

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

Correspondence Received

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

MEMBERS OF THE BOARD

			The following individuals submitted comments on agenda item:		
Agenda #	Relate To	Position	Name	Comments	
Set Matter 2.		Oppose	Monisha Parker	Dear Board of Supervisors, I am writing to you today to discuss a pressing issue that affects thousands of individuals and families across Los Angeles County – the need for an improved continuum of care for mental health and substance use disorder (SUD) services. Addressing this complex challenge requires a comprehensive and multifaceted approach. I would like to present a series of strategic recommendations aimed at enhancing our system of care. 1. Assessment of Current Services: An initial step is to conduct a comprehensive assessment of existing mental health and SUD services. This evaluation should identify gaps in service delivery, utilization rates, bed availability, and wait times, alongside assessing the effectiveness of current programs. 2. Integration of Services: We must promote the integration of mental health and substance use treatment services. Co-locating these programs will facilitate communication among providers, offering more holistic care to those in need. 3. Expanding Capacity: Increasing the number of available mental health and SUD beds is critical. This can be achieved through funding new facilities, expanding existing resources, and exploring alternative models, such as sober living environments. 4. Crisis Intervention Services: Enhancing crisis intervention services, such as mobile crisis teams and crisis stabilization units, is essential. These services can provide immediate support and divert individuals from emergency departments or jails into appropriate treatment options. 5. Community-Based Services: Investing in community-based treatment options, particularly outpatient and prevention services, is vital. Telehealth can significantly improve access to care, especially in underserved areas. 6. Training and Workforce Development: Addressing workforce shortages by increasing training programs for mental health and SUD professionals is imperative. Culturally competent care practices must also be encouraged to better serve our diverse communities. 7. Collaboration with Law Enfo	

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		shared decision-making processes will empower individuals to engage actively in their treatment plans, fostering a sense of ownership and commitment to their recovery journey. 9. Data Sharing and Coordination: Developing robust data-sharing practices across agencies will facilitate coordinated care, track patient progress, and identify areas for improvement, ultimately enhancing overall service delivery. 10. Funding and Resources: Advocating for increased funding at both the state and federal levels is crucial to sustaining and expanding mental health and SUD treatment options. Exploring innovative funding models, including public-private partnerships, can also provide necessary financial support. 11. Public Awareness and Stigma Reduction: Launching public awareness campaigns aimed at reducing the stigma surrounding mental health and substance use disorders can encourage more individuals to seek help and support. 12. Policy and Advocacy: Engaging with policymakers to influence legislation is vital for supporting mental health and SUD initiatives, with a focus on access to care, funding, and patient rights. 13. Aftercare Services: Finally, we must ensure that adequate aftercare and follow-up services are in place for individuals transitioning from inpatient care to outpatient settings. This support is essential in preventing relapse and improving long-term outcomes. By adopting these strategies, Los Angeles County can move towards a more effective and compassionate continuum of care for individuals grappling with mental health and substance use disorders. I urge you to carefully consider these recommendations and take actionable steps to prioritize mental health initiatives in our community. Thank you for your attention to this critical matter. Sincerely, Monisha Parker
Other	Janine Roach	With the upcoming implementation of SB43 and the redefining of "grave
	Samio (Nasin	disability" to include an inability to care for one's self due to substance use disorders, we are now placed in a position to involuntarily detain people due to severe substance use. Unfortunately, Los Angeles County does not have a single substance use treatment facility that accepts involuntary patients. A number of voluntary substance use treatment facilities are unable to accept people with mental illness, despite the NIH estimate that 38% of people with substance use disorders also have mental illness. Our county is severely unequipped to care for its population with mental illness and substance use disorders, and when SB43 is implemented this will be amplified. We are in dire need of facilities that are accessible to all county residents which can provide evidence based treatments for substance use disorders and co-

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			occurring mental illness. Until then we will continue to see the painful outcomes of our failure to offer treatment to our county's most vulnerable: overdose deaths, a growing population of unhoused people, and an expanding mental health crisis. There is one sobering center in LA County. Emergency rooms and numerous other costly resources are currently being used for people who are dangerously intoxicated, and people who are brought to the emergency room for intoxication generally do not receive the substance use resources that would be available at a sobering center. It is essential we manage our resources appropriately. Educational campaigns about methamphetamines and opioids that are flooding our streets are essential to save lives.
	Item Total	2	
Grand Total		2	