

MOTION BY SUPERVISOR HOLLY J. MITCHELL

May 18, 2021

Sustaining and Expanding Jail-Based Diversion

Since the creation of the Office of Diversion and Re-entry (ODR) in September 2015, ODR has [removed](#) more than 6,100 individuals from the jails and connected them to community-based treatment and various types of supportive housing [programs](#). The average cost of ODR’s permanent supportive housing jail-based diversion program (housing program) as recently cited in the Men’s Central Jail (MCJ) Closure Work Group (“Men’s Central Jail Closure [Plan](#): Achieving a Care First Vision,” March 30, 2021), is \$181 per person per day and primarily includes intensive case management services and housing funded by ODR, and clinical service costs for serious mental illness funded by the Department of Mental Health (DMH). Permanent supportive services provided through this program are designed to serve, for life, those eligible individuals with severe mental illness, who are connected with permanent supportive housing, wrap-around services and mental health treatment. Alternatively, incarceration in the Los Angeles County (County) jails is estimated to cost roughly \$600 per person per day. In addition, 90% of individuals successfully remain housed after six months, and only 15% had a felony conviction within the next year. ODR and its community and County partners have also [served](#) over 25,600 individuals through its reentry programs, at a cost of \$10 per day per client, by connecting individuals to community-based providers. Providers offer a range of services, including physical and behavioral healthcare, legal and employment

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assistance, education, family support services, and family guidance and support by a case manager with lived experience.

ODR recently demonstrated its ability to quickly scale its programs and services. In response to the COVID-19 pandemic. ODR and its community-based partners, with the support of one-time federal COVID-response funding, quickly diverted and housed 211 individuals who were released from County jails and provided thousands of individuals with wraparound reentry services. As a result, many vulnerable residents were diverted from homelessness and removed from an environment where they were at high risk of becoming infected with the COVID-19 virus.

Despite substantial jail depopulation due to COVID-19 related policies, progress towards diverting incarcerated individuals with serious mental health needs has stagnated. A 2020 [study](#) by the RAND Corporation (RAND study) showed that up to 61% of individuals incarcerated in County jails with mental health needs (about 3,600 individuals) could be diverted into community-based services, if they meet specific legal/court requirements, but only 5% of the eligible population were being diverted.

The MCJ Closure Work Group report also recommended funding at least 3,600 beds (services and housing) for community-based mental healthcare, consistent with the RAND study, and at least 400 inpatient beds for individuals with serious medical substance abuse-related, and/or housing needs. This recommended expansion is a critical part of the County's efforts to sufficiently reduce its jail system to close down MCJ. The Board of Supervisors has an opportunity to take a key step towards closing a facility that has for decades been the subject of federal investigations, lawsuits, and settlement agreements due to a history of violence and inhumane conditions.

Despite the efficacy of the ODR model, and numerous efforts to develop a funding road map, including motions in [May](#) 2019 and in [July](#) 2020, sufficient funding has not been identified to sustain current operations, much less scale up diversion efforts to keep pace with the growing need for reentry services. Despite the Superior Court's support for expanded diversion programs, and the readiness of community partners, thousands of eligible individuals remain in jail due to a lack of resources.

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While jail-based diversion is an impactful program and a critical piece of the County's justice reform work, it is part of the array of "Care First" services provided by ODR. As ODR is primarily funded with one-time funding, the Chief Executive Officer (CEO) has previously been tasked with providing recommendations to secure ongoing funding, to maintain ODR's work for existing clients and address the impending "fiscal cliff" it faces when current one-time funds are fully expended, which is expected to materialize in Fiscal Year 2022-23.

The MCJ Closure Work Group has laid out a roadmap for finally closing down MCJ in the short-term of which ODR's jail-based diversion program is a critical piece. The absence of ongoing funding is the main implementation obstacle preventing ODR and its community partners from scaling up services. To achieve the "Care First" vision, the County must explore a range of strategies for funding and scaling the 4,000 beds recommended by MCJ Closure Work Group.

I/WE THEREFORE MOVE THAT THE BOARD OF SUPERVISORS:

1. Instruct the Director of the Department of Health Services, in collaboration with the Director of the Office of Diversion and Reentry (ODR), Chief Executive Officer (CEO), the Director of the Department of Public Health (Substance Abuse and Prevention and Control), County Counsel, and other relevant stakeholders, to report back in writing in 90 days with an analysis of the feasibility of using Cal AIM and other potentially relevant funding sources to sustain existing beds, as well as expand ODR's jail-based diversion program, with consideration for and discussion of any policies, regulations, or other requirements attached to this funding that could potentially hinder or otherwise significantly affect the implementation of ODR's jail-based diversion, and report back with recommendations on how these funds can be used to achieve sustainability of ODR's existing 2,200 beds, as well as the expansion of 3,600 beds for community-based mental healthcare/housing and 400 inpatient beds for individuals with serious medical, Substance Use Disorder and/or housing needs that are identified for diversion as part of the report entitled, "Men's Central Jail Closure Plan: Achieving a Care First Vision" (MCJ Report) submitted on March 30, 2021.

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2. Instruct the Director of the Department of Mental Health (DMH), in collaboration with the CEO, County Counsel, Director of ODR, and other relevant stakeholders, to report back in writing in 90 days with a feasibility analysis and recommendations for using mental health funding sources to expand ODR jail-based diversion. This analysis should include a detailed discussion of how much funding is available for ODR jail-based diversion from each mental health funding source and identifying any legal limitations/restrictions for each mental health funding source in relation to funding ODR jail-diversion. This report should also include a discussion of how use of these funding sources can be used to contribute towards the goals of:
 - a. Sustaining ODR's existing 2,200 housing program and diverting at least 1,000 additional eligible individuals (above what is currently feasible with existing ODR resources) within one year; and
 - b. Diverting all eligible individuals within three years, including at least 3,600 beds for community-based mental healthcare, including housing and 400 beds for individuals with serious medical, Substance Use Disorder and/or housing needs that are identified for diversion in the MCJ Report.
3. Instruct the Director of ODR, in collaboration with the CEO and other relevant stakeholders, to report back in writing in 30 days with a proposal on the regular reporting of data points needed to track and monitor resources for existing and expanded jail-based diversion, such as the number of Intensive Case Management Services and housing slots available, filled and unfilled, as well as associated costs and needed resources.

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(CAS/JM/YV)