



**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:				
Agenda #	Relate To	Position	Name	Comments
10.		<b>Favor</b>	Brenda Villanueva	My name is Brenda Villanueva and I'm with Los Angeles LGBT Center. I would like to speak in support of Item #10. I want to thank Supervisor Hilda Solis for her motion to pilot directly operated substance use disorder services to increase access to field teams that provide substance use disorder treatment, and medications for addiction treatment (MAT) in particular, in areas of high need. I request the Board to support this important motion. Thank you.
			Herman Llamas	I've been in the field for 24 yrs, currently co-founded a non profit program addressing Substance Use Disorder in our communities, in 2023 CDC numbers indicate that 107, 543 died of opioid (fentanyl) overdose, in 2022 111,029 died of overdose. MAT services are desperately needed in the streets of Los Angeles. I would be more than happy to take a lead role in this project.
			Soma Snakeoil	My name is Soma Snakeoil, Executive Director of The Sidewalk Project. As a former opiate user who's life was saved by medically assisted treatment, and as a program that provides low barrier access to MAT, I and my organization are in strong support of Item #10. I want to thank Supervisor Hilda Solis for her motion to pilot directly substance use disorder services to increase access to field teams that provide substance use disorder treatment, and medications for addiction treatment (MAT) in particular, in areas of high need. I request the Board to support this important motion. Thank you.



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10.		<b>Oppose</b>	Dakota Kelly	<p>I am totally opposed to the use of taxpayer money in this field based SUD pilot program.</p> <p>Field-Based Services in Non-Clinic Settings Benefit Narrative states this pilot proposes nonclinic field based settings to address the County's SUD crisis. Bad choice.</p> <p>Medical necessity assessments will be conducted by Licensed Practitioner of Healing Arts instead of psychologists and clinical personnel certified in SUD. If the person pass the initial assessment, they will receive outpatient based services within 7 days in non-SUD clinic sites. One treatment modality listed – is Aaron Beck's Cognitive Behavior Therapy which is definitely NOT appropriate for this population.</p> <p>Substance Abuse Disorder is a serious mental health and community problem. This proposal for a pilot program is not taking into effect the seriousness and the pain the individual, family, and community face as the result of substance abuse and addiction.</p> <p>And it is growing worst as the result of the government pushing legalized cannabis among already vulnerable populations- like the Black and Latino males.</p> <p>Families are begging for more inpatient treatment centers. Consumers deserve effective and appropriate treatment by clinical – Psychologists and LCSW with a SUD certification to provide effective individualized treatment plans which are executed in a locked LPS designated inpatient treatment facility.</p> <p>Please reconsider using taxpayers money in appropriate and effective treatment proposal.</p>

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10.		<b>Oppose</b>	Trent Murphy	<p>On behalf of the California Association of Alcohol and Drug Program Executives (CAADPE), I am writing to express our concerns regarding the proposed pilot to operate Department of Public Health (DPH) field-based substance use disorder (SUD) services directly. While we support the County's commitment to addressing substance use disparities and enhancing SUD services, CAADPE believes that piloting DPH directly operated field-based teams may be costly, duplicative, and disruptive to the work already underway in partnership with community providers.</p> <p>Community-based organizations (CBOs) have a long-standing history of providing SUD services in close collaboration with local populations, especially in areas with disproportionately high substance use and overdose rates. These organizations are already integrated within communities such as Skid Row and MacArthur Park, with established trust, logistical frameworks, and proven methods for delivering culturally responsive care. Furthermore, many of these providers have recently expanded field-based services (FBS) to meet evolving needs in coordination with County mental health and health services, a model that has proven both effective and cost-efficient.</p> <p>This proposed direct provision of services by DPH may inadvertently disrupt these ongoing FBS expansion efforts, slowing down service delivery. Given that community-based providers have a unique proximity and adaptability to serve the targeted population, we encourage the Board to consider a strengthened partnership model that leverages these existing resources rather than establishing a new, County-operated structure.</p> <p>In addition to potential service duplication, this direct provision pilot may entail substantial financial and administrative costs, from hiring and training new staff to implementing separate evaluation systems and workflows. We believe the County can better achieve its objectives by investing in and supporting the existing FBS providers, particularly through funding allocations and technical assistance, ensuring that every individual needing SUD services, including MAT, has accessible and comprehensive care.</p> <p>CAADPE recommends that the Board consider directing DPH to enhance and expand collaboration with community providers already delivering field-based services. This approach will optimize resources, reduce redundancy, and most importantly, expedite service expansion to those most in need.</p> <p>Thank you for considering our perspective on this important matter.</p>
		<b>Item Total</b>	<b>5</b>	
<b>Grand Total</b>			<b>5</b>	