This handbook was designed for two-sided printing.

For this reason, blank pages were inserted intentionally throughout the handbook.

Thank you.



hope. recovery. wellbeing.

## **Quick Reference**

# SEGRETARIAL & CLERICAL HANDBOOK

Jonathan E. Sherin, M.D., Ph.D. Director

Revised May 2019

## LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH OFFICE OF THE DIRECTOR

May 30, 2019

TO:

DMH Secretarial/Clerical Support Staff

FROM:

Thao Do

**Executive Secretary** 

SUBJECT: "QUICK REFERENCE" SECRETARIAL AND CLERICAL HANDBOOK

This "Quick Reference" Secretarial and Clerical Handbook was developed to provide easy, ready-reference guidance for preparing departmental correspondence. establishes the standard secretarial and clerical procedures used by our Department. Adherence to this handbook will ensure that all correspondence leaving the Department will be handled in a uniform, consistent, and organized manner.

Your correspondence, personal contacts, and telephone usage represent the Department of Mental Health (DMH). Therefore, setup is very important in a business letter/memo. It is a noticeable feature of a letter/memo and can interest or prejudice a reader at a glance. Lopsided letters, top-heavy letters, letters running off the bottom of pages, misspelled words or typographical errors, all are a sign of inefficiency and reflect on the merits of the senders. If an ill-balanced letter is received, it suggests that all other services offered by the sender might be as carelessly constructed.

No matter how busy you are, take a moment to review your correspondence. Proofread the finished product. Always remember, if you are not pleased or satisfied with the finished product, other people will feel likewise.

If you have questions regarding the contents of this handbook, do not hesitate to contact your division Management Secretary or one of the Senior Management Secretaries in the Executive Office. This handbook will be updated as necessary.

TLD:tld

Noted and Approved:

Jonathan E. Sherin, M.D., Ph.D.

**Director** 

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# LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH GUIDELINES FOR CORRESPONDENCE PREPARATION

The following basic guidelines apply to all correspondence prepared (written and edited) in the Department of Mental Health (DMH) -- whether regular letters, Board letters, memos, etc.

#### **GENERAL**

#### **Paper**

All correspondence addressed to someone outside the Department should be on Mental Health letterhead stationery for the first page and plain white paper of similar quality for the second and succeeding pages. This includes memos and letters to other County departments, other governmental agencies, private companies, and members of the general public, as well as formal letters to departmental employees (e.g., disciplinary or commendation letters). For County departments, a memo format on DMH letterhead is appropriate.

Use plain white paper for all internal Mental Health memos. [Include the name of the section on the top of the page and centered (see Sample A).]

#### Type Style

**Block Style** – All lines begin at the left margin. Nothing is indented except for displayed quotations, tables, and similar material.

#### Font Style

All memos/letters should be in Arial Font, 12 point type, except for the filename, which should be in 8 point type.

#### **Margins**

Correspondence should have a well-balanced appearance, much like a picture in a frame. Left and right margins should be of near equal width, not less than the standard one-inch wide. All correspondence should be right margin justified. If a letter turns out noticeably off-balance, please correct it.

Leave a bottom margin of at least 6 lines (one inch). If the letter requires more than one page, the bottom margin on the first page can be increased up to 12 lines (2 inches).

#### **Spacing**

All DMH correspondence is to be single spaced, with double spacing between paragraphs unless a format indicates otherwise. A minimum of two lines is required before continuing a paragraph to a succeeding page. A continued paragraph on a succeeding page also requires a minimum of two lines; therefore, a four-line paragraph is the shortest paragraph that may be divided between two pages.

#### Date

The date consists of the name of the month (written in full—never abbreviated or represented by figures), the day (written in figures and followed by a comma), and the complete year. For example: July 17, 2019, not 7/17/19.

Place the date at the left margin, on the third line below the letterhead, or position it approximately two inches from the top of the page.

#### **Inside Address**

Block style, flush with the left margin. Make the lines of the address as nearly equal as possible. Try to keep the address to a maximum of five lines, preferably four. Punctuation should not be used at the end of any line in the address block except after permissible abbreviations (i.e., Inc., Co., or Corp.). The symbol on ampersand (&) is permissible only when the department/firm itself uses it.

Always use "Mr." or "Ms." before a personal name unless another title is applicable, i.e., "Reverend" or "Honorable."

Spell out such words as Street, Avenue, and Boulevard. When using two-letter state abbreviations, type them in capital letters (i.e., CA) with no periods after or space between the letters.

#### **Attention Line**

We are eliminating the use of "Attention" lines whenever possible. It is simpler to type the name of the person or department above the company name and omit the attention line. However, if an "Attention" line is unavoidable, do not abbreviate the word "Attention." Type it two lines below the address line, even with the left margin (i.e., Attention: Mr. John Doe). The "Attention" line may be typed in capital and small letters or in all-capital letters.

Attention line on a memo is typed two lines underneath the name/title of the person the memo is addressed to -- not to the left of the margin (see Sample A).

#### **Salutation**

Type the salutation, beginning at the left margin, on the second line below the attention line (if used) or on the second line below the inside address. Follow the salutation with a colon unless you are typing a social letter.

#### **Subject**

The subject line briefly identifies the main idea of the text of the letter (or the message). Most <u>letters</u> should include a subject line. The subject line appears between the salutation and the body of the letter. It should be centered (for special emphasis), all-capital letters, and **bold printed** two lines below the salutation and should not consist of more than four lines (see Sample E).

All DMH <u>memos</u> must include a subject line. It should be typed two lines below the name and title of the person sending the memo and should be left justification only (see Sample A).

#### **Body of the Letter**

Begin the text on the second line below the subject line or on the second line below the salutation. Block style with single spacing and double spacing between paragraphs.

Spell out dates in the body of the letter. For example: July 17, 2019, not 7/17/19.

#### **Body of the Memo**

Begin the text on the third line below the subject line. Block style with single spacing and double spacing between paragraphs.

#### **Headings/Subheadings**

Headings/subheadings should be underlined and bold printed.

#### **Header – Second and Succeeding Pages**

Type name of addressee one inch (line 7) from top of the page, the date on the second line, and the page number on the third line. Resume the body of the letter four lines below this. (For example, see Sample D, Page 2.)

#### **Complimentary Closing**

Type the complimentary closing two lines below the last line of the letter, flush with the left margin. The accepted closing for DMH letter is "Sincerely,". Closing for Board letter only is "Respectfully submitted,".

Note: Never carry only the signature over to the second page of a letter. There must always be two or three lines of writing on the second page to connect the signature with the letter. Attempt to carry the entire last paragraph over if it is very short. This gives a good balance and a nice finish to a letter.

#### **Signature and Title**

For correspondence signed by the Director, type his/her name (in initial caps) four lines below the complimentary closing; type his/her title on the next line. Only the Chief Deputy Director can sign correspondence for the Director.

#### <u>Initials</u>

Initials should be typed two lines below the last line of the signature block, flush with the left margin. The first set of the initials should always be the sender's and followed by the senior manager's and/or staff person's initials, in capital letters, with a colon between each set, and followed by the typist's initials in lower case. **Do not exceed four sets of initials**.

Note: Please remember to always identify and date CHARTS and ATTACHMENTS.

#### **Enclosures and Attachments**

When an enclosure or attachment accompanies correspondence, the word "Enclosure" or "Attachment" is to be typed two lines below the identifying initials, flush with the left margin. If space is very limited, it is acceptable to type the "Attachment" or "Enclosure" on the following line below the identifying initials.

Note: Before sending the letter/memo, make sure that the number of Attachment(s) or Enclosure(s) cited in the body of the letter agrees with the number of items that are actually enclosed.

#### Copy Transmittal – c's and bc's

The initial for copies followed by a colon ("c:") is to be typed in lower case, two lines below the initials (or following Enclosure/Attachment, if applicable) flush with the left margin. Show the names of individuals and their departments or firms who are to receive copies (as specified by the senior manager). [All correspondence signed by a Deputy Director should show "c:" to the Director, Chief Deputy Director, and, as appropriate, other respective manager(s)].

If several persons are to receive copies, list the names according to the rank of the persons or in alphabetical order.

Copies to Executive Leadership Team should be limited to Board Motions, letters to contractors, and sensitive issues. Do not copy the Executive Leadership Team on routine format letters/memos. For example, if the letter or memo has to do with Adult Services, you should "bc" the manager of the Service Area. DO NOT include "bc" on the original memo/letter; indicate on the file copy only for reference.

bc: (the name of the person who wrote memo/letter)
(any other person your supervisor wants to get a copy of the memo/letter)

#### **File Identification**

Please make this the last item on your document. It should be small in appearance (use a smaller font).

#### **Confidential Correspondence**

When preparing a confidential memo or letter, please put **CONFIDENTIAL** on the first page (at the top, centered, bolded, capitalized and underlined) (see Samples B & F). Confidential information should always be placed in an envelope marked Confidential.

#### **Confidential Patient Information**

When there is written communication concerning a patient, the words **CONFIDENTIAL PATIENT INFORMATION** must be placed at the top of memo or letter (see Sample C).

#### **Envelopes**

DMH envelopes, with a printed return address on the upper left corner, are used for correspondence being sent by U.S. Mail only.

Manila (yellow) envelopes should be used for correspondence being sent to other County departments.

Always use single spacing and block each line at the left.

#### **BOARD OF SUPERVISORS**

Memos responding to a Board order should be copied as follows:

c: Chief Executive Officer
Executive Officer, Board of Supervisors
County Counsel

The Auditor-Controller should be copied on memos concerning fiscal issues only.

When information is requested by a Supervisor, the response to the Supervisor should be prepared for the Director's signature.

When addressing individual Supervisor, please use one of the following (where applicable):

TO: Supervisor Hilda L. Solis

First District

Supervisor Mark Ridley-Thomas

Second District

Supervisor Sheila Kuehl

Third District

Supervisor Janice Hahn

Fourth District

Supervisor Kathryn Barger

Fifth District

#### **Goldenrod Memos to Board**

See Sample G for facility relocation and Sample G-1 for new facility.

#### **Board Motion (see Sample H)**

The motion should always be double-spaced.

Please note the action at the lower right corner of the motion. The action block should always be on the first page. The names of the <u>Supervisors are listed in District order</u> with the current Chair or Chairman of the Board listed last.

If the Motion exceeds one page, "- MORE -" should be typed just above the action block and centered on the page. The Motion then should be continued on a second page. The symbol # # # # # should be typed at the end of the motion.

#### CORRESPONDENCE SUBMITTED FOR SIGNATURE

Correspondence should be assembled for signature in the following order:

- (a) Clearance Slip (see Sample I)
- (b) Original
- (c) Pending copy (first page of document only, write word pending on top right corner)
- (d) Enclosure(s) or Attachment(s)
- (e) Any pertinent background material, i.e., initiating correspondence

The senior secretary in your division/unit must review all outgoing correspondence before it is signed and/or processed (see Attachment I). Managers/secretaries do not want to handle superfluous paperwork; therefore, extra copies and envelopes should remain on your desk while the correspondence is in the process of being routed for signature.

#### Submission of Correspondence for Signature

1. All correspondence should be accompanied with a clearance slip or a cover letter (when appropriate)—in a folder.

The clearance slip will indicate who the originator is, who should see the correspondence before it is signed, and who should get the correspondence back once it has been signed (with a phone number included). Folder will alert the secretary that it is something that has to be signed and won't get lost in the in-box with other correspondence.

- 2. Any background material should be attached to the inside left side of the folder. Please include originating documents (if any).
- 3. Work should be planned so that items will rarely fall into the "Rush" category.
- 4. When the correspondence is signed, the original will be returned to the division/unit secretary for immediate handling (copying, distribution, mailing/ delivery) (see Sample I).

All copies should be made from the signed original. NO COPIES ARE TO BE STAMPED "ORIGINAL SIGNED."

- 5. Copies of the signed original and attachments, if appropriate, should be given to the appropriate persons as soon as possible.
- 6. If you are given an assignment by a manager but the response memo or letter is signed by you, the manager originating the assignment must receive a copy of the response memo or letter. If the response is verbally communicated, a written statement as to the action taken should accompany the back-up documentation (if applicable) and the originating document.



# LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH NAME OF DIVISION

Month #, ####

TO: Name

Title

Division (if not from the same division)

**ATTENTION: Name** 

FROM: Name

Title

SUBJECT: PREPARATION OF INTEROFFICE MEMO

(USE ALIGN LEFT JUSTIFICATION ONLY—NOT FULL)

This memo will serve as an example of an interoffice memorandum. Please note that these memos are to be done on plain white paper. (Note: You are to indicate on top and centered (in bold print) where the memo is coming from, example: **OFFICE OF THE DIRECTOR**.)

#### **Format**

- Top margin one inch or 7 lines down from the top of page.
- Minimum one inch bottom and left/right margins.
- Block format All information flush to the left margin with the exception of indented material.
- Subject line should be capitalized and **bold** printed.
- Begin typing the message on the third line below the subject.
- The header for the second and succeeding pages is as follows:
  - Who the memo is to (not necessary to include position)
  - Current Date
  - Page Number

Your cooperation is appreciated.

XX:xx



# LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH NAME OF DIVISION

#### CONFIDENTIAL

Month #, ####

TO: Name

Title

Division (if not from the same division)

FROM: Name

Title

SUBJECT: PREPARATION OF INTEROFFICE CONFIDENTIAL MEMO

(USE ALIGN LEFT JUSTIFICATION ONLY—NOT FULL)

This memo will serve as an example of an interoffice memorandum. Please note that these memos are to be done on plain white paper. (Note: You are to indicate on top and centered (in bold print) where the memo is coming from, example: **OFFICE OF THE DIRECTOR**.)

#### **Format**

- Top margin one inch or 7 lines down from the top of page.
- Minimum one inch bottom and left/right margins.
- Block format All information flush to the left margin with the exception of indented material.
- Subject line should be capitalized and **bold** printed.
- Begin typing the message on the third line below the subject.
- The header for the second and succeeding pages is as follows:
  - Who the memo is to (not necessary to include position)
  - Current Date
  - Page Number

Your cooperation is appreciated.

XX:xx



# LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH NAME OF DIVISION

#### **CONFIDENTIAL PATIENT INFORMATION**

Month #, ####

TO: Name, Discipline

Title Division

FROM: Name, Discipline

Title Division

SUBJECT: CONFIDENTIAL PATIENT INFORMATION MEMO

(USE ALIGN LEFT JUSTIFICATION ONLY—NOT FULL)

This memo will serve as an example of a Confidential Patient Information. Please note that these memos are to be done on plain white paper. (Note: You are to indicate on top and centered (in bold print) where the memo is coming from, example: **OFFICE OF THE DIRECTOR**.)

#### **Format**

- Top margin one inch or 7 lines down from the top of page.
- Minimum one inch bottom and left/right margins.
- Block format All information flush to the left margin with the exception of indented material.
- Subject line should be capitalized and **bold** printed.
- Begin typing the message on the third line below the subject.
- The header for the second and succeeding pages is as follows:
  - Who the memo is to (not necessary to include position)
  - Current Date
  - Page Number

XX:xx

Attachment (if applicable)

c: Name, Discipline



County Department Memo Format

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JONATHAN E. SHERIN, M.D., Ph.D. Director

Curley L. Bonds, M.D. Chief Deputy Director Clinical Operations **Gregory C. Polk, M.P.A.**Chief Deputy Director
Administrative Operations

Month #, ####

TO: County Departments Other Than DMH

FROM: Name, Discipline

Title

SUBJECT: SAMPLE MEMO TO OTHER COUNTY DEPARTMENTS

(USE ALIGN LEFT JUSTIFICATION ONLY—NOT FULL)

This memo will serve as an example of the format to be used for all memos addressed to someone outside of the Department of Mental Health, i.e., Board members, Board staff, and other County departments/agencies.

#### **Format**

- Use DMH letterhead.
- Begin date on the third line below the last line on the letterhead; one inch top margin on the second and succeeding pages.
- Minimum one inch bottom and left/right margins.
- Block format All information flush to the left margin with the exception of indented material.
- Subject line should be capitalized and bold printed.
- The header for second and succeeding pages is as follows:
  - Who the memo is to
  - Current Date
  - Page Number

Name Month #, #### Page 2

#### **Items to Remember**

- The word "County" when referring to the County of Los Angeles or any other specific county should always be initial cap and "State" when referring to the State of California or any other specific state. The word "federal" is not capitalized.
- If a memo is of a confidential nature, type the word CONFIDENTIAL in all-capital letters (**bold** and <u>underscored</u> for special emphasis) and centered. Example is as follows:

#### CONFIDENTIAL or C O N F I DE N T I A L

XX:xx

Attachment (if applicable)

c: (if applicable)





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JONATHAN E. SHERIN, M.D., Ph.D. Director

Curley L. Bonds, M.D. Chief Deputy Director Clinical Operations **Gregory C. Polk, M.P.A.**Chief Deputy Director
Administrative Operations

Month #, ####

Ms. or Mr. (spell out person's name)
Put title here if it does not fit on first line
Name of company if applicable
Address
City, State Zip

Dear Ms. or Mr.:

#### SUBJECT

This is the format to be used for letters to other government agencies (other than County departments), private companies, and members of the general public, as well as formal letters to department employees (e.g., disciplinary letters).

#### **Format**

- Use DMH letterhead.
- Begin date on the third line below the last line on the letterhead; one inch top margin on the second and succeeding pages.
- Minimum one inch bottom and left/right margins.
- Block format All information to the left margin with the exception of indented material.
- Subject line should be centered, capitalized and bold printed.
- The header for second and succeeding pages is:
  - Who the letter is to
  - Current Date
  - Page Number

Never carry only the signature over to the second page of a letter. There must be two or more lines of writing on the second page to connect the signature with the letter. Attempt to carry the entire last paragraph over if it is very short. This gives a good balance and a nice finish to a letter.

Name Month #, #### Page 2

#### **Items to Remember**:

- Standard closing is "Sincerely,"
- For correspondence signed by the Director, his/her name (in initial caps) four lines below the complimentary close; type his/her title on the next line. Only the Chief Deputy Directors can sign correspondence for the Director.

Sincerely,

Name, Discipline Title

XX:xx

Attachments (if applicable)

c: [Specify after their name where they are from. For example: John Doe, Beaches and Harbors. Also, if your supervisor wants you to c: someone from DMH, put their name and indicate they are from DMH (if applicable). See Sample C]





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JONATHAN E. SHERIN, M.D., Ph.D. Director

Curley L. Bonds, M.D. Chief Deputy Director Clinical Operations **Gregory C. Polk, M.P.A.**Chief Deputy Director
Administrative Operations

#### **CONFIDENTIAL**

Month #, ####

Ms. or Mr. (spell out person's name)
Put title here if it does not fit on first line
Name of company if applicable
Address
City, State Zip

Dear Ms. or Mr.:

#### SUBJECT

This is the format to be used for letters to other government agencies (other than County departments), private companies, and members of the general public, as well as formal letters to department employees (e.g., disciplinary letters).

#### **Format**

- Use DMH letterhead.
- Begin date on the third line below the last line on the letterhead; one inch top margin on the second and succeeding pages.
- Minimum one inch bottom and left/right margins.
- Block format All information to the left margin with the exception of indented material.
- Subject line should be centered, capitalized and bold printed.
- The header for second and succeeding pages is:
  - Who the letter is to
  - Current Date
  - Page Number

Name Month #, #### Page 2

Never carry only the signature over to the second page of a letter. There must be two or more lines of writing on the second page to connect the signature with the letter. Attempt to carry the entire last paragraph over if it is very short. This gives a good balance and a nice finish to a letter.

#### **Items to Remember**:

- Standard closing is "Sincerely,"
- For correspondence signed by the Director, his/her name (in initial caps) four lines below the complimentary close; type his/her title on the next line. Only the Chief Deputy Directors can sign correspondence for the Director.

Sincerely,

Name, Discipline Title

XX:xx

Attachments (if applicable)

c: [Specify after their name where they are from. For example: John Doe, Beaches and Harbors. Also, if your supervisor wants you to c: someone from DMH, put their name and indicate they are from DMH (if applicable). See Sample C]





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JONATHAN E. SHERIN, M.D., Ph.D. Director

Curley L. Bonds, M.D. Chief Deputy Director Clinical Operations **Gregory C. Polk, M.P.A.**Chief Deputy Director
Administrative Operations

Month #, ####

TO: Supervisor Name

XXX District

FROM: Jonathan E. Sherin, M.D., Ph.D.

Director

SUBJECT: NOTICE OF DEPARTMENT ACTIVITY WITH POTENTIAL CITY IMPACT

The following department facility relocation is proposed to be initiated, or will undergo change, and may impact one or more cities within your District:

Name of Agency / Department:		
Department Contact:	Contact's phone #	
Headquarters office address:		
Current program address:		
Address program moved from:		
Address program is considering moving to:		
Timeframe or date of move:	Distance from old address:	
Max. contract amount (MCA) (for contract agencies only)	Contract allocation for facility:	
Name of program to be moved:		
Population to be served: (Specify age group / spec. populations)		
List services that will be provided:		
List services that were already being provided at this location:		

Supervisor Name Month #, #### Page 2

Number of staff:		Number of clie be s	ents to erved:	
Zoned for:	Zoned for: Office hours		hours:	
			1	
Summary of site improvements, i.e., reno	ovation, new construction	(include start and	d finish dates):	
Type of improvement:			Start date:	Finish date:
Type of improvement:			Start date:	Finish date:
Type of improvement:			Start date:	Finish date:
Type of improvement:			Start date:	Finish date:
Type of improvement			Start date:	Finish date:
Description of surrounding 100-yard area	a (including specific neigl	horhood informa	tion):	
Description of surrounding 100-yard area	a (mendaning specific fielgi	ibornoou informa	don).	
Parking available: Y N	Special Permits/L	icensing:		
Number of spaces				
Secured parking: Y N [				
Assessment of potential impact:				
Description of any contact, support or in including any departmental community of				ected officials

Distance to public transportation and accessibility:

Supervisor Name Month #, #### Page 2
ADDITIONAL/SUPPLEMENTAL INFORMATION
Description of land use review, e.g., specific zoning information and restrictions:
Description of previous use of the facility and proposed changes to the previous use:
Description of anticipated program volume and frequency of client visitation:

JES:XX:xx

c: Mental Health Deputy Chief Deputy Director





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JONATHAN E. SHERIN, M.D., Ph.D. Director

Curley L. Bonds, M.D. Chief Deputy Director Clinical Operations **Gregory C. Polk, M.P.A.**Chief Deputy Director
Administrative Operations

Month #, ####

TO: Supervisor Name

XXX District

FROM: Jonathan E. Sherin, M.D., Ph.D.

Director

SUBJECT: NOTICE OF DEPARTMENT ACTIVITY WITH POTENTIAL CITY IMPACT

The following Department project is proposed to be initiated, or will undergo change, and may impact one or more cities within your District:

Department	Name	Name of Manager, etc.		Telephone	
Contact Information	Email	XXX@dmh.lacounty.gov		Fax	
Impacted City or Cities		(List	t of cit	ties)	
Description of Project					
Additional Information Attached?					
Yes ☐ No ⊠  Description of  Potential Impact	Proposed Implementation Date **		September 1, 2015		
Additional Information Attached?					
Yes No S Exact Location(s) (if applicable)					

Supervisor Name Month #, #### Page 2

		Description of Prior Contact(s) with City or Cities
--	--	---

JES:XX:xx

c: Mental Health Deputy Chief Deputy Director



MOTION FOR SUPERVISOR
-----------------------

Specified health care providers are mandated to report suspected child abuse. This includes circumstances where the provider has reason to believe that unlawful sexual intercourse occurred between a minor female and an adult male. Very few reports of suspected child abuse are made, based on this provision, despite continued sexually transmitted diseases and pregnancies among young teenage girls.

In order to reduce the incidents of underage females having sex with adult males and to increase the number of adult males arrested for such statutory rape, we must seek to strengthen the suspected child abuse reporting mechanisms.

Two bills in the California legislature seek to address this issue, Assembly Bill (AB) 390 (Mountjoy) and Senate Bill (SB) 250 (Battin).

- MORE -

Solis	
Ridley-Thomas	
Kuehl	
Hahn	
Barger	

(**NOTE:** Chair(man) of the Board is listed last)

- 2 -

THEREFORE, I MOVE THAT THIS BOARD:

1. Instruct the Director of Health Services to report back in 30 days on ways

to improve training of providers, including providers under contract with

the County, on existing statutory requirements for reporting suspected

child abuse, and

2. Instruct the Director of Health Services, Chief Executive Officer, and

County Counsel to review proposed legislation on this issue, including AB

930 and SB 250, and report back to the Board in 30 days with

recommended positions on these bills, including recommended

amendments, and to recommend legislative ways to strengthen child

abuse reporting for illegal sexual acts between adult men and teenage

girls.

#####

XXX:XXX:XXX:xx

(date)



#### CLEARANCE SLIP

## **Board Relations, Report Responses**

				DISTRIBUTION
Date:			Please process	s and provide:
For simplying of (-11)			Thao	● hard copy + PDF file
For signature of (check one):	DR. SHERIN		Lupe	• hard copy + PDF file
	Dr. Bonds		Yolanda	● hard copy + PDF file
	Greg Polk		<del>-</del>	
From:	<u>Initial</u>		Comments	Phone #
Deputy Director or Discipline Chie	<u>f:</u> <u>Initial</u>		<u>Comments</u>	Phone #
Subject:				
Comments/Reference (if this is in		lease specify the	assignment #, etc.):	
EXTERNAL CLEARAN		D		6
CEO County Counsel Auditor-Controller Other(s)	Name of	Date		Comments

Clearance Slip



#### BOS Report Response Executive Leadership Signature Submission Process

- 1. Subject Matter Expert (SME) lead and team draft the report response.
- 2. SME-Lead sends draft to appropriate departments (indicated in the directive) for review (copy the Board Liaison).
- 3. SME-Lead forwards **final** formatted **e-file** (formatted by Unit Secretaries) to DMH Executive Leadership (Dr. Bonds, Greg Polk, and Dr. Sherin, and cc Board Liaison) for review/approval and a **final hard copy** to either Lupe Withers for Dr. Bonds or Yolanda Franklin for Gregory Polk.
  - a. It there are no revisions, Lupe or Yolanda will then forward the **final hard copy** for Chief Deputy Director's approval and signature on clearance slip, then will go to Thao Do for Dr. Sherin's signature.
  - b. If there are revisions, complete changes and re-submit to either Lupe Withers for Dr. Bonds or Yolanda Franklin for Gregory Polk for processing as stated in item a. above.
- 4. Executive Secretaries will return original signed report to originating unit for processing and distribution.