 * Funded by the ATI Initiative
59	Create a robust AB 1810 Diversion scheme—PC 1001.36 and 1170(a) (1)(B)(iv) and 1370.01(a)(2)—to identify early on persons eligible for diversion and develop pathways Countywide to connect individuals to appropriate mental health programs to accomplish the goals of pre-conviction diversion and respond to all other present and future diversion opportunities, including pre- and post-conviction.	Rapid Diversion Program Expansion	Expand the Rapid Diversion Project which co-locates Navigators (Community Service Workers with lived experiences or DHS or DMH peer navigators) in courts Countywide to assess and coordinate the identification and connection to housing and other services for clients with the intent of increasing their likelihood of being released and linked to services for themselves and their families.	**PD,** CEO-ATI, DMH, DMH Court Linkage, DHS, DPH, DPSS, APD, DA, City Attorneys, Courts, CCI, and Service Providers	$	12,400,000	* Misdemeanor and Felony cases – in and out of custody – fully launched as of March 1, 2021 at 6 locations. The two remaining locations are expected to begin in late April 2021 * Funded by the ATI Initiative

STRATEGY 5: Effectively **coordinate the implementation of ATI recommendations**, ensuring that strategies work to **eliminate racial disparities** and to authentically engage and **compensate system-impacted individuals**

	FOUNDATIONAL RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST	PROJECT STATUS
26	Expand supported employment opportunities for persons with mental health, substance use, or co-occurring disorders, including flexible funds for basic client needs to find employment (e.g., birth certificates, etc.).	Community Health Worker / Care Coordinator Apprenticeship Program	Develop a Workforce Pre-Employment Training and Case Management program for individuals with high barriers to employment to become health care workers. Could feed into ATI App project (building provider network undergirding app).	**WDACS**, DPSS, DMH, DHS, DPH, and Community Provider	TBD	* Planning in-progress
		Forestry Fire Camp Program	Reinstate Fire Camp Program to expand opportunities for individuals with high barriers to employment.	**Fire, CEO-ATI**, CEO-Chief Sustainability Office (CSO), WDACS, and Community Provider	TBD	* Currently in talks to explore partnership with CDCR to establish firefighter training programs using County facilities

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FOUNDATIONAL RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST	PROJECT STATUS
	LA Emergency Medical Technician (EMT) Apprenticeship Program	Develop a Workforce Pre-Employment Training and Case Management program focused on EMT Certification for individuals demographically underrepresented in firefighting (Black, Latino, and Female participants); AB 2147-eligible justice-involved population.	**Fire**, DPSS, **WDACS**, Probation, **DCFS**, and **Worker Education and Resource Cente**r **(WERC)**	TBD	* Exploring integrating EMT training programs into Fire Camp programs
	My Brother's Keeper Fostering Resiliency Project	Develop program to support successful transition to adulthood of Black male children, ages 12 – 18+, in foster care. Improve educational and life course outcomes while preventing and reducing youth contact with law enforcement.	DCFS, **CEO-SIB**, CEO-ATI, CEO-CSP, and Friends of the Children	TBD	* September 2020 effort received $500K grant from Hilton Foundation, allowing implementation for at least 1 year to provide services to ~100 participants * Program launched March 1, 2021

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FOUNDATIONAL RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST	PROJECT STATUS
	Preparing Los Angeles for County Employment (PLACE)	Develop a Workforce Pre-Employment Training and Case Management program to help individuals with high barriers to employment (justice-involved, system-impacted, homeless or at-risk, CalWORKS, TAY, etc.) find employment opportunities with the County	**WDACS**, DHS, DPSS, Probation, CEO-Homeless Initiative (HI), Los Angeles Homeless Services Authority (LAHSA), CEO-ATI, and WERC	TBD	* Currently on hold due to Countywide hiring freeze; will re-assess at start of new fiscal year
	Securing Documents for Employment - Birth Certificates	Assist individuals leaving jail to obtain necessary document for employment opportunities - birth certificate, driver's license, social security card.	**CEO-ATI,** APD, DA, D, **DHS-CHS**, DHS-Office of Diversion (ODR), Registrar-Recorder, and LASD-CTU, DCBA	TBD	* In process of coordinating efforts with DHS-CHS and CBO partners
	Securing Documents for Employment - Driver's License	Research pathways for obtaining driver's license as part of reentry efforts.	DMV, **DHS-CHS, LASD-CTU, CEO-ATI, DCBA**	TBD	* In process of coordinating efforts with DHS-CHS and CBO partners
	Securing Documents for Employment - Social Security Cards	Research pathways for obtaining Social Security cards as part of reentry efforts.	**LASD-CTU,** CEO-ATI, and DHS-CHS	TBD	* In process of coordinating efforts with DHS-CHS and CBO partners

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FOUNDATIONAL RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST	PROJECT STATUS
84 Increase, ensure, and fund public collaboration in all phases of Alternatives to Incarceration planning, implementation, evaluation, and system oversight and across relevant County, Court, justice, health and social service systems. This collaboration can be piloted via the ATI Community Engagement Workshops and the Ad Hoc Committee structure, which includes work on gender, sexual orientation, and racial equity, by instituting quarterly stakeholder meetings to communicate updated ATI progress, discuss service and communication gaps, and highlight best practices. Fund and staff post-ATI final report, i.e., the initiative should host recurring implementation meetings across the County and with relevant County departments to discuss policy impacts, resolve policy conflicts, monitor fiscal impacts, assess eligibility barriers, and develop evaluation metrics of success.	ATI Staffing	Establish the CEO-ATI unit with necessary staff to support its mission.	**CEO-ATI**	TBD	* Currentyl staffed 3 Principal Analysts, 1 FUSE Fellow, and 2 support staff *As part of the FY 2021-22 Recommended Budget, the CEO recommends that the following positions be added to the ATI Initiative: • 1.0 Principal Analyst, CEO • 2.0 Senior Analyst, CEO • 1.0 Analyst, CEO • 1.0 Special Services Assistant • 1.0 Senior Secretary III *This new staffing will supplement the core existing staff and increase the overall capacity of the ATI Initiative to meet the needs of the four concentrations and the Board's vision of "Care First, Jails Last"
85 Establish online mechanisms for the public to get information, locate services to prevent incarceration and recidivism, and promote recovery. This tool should track identified problems and response progress through an accessible dashboard and should align with existing tools such as One Degree, etc.	ATI Assessment and Referral System (ATI App)	Develop and pilot an application comprised of a strength-based assessment tool, and real time bed availability/type (Service Bed Availability Tool (SBAT) / DPH SAPC, MERLIN / DMH, Ready Net / Hospital Assn) to assist Navigators in matching clients to needed resources.	**CEO-CIO**, DMH-MET, LASD, **CEO-ATI**, CEO-SIB, ISAB, DCFS, DPSS, DHS, DHS-ODR and DPH-SAPC	TBD	* ATI Service/Bed Availability Navigator System Requirements Works February 4, 2021 with various stakeholders to gather user requirements and feedback * Met with Microsoft, IBM to discuss potential tech partnership to build out app; IBM still in talks to explore partnership

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FOUNDATIONAL RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST	PROJECT STATUS
86 Create, staff, and fund an Advisory Collaborative of Impacted People to ensure there is continuous feedback and accountability to the prioritized communities and LA County at large in the implementation of the comprehensive roadmap. Ensure consistent representation of people who identify as cisgender women, LGBQ+, and TGI, including the most marginalized racial, ethnic and cultural groups in the geographic areas most impacted by incarceration, on the Advisory Collaborative.	Community Cabinet	CEO-ATI to establish a community cabinet to advise executive director. The cabinet is comprised of community based organizations, advocates, lived experience, and academia.	**CEO-ATI**	NA	* Implemented * Monthly Community Cabinet meetings in progress - next one May 14, 2021
87 Utilize data-driven tools (e.g., Race Forward's Community Benefits Agreement and Racial Impact Tool, or Advancement Project's JENI/JESI, etc.) to create processes for equitable resource and contract distribution with program offices across health and social service departments. These processes should prioritize remedying racial and geographic disparities while also taking into account cultural, gender, sexual orientation, and special populations' needs. Involve County and impacted communities in equitably distributing and leveraging resources to sustain community health.	[Project TBD]	[exploring opportunities]			* In the discovery phase, preliminary plan anticipated early May 2021 - identifying potential programs or other next steps (e.g. legislative action)
89 Develop a public education and communications campaign to build awareness of a treatment-first model, not incarceration and punishment. This campaign should stress use of the DMH ACCESS line, CBO network, SASH helpline, suicide prevention hotline (rather than 911) for behavioral crises, available non-law enforcement resources, and different types of community-based solutions.	ATI Website	Launch CEO-ATI website that includes updates on ATI, Measure J, ACR, and Youth Justice progress, resources, and opportunities for participation.	**CEO-ATI**	TBD	* Website launched on CEO platform * Search for web design firm underway to assist in building out more comprehensive website and set up system to allow CEO-ATI staff to manage content updates directly
	Communication Campaign	Hire a consultant to assist in community outreach and communications strategy.	**CEO-ATI**, and CEO-Countywide Communications	TBD	* In process of receiving and reviewing proposals from various agencies and contractors

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FOUNDATIONAL RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST	PROJECT STATUS
	Measure J	Facilitate a community-led funding recommendation process for Measure J.	**CEO-ATI**	TBD	* Advisory Committee formed 5 subcommittees * Subcommittee process nearly completed (final meeting on March 15, 2021) * Next step, consultant to synthesize recommendations discussed and voted upon in subcommittees and present report to Advisory Committee April 8, 2021; Advisory Committee to meet at least 3 more times before presenting recommendation to CEO end of May 2021
104 Provide paid training and employment to increase the number of justice system-impacted individuals working as the technologists behind data collection and analysis.	[Project TBD]	[exploring opportunities]			* Currently identifying programs

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FOUNDATIONAL RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST	PROJECT STATUS
110 Expand and coordinate data tracking/collection across all relevant County justice and health/social service entities to retrieve data necessary for services, programming, preventative measures, and alternatives to incarceration. Align this data collection with existing County data tools/portals such as One Degree, CHAMP, LANES, CES, etc.to inform a uniform client database.	ACR: Crisis Information Exchange	For individuals experiencing a behavioral health crisis, the ability to exchange key information between crisis care providers about those individuals can be lifesaving. Valuable information could include a current crisis care plan, contact information for primary mental health providers (such as an Full Service Partnership program), and any psychiatric advance directives (PADs) the individual has authorized. All of this information can be vital to ensure, when the individual experiences a crisis, that any care provider who encounters that individual has key information that would assist them in providing better care and ensuring the most appropriate follow-up services. LAC currently exchanges some of this information in LANES, the regional health information exchange. But many providers of crisis care are not yet connected to LANES. Furthermore, there are other existing exchange solutions that would complement LANES for this particular use case.	**DMH**	TBD	Planning in-progress
	ATI Metrics Development	Collaborate with CIO to convert the Justice Metrics Framework content into a public dashboard and develop an analysis and reporting mechanism to evaluate program and systemwide efficacy.	**CEO-CIO**, **CEO-ATI**, CEO-SIB, and ISAB	TBD	* In process of reviewing JMF report with CEO-CIO
	ATI Strategic Project Management	Engage CSAC on development of a project management tool that incorporates the ATI inventories and JMF to inform ATI project development and Measure J	**CEO-ATI**	NA	* Preparing to onboard CSAC in Q4
	Inventory - Community Service Providers	Compile an inventory of community/faith based organizations and the services they provide, including type and number of beds, operational hours, location, etc.	**CEO-ATI**	NA	* Service Provider Survey live as of February 24, 2021

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FOUNDATIONAL RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST	PROJECT STATUS
	Inventory - County Programs	Compile an inventory of programs funded by County departments that help people from entering/reentering the criminal justice system; minimize the time spent in custody; stabilize the condition that led to their arrest; and receive the services and resources to help them return and remain in the community.	**CEO-ATI**	NA	* In progress
	Technology Staff Support	Recruit data analyst for the ATI unit to help develop data metrics and assess and analyze data outcomes.	**CEO-ATI, CEO-CIO,** and CEO-HR	TBD	* In progress

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FOUNDATIONAL RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST	PROJECT STATUS
113 Track and make public all relevant County service and incarceration spending both for those incarcerated and those reentering the community.	ATI Metrics Development	Collaborate with CIO to convert the Justice Metrics Framework content into a public dashboard and develop an analysis and reporting mechanism to evaluate program and systemwide efficacy.	**CEO-CIO**, **CEO-ATI**, CEO-SIB, and ISAB	TBD	* In process of reviewing JMF report with CEO-CIO
	Inventory - County Programs	Compile an inventory of programs funded by County departments that help people from entering/reentering the criminal justice system; minimize the time spent in custody; stabilize the condition that led to their arrest; and receive the services and resources to help them return and remain in the community.	**CEO-ATI**	NA	* In progress
	Measure J	Facilitate a community-led funding recommendation process for Measure J.	**CEO-ATI**	TBD	* Advisory Committee has been provided with subcommittees spending recommendations and County Departmental Proposals. * Advisory Committee has begun the process of prioritizing recommendations and proposals for funding and will provide its funding recommendations to the CEO by June 4, 2021

RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST	PROJECT STATUS
42 Improve staffing for the DMH ACCESS line to minimize caller wait times and ensure live operator coverage 24 hours, 7 days a week	ACR: Crisis Call Center Coordination	Currently, Didi Hirsch's Suicide Prevention Center (SPC) specializes in resolving crises by telephone, chat, and text. DMH's Help Line, on the other hand, specializes more in the dispatch of mobile response teams for individuals in crisis. With 9-8-8 on the horizon, it is important for DMH and Didi Hirsch to be able to triage calls to one another in line with our specialities: calls likely resolvable by telephone to Didi Hirsch, and calls requiring a non-law enforcement mobile response to DMH. We are in the process of developing such a connection and partnership, including any needed technological changes to facilitate this improved coordination of our crisis call center services.	**DMH, Didi Hirsch**	TBD	* Planning in-progress
	ACR: Crisis Call Center Modernization	Projects at both DMH and Didi Hirsch to modernize technology used by crisis call centers (DMH Help Line and Didi Hirsch's Suicide Prevention Center, respectively). Projects will help lay a foundation for improved service and coordination of crisis calls, texts, and chats.	**DMH, Didi Hirsch**	TBD	* In-progress
36 Increase (DMH) ambulance contracts to improve response times	ACR: PMRT / Therapeutic Transportation Program Expansion	PMRT is not currently a 24/7 program, nor is program capacity where it needs to be to serve as a reliable alternative to law enforcement around the clock for indicated crisis calls. Hence, capacity expansion is needed for the PMRT program, and at least some of this expansion should include an expansion of the transportation capacity featured in our Therapeutic Transportation pilot. This in turn may also lead to an increase in the peer workforce (staff with lived experience), in line with ATI Foundational Recommendation No. 108.	**DMH**	TBD	* Planning in-progress * Currently investigating funding opportunities to expand PMRT and Therapeutic Transportation programs to meet the need, and DMH has submitted a proposal for Measure J funding to this effect

RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST	PROJECT STATUS
	ACR: Therapeutic Transportation Pilot	DMH partnership with the City of Los Angeles Fire Department (LAFD), to pilot creation of non-law enforcement, civilian mobile crisis response teams capable of transporting clients to a crisis facility if needed. Pilot teams staffed by DMH but dispatched by LAFD, either via incoming 9-1-1 calls or by LAFD EMTs on the ground already. Pilot increases the civilian mobile crisis response resources as well as increasing transportation capacity for individuals in crisis. This is a critical need as wait times for ambulance transport can increase service times in our Psychiatric Mobile Response Teams (PMRT) program significantly and contribute to long wait times for response. This pilot also creates a truly 24/7 civilian mobile crisis response program for the first time in LAC as PMRT does not currently operate 24/7.	**DMH, LAFD**	TBD	* Pilot in progress
37 Create another option for behavioral health crises, i.e., CBO behavioral health services through an app	ACR: EMS Alternative Transportation	LA County Emergency Medical Services (EMS) Agency, part of DMH, has initiated a pilot and corresponding guidance for EMTs to transport individuals experiencing a behavioral health crisis to destinations other than emergency rooms, as a preferred alternative to emergency rooms except when acute medical care is required. Alternative facilities include behavioral health urgent care centers (UCCs) and sobering centers.	**DMH, EMS**	TBD	* In-progress

OTHER RECOMMENDATIONS BEING ADDRESSED

RECOMMENDATION	PROGRAM/ PROJECT	DESCRIPTION	DEPARTMENTS (BOLD = LEAD)	COST	PROJECT STATUS
41 Develop and expand a decentralized range of clinical spaces countywide and ensure that current sites are sufficiently resourced	ACR: EMS Alternative Transportation	LA County Emergency Medical Services (EMS) Agency, part of DMH, has initiated a pilot and corresponding guidance for EMTs to transport individuals experiencing a behavioral health crisis to destinations other than emergency rooms, as a preferred alternative to emergency rooms except when acute medical care is required. Alternative facilities include behavioral health UCCs and sobering centers.	**DMH, EMS**	TBD	* In-progress
45 Substantially increase the number of co-response teams	ACR: Co-Response Program Expansion	Some crisis calls require a law enforcement response, typically due to the presence of a serious and imminent threat to public safety. In these scenarios, co-response with behavioral health crisis professionals and law enforcement ensures the individual in crisis is getting the "care first" services they need. Co-response program pairs behavioral health professional with specially trained law enforcement on the same team, ensuring individuals in crisis get the right care even when law enforcement must also be present. There is a need for more capacity in our co-response programs to ensure that all crisis calls needing a law enforcement response are also served by a behavioral health co-response.	**DMH, LAPD, LASD**	TBD	* Currently investigating funding opportunities to expand co-response programs to meet the need, and DMH has submitted a proposal for Measure J funding to this effect (to fund only the DMH staff who are part of these co-response teams; no proposed Measure J funding may go to any law enforcement agency)