



**PUBLIC REQUEST TO ADDRESS
THE BOARD OF SUPERVISORS
COUNTY OF LOS ANGELES, CALIFORNIA**

MEMBERS OF THE BOARD

HILDA L. SOLIS
HOLLY J. MITCHELL
LINDSEY P. HORVATH
JANICE HAHN
KATHRYN BARGER

Correspondence Received

| The following individuals submitted comments on agenda item: | | | | |
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| Agenda # | Relate To | Position | Name | Comments |
| 17. | | Oppose | Monisha Parker | <p>Strengthening the 24-Hour Residential Treatment Program (24-HRT) contracts in Los Angeles County requires a multi-pronged approach involving contractual improvements, program enhancements, and broader stakeholder engagement:</p> <p>1. Refining Contractual Language:</p> <p>Clearer Performance Standards: Define specific and measurable performance standards for treatment outcomes, program quality, and resident satisfaction. This allows for data-driven monitoring and ensures programs are achieving intended goals.</p> <p>Evidence-Based Treatment Practices: Require contractors to adhere to evidence-based treatment practices with demonstrated effectiveness in addressing the specific needs of the target population.</p> <p>Staff Qualifications and Training: Specify minimum qualifications and ongoing training requirements for program staff, ensuring they possess the necessary expertise and skills to deliver quality care.</p> <p>Data Sharing and Reporting: Require contractors to share relevant data regarding program utilization, client demographics, and treatment outcomes to facilitate program evaluation and continuous improvement.</p> <p>Transparency and Accountability: Include clear procedures for reporting concerns, resolving disputes, and enforcing contractual obligations. This ensures accountability and transparency throughout the program's operation.</p> <p>2. Program Enhancements:</p> <p>Individualized Treatment Plans: Emphasize the development and implementation of individualized treatment plans tailored to the specific needs and goals of each resident.</p> <p>Trauma-Informed Care: Ensure programs incorporate trauma-informed approaches that acknowledge the potential impact of past trauma on mental health and provide support accordingly.</p> <p>Cultural Competency: Emphasize the importance of cultural competency among program staff, ensuring sensitive and culturally appropriate care delivery.</p> <p>Transition Planning and Support: Integrate transition planning and support services into the program to help residents successfully reintegrate into the</p> |

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| | | | <p>community upon program completion.</p> <p>Holistic Approach: Adopt a holistic approach to treatment that addresses not only mental health needs but also other relevant factors like housing, employment, and social support.</p> <p>3. Stakeholder Engagement:</p> <p>Community Involvement: Engage with community members, mental health advocacy groups, and service providers in program design, review, and evaluation to ensure the program addresses community needs and aligns with local priorities.</p> <p>Family Engagement: Encourage and facilitate family engagement in the treatment process, providing support for both residents and their families.</p> <p>Client Feedback Mechanisms: Establish clear and accessible mechanisms for residents to provide feedback on their experiences within the program, promoting continuous improvement and ensuring client voices are heard.</p> <p>4. Additional Considerations:</p> <p>Explore alternative funding models: Investigate alternative funding models beyond traditional government grants, such as public-private partnerships or social impact investments, to ensure long-term program sustainability.</p> <p>Conduct cost-effectiveness analysis: Regularly conduct cost-effectiveness analyses to assess the return on investment associated with the 24-HRT program, demonstrating its value and informing future resource allocation decisions.</p> <p>Promote program awareness: Increase public awareness regarding the 24-HRT program, its eligibility criteria, and its benefits, allowing individuals in need to access services more easily.</p> <p>By implementing these recommendations, Los Angeles County can strengthen its 24-HRT contracts, fostering improved program quality, accountability, and effectiveness in supporting individuals with mental health challenges in their journey towards recovery and community reintegration.</p> |
| | Other | Dakota Kelley | <p>\$11,176,520 two year contract for only 16 adult beds. The contract claim to be an "alternative to acute hospital care" by stating " clients will receive therapeutic services such as " vocational, interpersonal, and independent living skills."</p> <p>The services do not meet the criteria of mental health. These services are under the heading of social service skills. The services are inappropriate nor effective for the targeted population of admitting persons with " an acute psychiatric episode" in a psychiatric health facility. The population targeted is</p> |

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| | | | | <p>screaming for therapeutic services when entering a residential care facility - daily one-to-one therapy sessions targeting symptoms of depression, techniques like "thought stopping" to combat intrusive thoughts or flashbacks, or art therapy or music therapy to release feelings of hopelessness and helplessness. I recommend a therapeutic environment mixing psychotropic medication with therapy for the most effective and appropriate treatment model.</p> <p>Also, all patients have a right to treatment in a safe environment. The population in the contract is mixing too many populations requiring specialized training to be an appropriate therapeutic setting. Someone with a substance abuse disorder should not be mixed with someone presenting with Depressive Disorder or suicidality. Furthermore, someone with a history of incarceration (and has acclimated to that cultural norm) should never be housed with the other two populations. That is irresponsible and a direct violation of patient's rights for treatment in a therapeutic and safe environment. Each group demands its own separate unit.</p> <p>Lastly, the Performance Based Outcomes do not even address measuring the effectiveness of treatment. The Performance Based Outcomes measure bed capacity, documentation, and providing written documentation of an aftercare plan. I oppose Los Angeles County BOS directing taxpayer funding to models that are not seriously implementing applied psychological theories for effective and appropriate treatment.</p> <p>Lastly, the contracting Agency is receiving more than enough taxpayer financing for creating a program serving more than 16 beds. The contracting Agency is receiving enough taxpayer financing for at least 30 beds.</p> |
| | | Item Total | 2 | |
| Grand Total | | | 2 | |