

MOTION BY SUPERVISOR HILDA L. SOLIS

November 6, 2024

Piloting Department of Public Health Directly Operated Substance Use Disorder Services

For the first time in a decade, drug-related overdose and poisoning deaths plateaued in 2023. This is largely due to significant investments in substance use prevention, treatment, and harm reduction services which Los Angeles County (County) through the Department of Public Health (DPH) has increased by over 260%, 275%, and 500%, respectively. Despite these milestones, substance use disorders (SUDs) and overdose mortalities continue to be significant throughout the County, and disproportionately impact people experiencing homelessness (PEH) and people of color.

Black people are disproportionately represented in overdose and poisoning death rates and Latinos experience the highest numbers of fatalities. Certain geographic communities are also significantly impacted. For instance, Skid Row has the largest concentration of the nation’s PEH and it is the epicenter of the County’s substance use and mental health crises. Skid Row has the highest rate and number of overdose

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mortalities, followed by MacArthur Park.

In 2022, almost 60% of overdoses were attributed to fentanyl, a synthetic opioid that is 50 times more powerful than heroin and 100 times more potent than morphine. Importantly, fentanyl deaths in the County increased 1,280% between 2016 and 2021.

There are evidence-based strategies for reducing overdoses. These include medications for addiction treatment (MAT), which is effective for treating opioid use disorders and other substances, and is often coupled with counseling and behavioral health therapy. Medication for opioid use disorders reduces the negative effects of withdrawal symptoms and drug cravings. Medication is considered key in treating opioid use disorder as it prevents relapse when taken on an ongoing basis.

However, despite evidence of its effectiveness, not all SUD providers offer medication to treat opioid use disorders. Although the County Department of Public Health (DPH) has significantly expanded their contracted network of MAT providers, only an estimated 40% of network providers offer MAT. Noteworthy, no SUD services are provided by DPH employees, which limits the services offered exclusively to those offered by providers. While DPH has been engaging with network providers to expand MAT capacity within the specialty SUD system, this level of system expansion takes time. Given that other County-employed field teams offer MAT, including those of the Departments of Mental Health and Health Services, MAT provided by DPH employees offers an additional opportunity to fill important gaps in services currently offered by existing contracted and county providers. Additionally, having DPH directly-operated SUD services can help improve coordination and collaboration with other County departments, and increase County jobs - all of which would create significant benefits

for the County, residents, and most importantly, individuals experiencing SUDs

I, THEREFORE, MOVE that the Board of Supervisors direct the Department of Public Health (DPH), in collaboration with the Departments of Mental Health (DMH) and the Health Services (DHS) to:

1. Identify existing gaps in how substance use services are provided by County-operated and County-contracted field-based services, including in areas of disproportionate need and types of offered services;
2. Develop an action plan and timeline to pilot DPH-directly operated field-based substance use disorder (SUD) services within 12 months of passage of this motion, to expand the SUD capabilities of the County's current field-based multidisciplinary teams in ways that include, but are not limited to:
 - a. Hiring of recommended field-based team, and considerations of approach and relation to other preexisting field-based teams, staff roles and responsibilities, and relevant qualifications.
 - b. Workflows ensuring the provision of addiction medications (MAT) and other identified gaps.
 - c. Prioritization of field team services focused on County regions experiencing disproportionate substance use and overdoses, including communities like Skid Row and MacArthur Park.
 - d. Coordination of needed physical health, mental health, and SUD services.
 - e. Evaluation of the pilot and opportunities to enhance the County's approach to field-based services by expanding SUD capabilities, inclusive of MAT.

3. Continue increasing the number of DPH contracted providers that offer MAT and develop a plan to ensure that all clients who would benefit from MAT have access to it, including a target goal of the percentage of providers that should offer MAT; and
4. Report back in writing on the above directives in 90 days.

I, FURTHER, MOVE that the Board of Supervisors instruct the Department of Public Health and the Chief Executive Office to support the Department of Public Health to identify funding and acquire the correct classification(s) and quantity of positions needed for the implementation, management, and evaluation of this pilot of DPH directly operated field-based teams.

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