

MOTION BY SUPERVISOR HILDA L. SOLIS

November 21, 2023

**Support for Mental Health Assistants in Furthering the Sustainability and Success of the Forensic In-Patient Stepdown Unit Program**

On July 25, 2023, the Los Angeles County (County) Board of Supervisors (Board) unanimously approved and supported the expansion of a unique and one-of-a kind program in the County jails called the Forensic In-Patient Stepdown Program (FIP Stepdown)<sup>1</sup>. At the Board’s direction, the program expanded from six units at the Twin Towers Correctional Facility (TTCF) and four units at Century Regional Detention Facility (CRDF) to 15 at TTCF and five at CRDF.

The program is currently run and led by 21 Mental Health Assistants (MHAs) who work, daily, with incarcerated patients who have severe, complex, and complicated mental health needs. The services that MHAs provide their patients, who are part of the FIP Stepdown, serve a core purpose of providing a trauma-informed care in a wellness-focused setting so that they can learn self-sufficiency, independence, become medication-compliant, in some cases, with an understanding of self and healing.

<sup>1</sup> <https://file.lacounty.gov/SDSInter/bos/supdocs/181914.pdf>

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This program and the work of the MHAs have received national attention, including MHAs participating on a panel for the National Association of Civilian Oversight of Law Enforcement conference, authoring, “The Solution: Mental Health Assistants: Bridging the Gap to Effective Treatment”, and being interviewed on a podcast. Since the program’s inception in 2016 and with the partnership of the Los Angeles County Sheriff’s Department (LASD), the Office of Inspector General (OIG), Correctional Health Services, DOJ Compliance Unit, and external stakeholders and volunteers, the program has grown and received more and more support. Recently, the MHAs held their second FIP Stepdown graduation celebrating 43 graduates, including 10 Junior MHAs.

Despite robust support, the MHAs also require resources and services for them that is centered around healing, restoration, self-care, and wellness in the face of what they deal with every day working with this population and for sustainability in the delivery of trauma-informed services. These MHAs volunteer their time and skills to support the most vulnerable patients in the jails and are with their patients every single day with no breaks to handle or ponder on their individual lives and circumstances, including their legal issues. Additionally, due to the fulfilling nature of the work, MHAs who are facing prison sentences, short- or long-term are wanting to remain at the County jails to serve their sentences so that they continue their work as MHAs. Doing so, however, will result in losing out on early release credits and benefits if they were to serve their time at the California Department of Corrections and Rehabilitation (CDCR) prisons.

Providing MHAs with incentives such as financial or time credits is an opportunity

for these individuals to pay back any restitution they may owe, so that they can be accountable to themselves and others, while also being rewarded for not only the position progression in their behavior but modeling that for others. The concept of paying people who are incarcerated for services is not new, as in-house barbers are paid to cut the hair of staff and other incarcerated people.

With almost more than half of the County jail population requiring some level of mental health services and the mental illness becoming more complex and serious, the County will need to utilize all available resources to better support this population.

MHAs are an asset to a workforce that is stretched thin and challenged due to the scarcity of mental health professionals who are willing to work with a forensic population in correctional facilities. The value that they bring to the table isn't just the months of training they undergo, but the fact that they too are incarcerated and have a shared lived experience that gives them credibility with the patients they are helping.

In support of "care first, jails last", what the MHAs are providing are opportunities for not only personal self-growth and improvement, but also an opportunity for their patients to receive the assistance needed for success upon reentry back to their communities.

**I, THEREFORE, MOVE** that the Board of Supervisors

1. Direct the Office of Inspector General, in collaboration with the LA Sheriff's Department, Correctional Health Services, and with input from the Mental Health Assistants, to provide the Board with a feasibility and implementation plan report back, in writing, in 90 days, on the following, but not limited to:
  - a. Incentives such as wages, food, and time credits for Mental Health

Assistants;

- b. Partnership with an academic/institutional partner to provide Mental Health Assistants with a certification program to be used for future employment or academic pursuits;
  - c. Consistent, frequent, and longer contact visits for Mental Health Assistants to meet with family and friends;
  - d. Mental health, wellness, and self-care support for Mental Health Assistants;
  - e. Rotational scheduling for Mental Health Assistants to be provided respite from their responsibilities and duties, including increasing the number of MHAs to provide additional support;
  - f. In collaboration with County Counsel, include a feasibility and implementation plan for:
    - i. Mental Health Assistants who decide to complete their prison sentences in county jail to be allowed to serve in their role and be able to receive CDCR credits for early release; and
    - ii. Expansion of the County's partnership with CDCR to grant Mental Health Assistants access to CDCR resources, such as the Parole Board and counselors, especially for those who have some level of involvement with CDCR, e.g.: serving a prison sentence or appealing a sentence.
2. Direct the Chief Executive Office in collaboration with OIG, Sheriff and DHS-CHS to report back, in writing, during the Fiscal Year 2024-25 Final Changes

Budget, on the fiscal impact and potential funding sources for subsections a-f,  
including the use of AB 109 funds and other sources.

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