REVISED MOTION BY SUPERVISOR HILDA L. SOLIS

AND JANICE HAHN

Moving Forward: Expansion of Secure Mental Health Beds and Development of Secure Mental Health Facilities to Depopulate the Los Angeles County Jails

To address the complexity of mental health needs of those who are incarcerated in the Los Angeles County (County) jails, the County Board of Supervisors (Board) unanimously supported the September 2022 motion, "Addressing the Mental Health Crisis in Los Angeles County: Developing Mental Health Care Facilities to Help Depopulate the Jail"¹, which directed various County stakeholders for a report back on the development of secure mental health facilities in the County, creating care first settings which would allow for those with serious mental illness to stabilize and recover – a process which is increasingly difficult in an overcrowded jail setting.

There has been tremendous focus on those with mental health needs in the

¹ https://file.lacounty.gov/SDSInter/bos/supdocs/172956.pdf

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County jails, specifically, P3² and P4³, who are those with the most serious mental health needs and require more resources and support. As of January 30, 2023, there were 1,543 individuals at the P3 level of care and 172 at the P4 level of care in the County jails, which attribute to roughly 12% of the total jail population.⁴

Through the work and commitment of the relevant County Departments, including the Department of Health Services (DHS), the Department of Mental Health (DMH)), County Counsel, Chief Executive Office (CEO), and the Justice, Care, and Opportunities Department (JCOD), the report back produced a plan that would focus on four populations:

Department of Health Services	Department of Mental Health
Non-Conserved/Conservable Divertible	Lanterman-Petris-Short (LPS)
	Conserved/Conservable
Non-Conserved/Conservable Felony	Non-Conserved/Conservable Non-
Incompetent to Stand Trial (FIST)	Divertible, Non-FIST, and Non-LPS
	Conserved/Conservable

To better promote healing and decompress the crowded jails, the Board is committed to ensuring that alternatives to incarceration are accessible to even those with the most complex legal cases and severe mental health needs, like the P3 and P4 individuals who are currently incarcerated in the County jails.

To provide a better and a more therapeutic setting for the "sickest of the sick", it

² P3: Persistent danger of hurting self in less acute care setting; recurrent violence due to mental illness; inability to maintain personal hygiene; gross impairment in communication; and cannot safely or adequately be treated in a setting that requires independent control of their behavior.

³ P4: Severe debilitating symptoms; Meets Lanterman-Petris-Short (LPS) 5150 criteria for danger to self, others, or grave disability; medication refusal and moderate to severe symptomology; imminent risk of self-harm or harm to others secondary to mental illness; impairment in ability to care for self poses health risk; on-going refusal to engage in any form of treatment or intervention; serious medical illness refusing treatment secondary to untreated mental illness; severely disorganized thinking and behavior; and displays symptomology that would require impatient treatment in a community setting. ⁴ https://file.lacounty.gov/SDSInter/bos/supdocs/173274.pdf

is imperative that the Board moves forward with the plan proposed by the County's subject matter experts.

WE, THEREFORE, MOVE that the Board of Supervisors direct the Department of Mental Health and the Department of Health Services to move forward with the jail depopulation program ("the Program") to develop an initial 500 secure mental health care beds to care for P3/P4 individuals currently in the jails, including but not limited to developing secure beds for LPS conserved/conservable, felony incompetent to stand trial (FIST), non-LPS conserved/conservable, and the non-traditionally divertible populations, with the goal of using these beds for individuals incarcerated with a P3/P4 mental illness classification. The Departments should report in writing to the Board on progress made towards the Program initially in 90 days and quarterly thereafter until all beds are operational and occupied.

WE, FURTHER, MOVE that the Board of Supervisors do the following:

 Direct the Department of Health Services (DHS) - Office of Diversion and Reentry (ODR) and the Department of Mental Health (DMH) as well as District Attorney (DA), Public Defender (PD) and Alternate Public Defender (APD) to work with the Chief Executive Office (CEO) to finalize the Program budget and proposed staffing, including a listing of existing funding available and a plan to maximize federal and state funding, to implement the proposed programming. The Departments should include the revised out-year estimates of budgetary P3/P4 individuals from the jail as possible in their 90 day and quarterly reports.

- a. Direct the DHS, DMH, DA, PD and APD to include any funding requests that cannot be covered with existing funding or State and federal revenue available, and will require net County cost, in a future budget phase to allow the CEO to evaluate these requests within the context of the overall budget and numerous competing funding priorities and requests.
- 2. Direct CEO to work with DMH and DHS to finalize, fund, and allocate the necessary clinical, administrative and programmatic items, and with the DA, PD, and APD to allocate the necessary justice-related items needed to implement the Program, including taking any steps needed to allow the Departments to immediately and successfully recruit and hire for these positions. This may include, but is not limited to:
 - Approval of specialty exams that recognize relevant expertise and lived experience;
 - b. Using existing delegated authority, and if necessary, providing additional delegated authority to DHS and DMH for ordinance position authority and special step placements for all necessary clinical, and programmatic, and administrative support items for a period to be determined by the CEO; and
 - c. Extending any relevant incentives, special pay practices and pipeline programs established within LA County for these items.

- 3. Direct the Department of Human Resources (DHR) to take any recruitment, examination and appointment steps necessary in order to allow the Departments to immediately and successfully recruit and hire for the necessary staffing model, including the approval of specialty recruitments, and recognition of the relevant expertise and lived experience needed for successful Program operations to serve the P3/P4 population.
- 4. Delegate authority to the Directors of DMH and DHS, or their designees, to negotiate and execute new agreements and/or amendments to agreements with qualified providers, including revisions to statements of work, extension to agreement terms and/or increase contract sums, provided such actions do not exceed Board approved funding to deliver services to the P3/P4 populations, as proposed in the Program, subject to review and approval as to form by County Counsel with notification to the Board and the CEO. The foregoing delegated authority includes authority to negotiate on a case-by-case basis appropriate changes to the standard LA County insurance and indemnification provisions, and other standard LA County contract terms, subject to approval of County Counsel and CEO Risk Management.
- 5. Direct the County Homelessness Initiative, in collaboration with Los Angeles Homeless Services Authority, the City of Los Angeles, DMH, and DHS to report back in writing in 90 days on how individuals who complete their mandated justice system engagement can be moved to other housing funding streams (e.g., Measures H, DMH) from ODR housing funding streams, including the feasibility of changing the Coordinated Entry System (CES) so that ODR and

DMH justice involved populations qualify for permanent supportive housing through the CES.

WE, FURTHER, MOVE that the Board of Supervisors direct the Chief Executive Office Legislative Affairs & Intergovernmental Relations Branch to continue advocating to secure additional State and federal funding to support the mentally ill incarcerated population.

Finally, **WE, FURTHER MOVE** that the Board of Supervisors:

- 6. Direct JCOD, District Attorney, Public Defender, Alternate Public Defender, Office of Diversion and Reentry, and DMH to meet periodically, but no less often than every six months, with Los Angeles Superior Court (LASC) representatives to ensure the courts are informed about existing and newly added County and County-affiliated programs and facilities that are available to treat the justiceinvolved.
- 7. Request that the Sheriff, in consultation with Correctional Health Services, DMH, JCOD, CEO, and County Counsel, develop a written plan (including any necessary budget and staffing) for exercising his authority to implement mental health community placements pursuant to Penal Code sections 4011.6 and 4011.8, and to provide this written plan, along with policies and procedures for these placements, to the Board within 60 days.

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