



FESIA A. DAVENPORT  
Chief Executive Officer

## County of Los Angeles Health and Mental Health Services

**DATE:** Wednesday, October 5, 2022  
**TIME:** 10:30 a.m.

**THIS MEETING WILL CONTINUE TO BE CONDUCTED VIRTUALLY TO ENSURE THE SAFETY OF MEMBERS OF THE PUBLIC AND EMPLOYEES AS PERMITTED UNDER STATE LAW.**

**TO PARTICIPATE IN THE MEETING, PLEASE CALL AS FOLLOWS:**

**DIAL-IN NUMBER: 1 (323) 776-6996**

**CONFERENCE ID: 322130288#**

**[MS Teams link](#) (Ctrl+Click to Follow Link)**

### **AGENDA**

Members of the Public may address the Health and Mental Health Services Meeting on any agenda item. Two (2) minutes are allowed for each item.

**THIS TELECONFERENCE WILL BE MUTED FOR ALL CALLERS. PLEASE DIAL \*6 TO UNMUTE YOUR PHONE WHEN IT IS YOUR TIME TO SPEAK.**

### **10:00 A.M. NOTICE OF CLOSED SESSION**

#### **CONFERENCE WITH LEGAL COUNSEL – ANTICIPATED LITIGATION**

(Subdivision (d) of Government Code Section 54956.9)

Department of Public Health

Department of Public Social Services

### **11:30 A.M. NOTICE OF CLOSED SESSION**

#### **CONFERENCE WITH LEGAL COUNSEL – ANTICIPATED LITIGATION**

(Subdivision (d) of Government Code Section 54956.9)

Department of Health Services

Probation Department

- I. Call to order
- II. **Discussion Item(s):**

**a. DMH/ATI/DPH: DMH/ATI Diversion Programs**

**III. Information Item(s)** (Any Information Item is subject to discussion and/or presentation at the request of two or more Board offices):

**a. DPH:** Approve the Temporary Reinstatement of a Retired County Employee as a 120-Day Temporary Employee for the Department of Public Health – Community Health Services (#06566)

**b. DPH:** Authorization to Accept and Implement a Forthcoming Agreement and Future Agreements and/or Amendments from the State of California Department of Transportation's Active Transportation Program to Support the Pedestrian Plans for Five High-Collision Disadvantaged Communities in LA County Project (#06480)

**IV. Items Continued from a Previous Meeting of the Board of Supervisors or from the Previous Agenda Review Meeting**

**a.** Discussion and consideration of necessary actions on issues related to the Harbor-UCLA Medical Center Replacement Program, and briefing by DPW, CEO and DHS, as needed, as requested at the Health and Mental Health Services Cluster meeting on May 18, 2022.

**V. Items not on the posted agenda for matters requiring immediate action because of an emergency situation, or where the need to take immediate action came to the attention of the Department subsequent to the posting of the agenda**

**VI. Public Comment**

**VII. Adjournment**

# BOARD LETTER/MEMO CLUSTER FACT SHEET

# DRAFT

☒ Board Letter

☐ Board Memo

☐ Other

<b>CLUSTER AGENDA REVIEW DATE</b>	10/5/2022	
<b>BOARD MEETING DATE</b>	10/18/2022	
<b>SUPERVISORIAL DISTRICT AFFECTED</b>	<input type="checkbox"/> All <input checked="" type="checkbox"/> 1 <sup>st</sup> <input checked="" type="checkbox"/> 2 <sup>nd</sup> <input type="checkbox"/> 3 <sup>rd</sup> <input type="checkbox"/> 4 <sup>th</sup> <input type="checkbox"/> 5 <sup>th</sup>	
<b>DEPARTMENT(S)</b>	Public Health	
<b>SUBJECT</b>	Provide authorization to accept and implement a forthcoming agreement and future agreements and/or amendments from the State of California Department of Transportation's Active Transportation Program to support the Department of Public Health's Pedestrian Plans for Five High-Collision Disadvantaged Communities in Unincorporated LA County project (Project)	
<b>PROGRAM</b>	Chronic Disease & Injury Prevention	
<b>AUTHORIZES DELEGATED AUTHORITY TO DEPT</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>SOLE SOURCE CONTRACT</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, please explain why:	
<b>DEADLINES/ TIME CONSTRAINTS</b>	Forthcoming award for a 36-month term to be effective upon execution of new service provider contracts for the Project,	
<b>COST &amp; FUNDING</b>	Total cost: \$1,968,250 (estimated amount)	Funding source: State of California Department of Transportation's (Caltrans) Active Transportation Program (ATP)
	TERMS (if applicable):	
	Explanation: Forthcoming Caltrans agreement will support Public Health personnel, operating, indirect costs, and service provider contracts.	
<b>PURPOSE OF REQUEST</b>	Acceptance and implementation of the forthcoming agreement will allow Public Health to support the Pedestrian Plans for Five High-Collision Disadvantaged Communities in Unincorporated Los Angeles County.	
<b>BACKGROUND (include internal/external issues that may exist including any related motions)</b>	<p>Since 2010, Public Health has been receiving funds from Caltrans for implementing various State transportation programs.</p> <p>On June 15, 2022, Public Health submitted an application in response to Caltrans' ATP Cycle 6 Call-for-Projects, requesting \$1,968,250 for the 36-month period.</p> <p>Public Health will conduct a solicitation process to select qualified organizations to implement the project.</p> <p>The Project will be implemented in the following five communities: 1) West Puente Valley/Valinda/South San Jose Hills; 2) Alondra Park; 4) Del Aire; 4) Rancho Dominguez, and, 5) West Carson. These communities were selected based on need and potential impact.</p>	
<b>EQUITY INDEX OR LENS WAS UTILIZED</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, please explain how:	

<b>SUPPORTS ONE OF THE NINE BOARD PRIORITIES</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please state which one(s) and explain how:  Board Priority #7: Sustainability – Forthcoming agreement will provide support the Project, which will increase active transportation, providing many societal benefits. This includes increasing physical activity; reducing chronic disease; improving mental health, social cohesion, and overall wellness; reducing fuel consumption, air pollution, and congestion; and attaining positive economic benefits via increased pedestrian activity.
<b>DEPARTMENTAL CONTACTS</b>	Name, Title, Phone # & Email: Joshua Bobrowsky, Public Health Director Government Affairs, (213) 288-7871 <a href="mailto:jbobrowsky@ph.lacounty.gov">jbobrowsky@ph.lacounty.gov</a> Jose Garcia, Senior Staff Analyst, (213) 351-7844, <a href="mailto:jsgarcia@ph.lacounty.gov">jsgarcia@ph.lacounty.gov</a> Emily Issa, Senior Deputy County Counsel, (213) 974-1827 <a href="mailto:Elssa@counsel.lacounty.gov">Elssa@counsel.lacounty.gov</a>



**BARBARA FERRER, Ph.D., M.P.H., M.Ed.**  
Director

**MUNTU DAVIS, M.D., M.P.H.**  
County Health Officer

**MEGAN McCLAIRES, M.S.P.H.**  
Chief Deputy Director

313 North Figueroa Street, Room 806  
Los Angeles, California 90012  
TEL (213) 288-8117 • FAX (213) 975-1273

[www.publichealth.lacounty.gov](http://www.publichealth.lacounty.gov)



**DRAFT**

**BOARD OF SUPERVISORS**

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Third District  
**Janice Hahn**  
Fourth District  
**Kathryn Barger**  
Fifth District

October 18, 2022

The Honorable Board of Supervisors  
County of Los Angeles  
383 Kenneth Hahn Hall of Administration  
500 West Temple Street  
Los Angeles, California 90012

Dear Supervisors:

**AUTHORIZATION TO ACCEPT AND IMPLEMENT A FORTHCOMING AGREEMENT  
AND FUTURE AGREEMENTS AND/OR AMENDMENTS FROM THE STATE OF  
CALIFORNIA DEPARTMENT OF TRANSPORTATION'S ACTIVE  
TRANSPORTATION PROGRAM TO SUPPORT THE PEDESTRIAN PLANS FOR  
FIVE HIGH-COLLISION DISADVANTAGED COMMUNITIES IN LA COUNTY  
PROJECT  
(SUPERVISORIAL DISTRICTS 1 AND 2) (3 VOTES)**

**SUBJECT**

Provide authorization to accept and implement a forthcoming agreement and future agreements and/or amendments from the State of California Department of Transportation's Active Transportation Program to support the Department of Public Health's Pedestrian Plans for Five High-Collision Disadvantaged Communities in Unincorporated LA County project.

**IT IS RECOMMENDED THAT THE BOARD:**

1. Delegate authority to the Director of the Department of Public Health (Public Health), or designee, to accept and implement a forthcoming agreement from the State of California Department of Transportation (Caltrans), to support the Pedestrian Plans

for Five High-Collision Disadvantaged Communities in Unincorporated LA County project (Project) funded by the State of California's Active Transportation Program (ATP), at an estimated amount of \$1,968,250, for a 36-month term to be effective upon execution of new service provider contracts for the Project, subject to review and approval by County Counsel, and notification to your Board and the Chief Executive Office (CEO).

2. Delegate authority to the Director of Public Health, or designee, to accept future agreements and/or amendments that are consistent with the requirements of the forthcoming agreement that extend the funding periods, at amounts to be determined by Caltrans; reflect revisions to the agreement's terms and conditions to include, but not be limited to, the rollover of unspent funds, redirection of funds, and/or increase or decrease in funding, subject to review and approval by County Counsel, and notification to your Board and the CEO.
3. Find that the proposed actions and the Project are exempt from the provisions of the California Environmental Quality Act (CEQA) as it involves feasibility or planning studies for possible future actions that are not approved or adopted by the Board and do not involve approval of a plan legally binding on future activities pursuant to Section 15262 of the CEQA Guidelines.

#### **PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION**

Since 2010, Public Health has received funds from Caltrans for implementing various State transportation programs. Most recently in 2019, your Board authorized Public Health to accept funding from Caltrans to support Public Health's Unincorporated LA County Pedestrian Plans and Program project. The funding supported service provider contracts to increase active transportation, which has many societal benefits including increasing physical activity; reducing chronic disease; improving mental health, social cohesion, and overall wellness; reducing fuel consumption, air pollution, and congestion; and attaining positive economic benefits via increased pedestrian activity.

Approval of Recommendation 1 will allow Public Health to accept a forthcoming agreement from Caltrans ATP to support the Project for a new cycle, which will focus on five high-collision disadvantaged communities in Los Angeles County (LAC).

The Project will incorporate a community-driven and culturally competent approach to pedestrian planning and program development with the following core components: 1) tailored, culturally-competent outreach; 2) community participatory planning via collaboration with key agencies, community leaders, and residents; and, 3) data collection and analysis. The Project will be implemented in the following unincorporated five communities: 1) West Puente Valley/Valinda/South San Jose Hills; 2) Alondra Park; 3) Del Aire; 4) Rancho Dominguez; and, 5) West Carson. To meet grant requirements and maximize the County's competitiveness for these funds, these communities were

selected based on need and potential for positive impact. Public Health expects to receive the forthcoming agreement from Caltrans no later than June 2023.

Approval of Recommendation 2 will allow Public Health to accept future agreements and/or amendments from Caltrans that extend the funding periods at amounts determined by Caltrans and reflect revisions to the agreement's terms and conditions to include but not limited to the rollover of unspent funds, redirection of funds; and/or increase or decrease in funding. This authority is being requested to enhance Public Health's efforts to expeditiously maximize grant revenue, consistent with Board Policy 4.070: Full Utilization of Grant Funds.

Approval of Recommendation 3 will permit Public Health to file a Notice of Exemption (NOE) with the Los Angeles County Registrar-Recorder/County Clerk and provide the NOE to the California Transportation Commission (CTC) as requested by Caltrans.

### **Implementation of Strategic Plan Goals**

The recommended actions support Strategy II.2, Support the Wellness of Our Communities, of the County's Strategic Plan.

### **FISCAL IMPACT/FINANCING**

Public Health will accept a forthcoming agreement from Caltrans, for the 36-month term effective upon execution of new service provider contracts for the Project, in the estimated amount of \$1,968,250. Funds will support Public Health personnel, operating, indirect costs, and the service provider contracts needed for the Project.

Funding will be included in Public Health's Recommended Budget for fiscal year (FY) 2024-25, and will be included in future FYs, as necessary.

There is no net County cost associated with these actions.

### **FACTS AND PROVISIONS/LEGAL REQUIREMENTS**

On September 26, 2013, Governor Brown signed legislation creating the ATP. The ATP consolidates existing federal and State transportation programs, including the Transportation Alternatives Program, Bicycle Transportation Account, and State Safe Routes to School program, into a single program with a focus on making California a national leader in active transportation.

In 2014, Public Health received an ATP grant from Caltrans to develop the Step-by-Step Los Angeles County: Pedestrian Plans for Unincorporated Communities (Step by Step) framework that addresses pedestrian policies, programs, and procedures for all unincorporated communities, and includes Community Pedestrian Plans that propose

safety improvements specific to four unincorporated communities of high need: Lake Los Angeles, Walnut Park, West Athen-Westmont, and West Whittier-Los Nietos.

On September 3, 2019, your Board adopted the Step-by-Step framework, amending the Los Angeles County General Plan to incorporate the framework and its Community Pedestrian Plans into the General Plan's Mobility Element. Step by Step is designed to accommodate future Community Pedestrian Plans for the remaining unincorporated areas as funds become available.

On March 16, 2022, Caltrans released Cycle 6 Call-for-Projects under the ATP which authorizes ATP grants to jurisdictions, health departments, school districts, transit agencies, and Metropolitan Planning Organizations for the development and implementation of active transportation plans, programs and infrastructure projects to decrease injuries to people walking and bicycling, encourage greater rates of walking and bicycling in California, and decrease other health impacts that result from people driving.

On June 15, 2022, Public Health submitted an application in response to Caltrans' ATP Cycle 6 Call-for-Projects, requesting \$1,968,250 for three years with an anticipated start date effective upon execution of new service provider contracts for the Project services.

The ATP Guidelines require that the County submit a Request for Allocation to the CTC for consideration no later than June 2023, including an environmental determination, and prior to commencing eligible work under the grant award. Should the CTC vote to approve the requested allocation, Public Health must execute new service provider contracts for the Project services within six months, or risk losing the entire award. Concurrent with the State allocation process, Public Health will, therefore, initiate a solicitation process in order to select qualified organizations to implement a community-driven approach to pedestrian planning and program development across five unincorporated communities in LAC. The awarded organizations will undertake efforts to identify infrastructure enhancements to improve connectivity in each community's pedestrian network, reduce the high number of pedestrian related collisions, and increase rates of walking by identifying and addressing significant barriers. Public Health will return to your Board thereafter for authorization to execute the resulting service provider contracts.

## **ENVIRONMENTAL DOCUMENTATION**

Pursuant to CEQA requirements, activities that are exempt from the definition in Section 15378(b)(4) and (5) of the State CEQA Guidelines do not constitute a project. The proposed actions are administrative activities of government, which will not result in direct or indirect physical changes to the environment and include the creation of government funding mechanisms or other government fiscal activities that do not involve any commitment to any specific project, which may result in a potentially significant physical impact on the environment.



**IMPACT ON CURRENT SERVICES (OR PROJECTS)**

Approval of the recommended actions will allow Public Health to develop plans to improve public health by promoting safe walking in five unincorporated communities within LAC.

Respectfully submitted,

Barbara Ferrer, Ph.D., M.P.H., M.Ed.  
Director

BF: mel  
BL#06480

c: Chief Executive Officer  
Acting County Counsel  
Executive Officer, Board of Supervisors

# BOARD LETTER/MEMO CLUSTER FACT SHEET

# DRAFT

☒ Board Letter

☐ Board Memo

☐ Other

<b>CLUSTER AGENDA REVIEW DATE</b>	10/5/2022	
<b>BOARD MEETING DATE</b>	10/18/2022	
<b>SUPERVISORIAL DISTRICT AFFECTED</b>	<input checked="" type="checkbox"/> All <input type="checkbox"/> 1 <sup>st</sup> <input type="checkbox"/> 2 <sup>nd</sup> <input type="checkbox"/> 3 <sup>rd</sup> <input type="checkbox"/> 4 <sup>th</sup> <input type="checkbox"/> 5 <sup>th</sup>	
<b>DEPARTMENT(S)</b>	Public Health	
<b>SUBJECT</b>	<b>APPROVE THE TEMPORARY REINSTATEMENT OF A RETIRED COUNTY EMPLOYEE AS A 120-DAY TEMPORARY EMPLOYEE FOR THE DEPARTMENT OF PUBLIC HEALTH – COMMUNITY HEALTH SERVICES</b>	
<b>PROGRAM</b>	Community Health Services (Clinic Services)	
<b>AUTHORIZES DELEGATED AUTHORITY TO DEPT</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>SOLE SOURCE CONTRACT</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, please explain why:	
<b>DEADLINES/ TIME CONSTRAINTS</b>	The public health clinics are in dire need of (experienced) physicians who can provide essential services to ensure the continuity of clinic operations and medically support the communities in L.A. County severely impacted by COVID-19.	
<b>COST &amp; FUNDING</b>	Total cost: \$74,617 (allowable max)	Funding source: Net County Cost
	TERMS (if applicable):	
	Explanation:	
<b>PURPOSE OF REQUEST</b>	Approve the request of the Director of the Department of Public Health, or designee, to allow Dr. Rachel Civen to be reinstated as a 120-day retiree, as a part-time Clinic Physician, M.D. (Item #5468J) effective upon Board approval, at a salary level commensurate with the assignment, for up to 960 total hours of work in a fiscal year.	
<b>BACKGROUND (include internal/external issues that may exist including any related motions)</b>	The timely return of Dr. Civen as a 120-day retiree will ensure the continuity of clinic operations within CHS public health clinics by providing TB and Communicable Disease/Triage clinic coverage, including working collaboratively with other physicians and members of the health care team supporting the COVID-19 and Monkeypox responses. Dr. Civen also has over 20 years of experience working with the County's most vulnerable residents, including as a physician in the TB clinics as part of her duties as Medical Director for Service Planning Areas (SPA) 1 and 2, which are services she would resume if reinstated.	
<b>EQUITY INDEX OR LENS WAS UTILIZED</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please explain how: Act urgently and boldly to achieve tangible results; Intervene early and emphasize long-term prevention.	
<b>SUPPORTS ONE OF THE NINE BOARD PRIORITIES</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please state which one(s) and explain how: Supports Board Priority #2: Health Integration/Alliance for Health Integration by streamlining access to health care services across the departments under a coordinated system that addresses health inequities in targeted populations to promote and sustain healthy living in Los Angeles County.	
<b>DEPARTMENTAL CONTACTS</b>	Name, Title, Phone # & Email: Joshua Bobrowsky, Director Government Affairs, Public Health (213) 288-7871 <a href="mailto:jbobrowsky@ph.lacounty.gov">jbobrowsky@ph.lacounty.gov</a> Lori Yasuda, Senior Staff Analyst, Health (213) 288-7890; <a href="mailto:lm Yasuda@ph.lacounty.gov">lm Yasuda@ph.lacounty.gov</a> Margaret Ambrose, Principal Deputy County Counsel, (213) 974-0941 <a href="mailto:mambrose@counsel.lacounty.gov">mambrose@counsel.lacounty.gov</a>	



DRAFT



**BARBARA FERRER, Ph.D., M.P.H., M.Ed.**  
Director

**MUNTU DAVIS, M.D., M.P.H.**  
County Health Officer

**MEGAN McCLAIRE, M.S.P.H.**  
Chief Deputy Director

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**BOARD OF SUPERVISORS**

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Fourth District

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Fifth District

October 18, 2022

The Honorable Board of Supervisors  
County of Los Angeles  
383 Kenneth Hahn Hall of Administration  
500 West Temple Street  
Los Angeles, California 90012

Dear Supervisors:

**APPROVE THE TEMPORARY REINSTATEMENT OF A RETIRED COUNTY  
EMPLOYEE AS A 120-DAY TEMPORARY EMPLOYEE FOR  
THE DEPARTMENT OF PUBLIC HEALTH – COMMUNITY HEALTH SERVICES  
(ALL SUPERVISORIAL DISTRICTS) (3 VOTES)**

**SUBJECT**

Request approval for the return of retiree Rachel Civen, M.D., as a 120-day retiree, to provide direct patient care in public health clinics, prior to the required 180 day wait period following the date of her retirement.

**IT IS RECOMMENDED THAT THE BOARD:**

1. Find that, as a result of Dr. Civen's retirement on May 13, 2022, it is critically necessary to address significant provider shortages and that she is uniquely qualified to assure the continuation of physician-provided patient care services in public health clinics.
2. Approve the request of the Director of the Department of Public Health (Public Health), or designee, to allow Dr. Civen to be reinstated as a 120-day retiree, as a part-time Clinic Physician, M.D. (Item #5468J) effective date of Board approval, at a salary level commensurate with the assignment, for up to 960 total hours of work in a fiscal year.

### **PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION**

Under the California Public Employees' Pension Reform Act of 2013 (PEPRA), a person who retires from the County may serve without reinstatement from retirement or loss or interruption of benefits provided by the retirement system before a period of 180 days following the date of retirement, as long as Public Health can certify that it is necessary to fill a critical position and the hiring is approved by the Board of Supervisors in a public meeting. Public Health has determined it is necessary to fill this critical position and the recommended action will satisfy these requirements under PEPRA.

Public Health Community Health Services (CHS) addresses health inequities in targeted populations to promote and sustain healthy living in Los Angeles County. CHS clinics oversee approximately 95,000 patient clinic visits per year and address numerous enteric and respiratory outbreaks and other communicable diseases.

In addition to the routine challenges that CHS is being faced with including a shortage of physicians (due to retirement, transfers, personnel/performance issues, and candidates' lack of specialties), Public Health must continue to effectively respond to and make efforts to mitigate the effects of the Novel Coronavirus (COVID-19) outbreak, as well as the new Monkeypox virus outbreak, and CHS physicians are essential to maintaining the health of our workforce and the community. In our efforts to contain transmission of COVID-19, Monkeypox, and other communicable diseases, additional physicians are needed to medically support the communities in Los Angeles County severely impacted by COVID-19.

The timely return of Dr. Civen as a 120-day retiree will ensure the continuity of clinic operations within CHS public health clinics by providing Tuberculosis (TB) and Communicable Disease/Triage clinic coverage, including working collaboratively with other physicians and members of the health care team supporting the COVID-19 and Monkeypox responses. Dr. Civen also has over 20 years of experience working with the County's most vulnerable residents, including as a physician in the TB clinics as part of her duties as Medical Director for Service Planning Areas (SPA) 1 and 2, which are services she would resume if reinstated. Dr. Civen has proven herself to be a strong asset to Public Health and the County of Los Angeles.

Dr. Civen was a full-time credentialed Chief Physician I who provided part-time TB clinical services in CHS' TB and Communicable Disease/Triage Clinics. She provided clinical assessments, medical care/diagnostic services, and team management for patients with communicable diseases in the health districts of SPAs 1 and 2, which included Glendale, Pacoima, North Hollywood, and Antelope Valley Health Centers. She also ensured that homeless patients completed a full course of preventive therapy for TB and provided disease management consultations to private medical doctors who treated patients with TB.

**Implementation of Strategic Plan Goals**

The recommended actions support Strategy III.3. Pursue Operational Effectiveness, Fiscal Responsibility and Accountability, of the County's Strategic Plan.

**FISCAL IMPACT/FINANCING**

The cost of the recommend actions will be absorbed within Public Health's existing budget.

**FACTS AND PROVISIONS/LEGAL REQUIREMENTS**

The recommended actions are in conformance with PEPRA.

**IMPACT ON CURRENT SERVICES (OR PROJECTS)**

Implementation of these recommendations will ensure that Public Health has the capability to continue to provide patient care services by qualified physicians.

Respectfully submitted,

Barbara Ferrer, Ph.D., M.P.H., M.Ed.  
Director

BF:db  
#06566

c: Chief Executive Officer  
Acting County Counsel  
Executive Officer, Board of Supervisors  
Department of Human Resources  
LACERA

LOS ANGELES COUNTY  
**ATI OFFICE**



Alternatives to Incarceration

*"Care First, Jails Last"*

## **ALTERNATIVES TO INCARCERATION OFFICE**

*Judge Songhai Armstead (Ret.) | Executive Director*

### **ATI Diversion Programs** Health and Mental Health Services Cluster Meeting

*October 5, 2022*



# ATI Office's Guiding Principle: *The Sequential Intercept Model*

ATI programs center around the ATI Sequential Intercept Model, which serves as the framework for LA County's re-imagining of the justice system & push to more community-based, upstream prevention

The **ATI Sequential Intercept Model** is foundational to the ATI Office's approach to policy development and implementation. The Intercept Model demonstrates how individuals with critical unmet needs, such as mental health & substance use disorders, housing & economic instability, or those simply in crisis, first come into contact with and subsequently move through the criminal justice system. We've determined there are phases that are critical for interventions to provide the best outcome for individuals and our communities as a whole. The Intercept Model doesn't just meet people at critical junctures, it *disrupts their downward trajectory*.

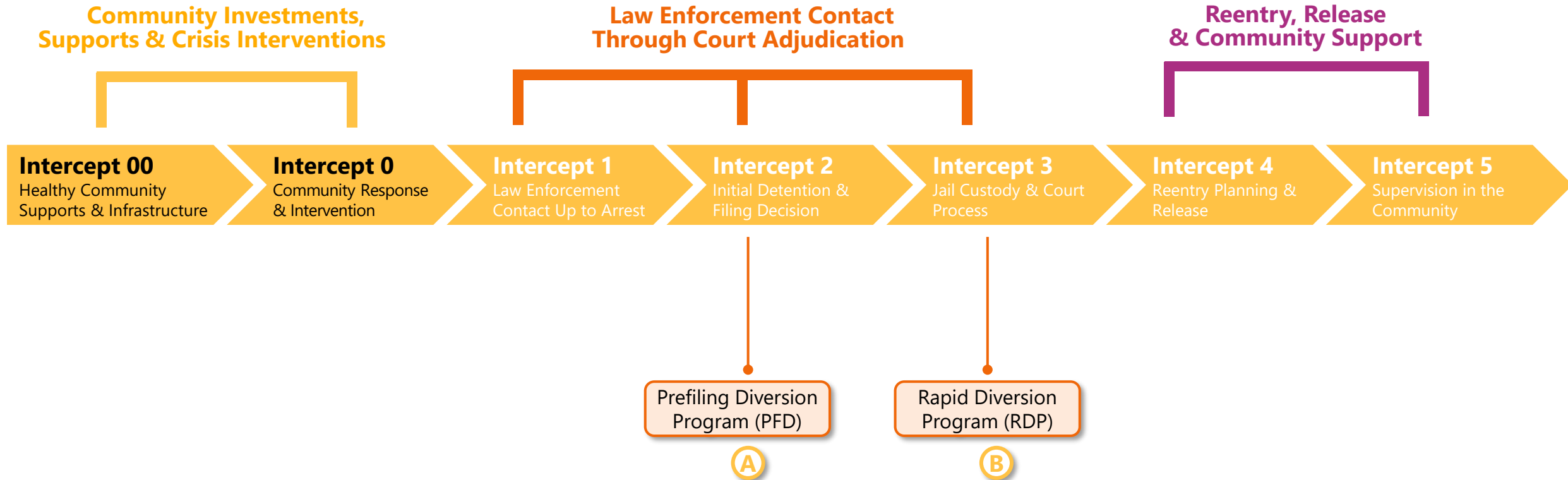
The Intercept Model is used to identify gaps in services and resources and is predicated on a process that brings together community advocates, service providers, municipal departments, and other stakeholders to prevent involvement with the criminal justice system.





# ATI Office's Guiding Principle: *The Sequential Intercept Model, cont.*

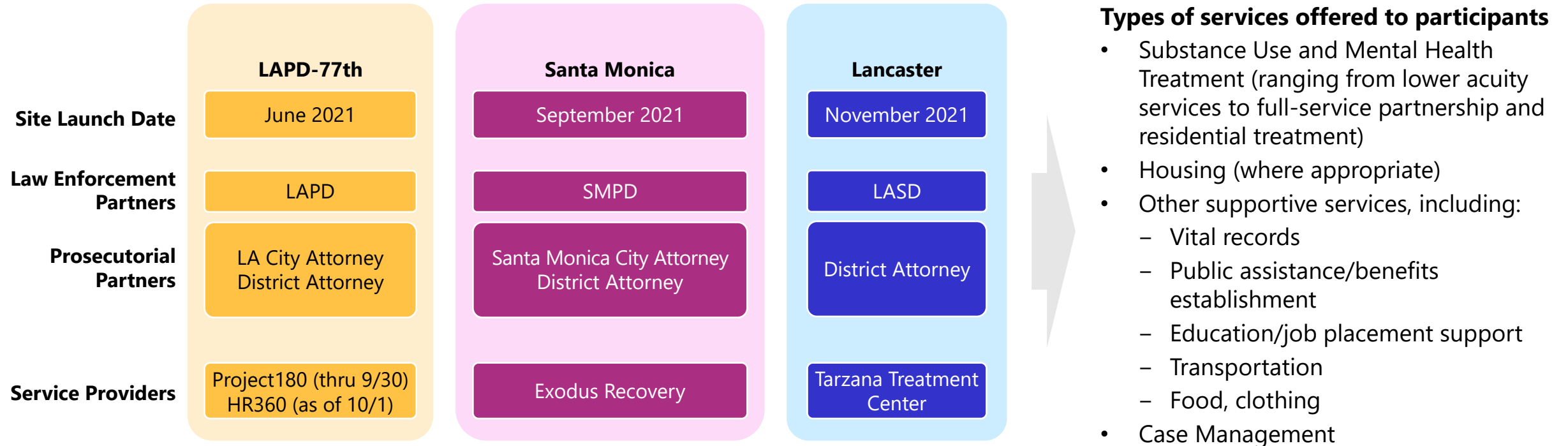
Prefiling Diversion (Intercept 2) and Rapid Diversion (Intercept 3) Divert Individuals Pre-Plea, as Early as Possible





# ATI Prefiling Diversion Program (PFD)

Early-stage diversion program piloting in three diverse jail stations and communities – providing an opportunity to test the model in different ecosystems within LA County and to mold the model to fit specific community needs



**189** individuals diverted to date and **44** have already graduated (after 3-6 mo. of treatment), with growing momentum in recent months due to emergency bail schedule being lifted in July 2022

## B Rapid Diversion Program (RDP) Overview

RDP is a unique pre-plea diversion program that addresses a major service gap and thrives on its partnerships

### Operates under Mental Health Diversion, PC 1001.36:

- Statute allows judges to “off ramp” individuals with MH and/or SUD disorders out of the criminal system and into treatment
  - Pre-plea
  - Graduates have their case dismissed (no criminal conviction) upon completion of 1-2 years of treatment to address their recidivism risks and health needs

### Serves the subset of clients who have no other suitable program:

- Qualifying misdemeanors and felonies
- Less-acute mental health diagnoses
- Sits alongside other County programs, serves individuals at earliest opportunity

### Unique program model:

- ATI-led **Collaborative Court Model**, driven by partnerships with:
  - Alternate Public Defender, Public Defender
  - Community-based service providers
  - Courts
  - Department of Mental Health
  - District Attorney, LA City Attorney
  - With guidance from Center for Court Innovation (funded by MacArthur Foundation)
- **Dedicated in-court teams** of clinician, resource navigator, and case managers

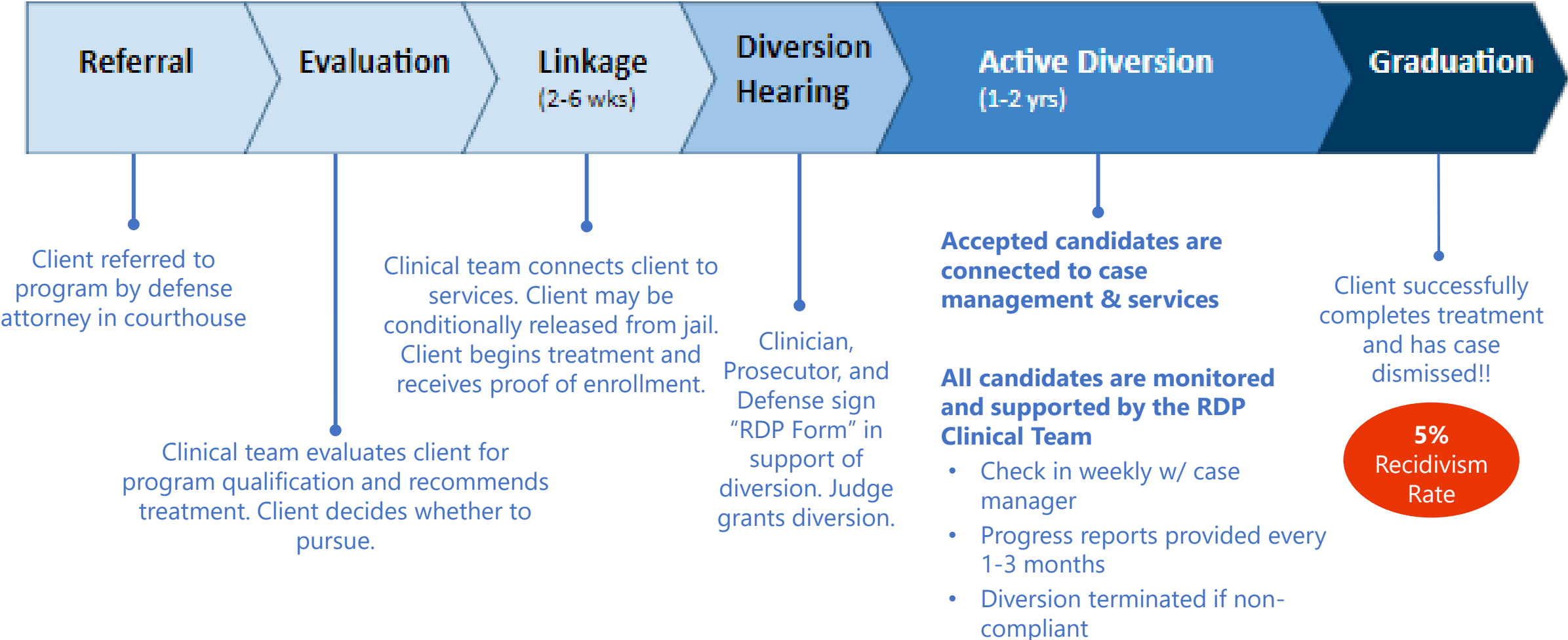
# RDP Goals

RDP efficiently provides underserved clients with a second chance, re-routing them out of justice involvement and into the pursuit of their life goals

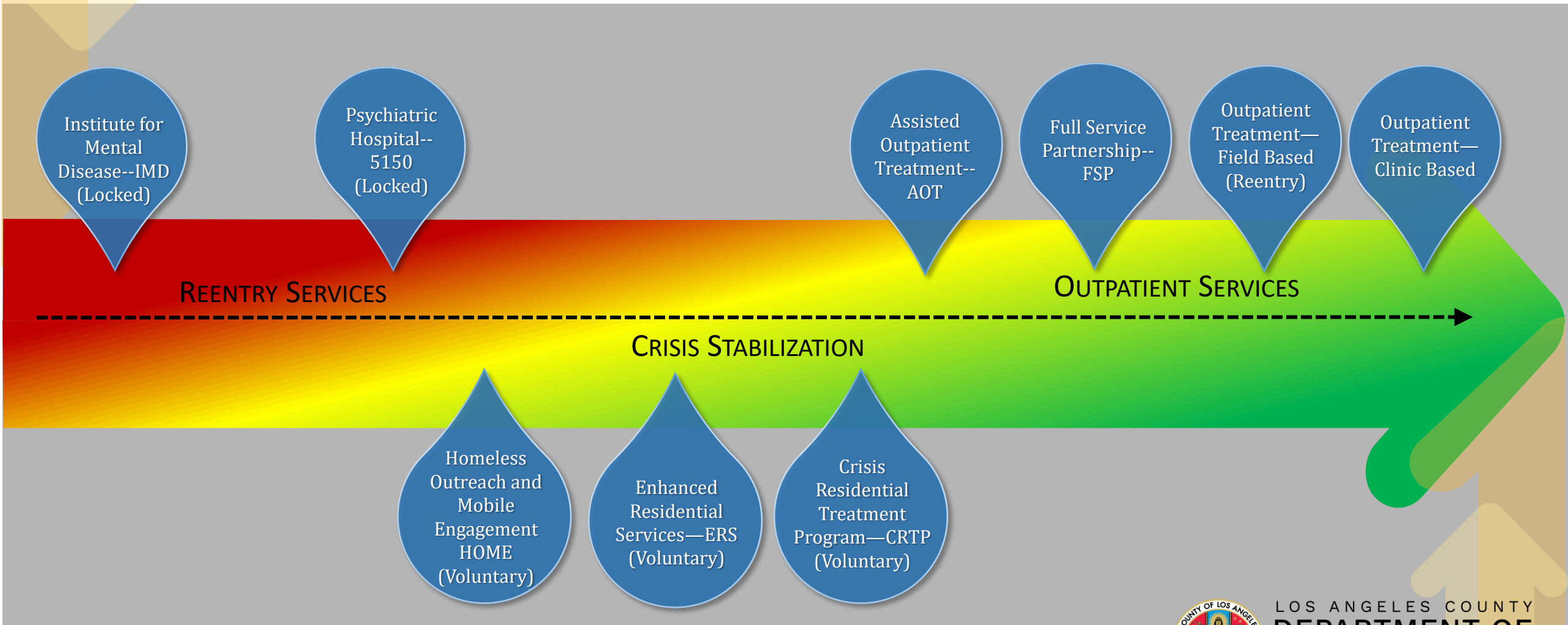
- 1 **Expedite diversion** through rapid screening/qualifications/ linkage to services on all eligible participants
- 2 **Avoid conditioning diversion and mental health (MH) services on criminal convictions** (all RDP diversions are “pre-plea,” *i.e., no conviction as a prerequisite to help*)
- 3 **Increase use of CA’s Mental Health Diversion statute** in LA County
- 4 **Address unmet need** by focusing diversion efforts on individuals who might not otherwise be diverted (clients with qualifying felony or misdemeanor charges)
- 5 **Eliminate silos** via multi-disciplinary RDP Clinical Teams and collaborative court process
- 6 **Improve outcomes & reduce recidivism rates** of RDP divertees through case management & linkage

# RDP Formula in a Snapshot: Collaborative, Multidisciplinary Approach

RDP provides a meaningful, efficient and holistic alternative to incarceration



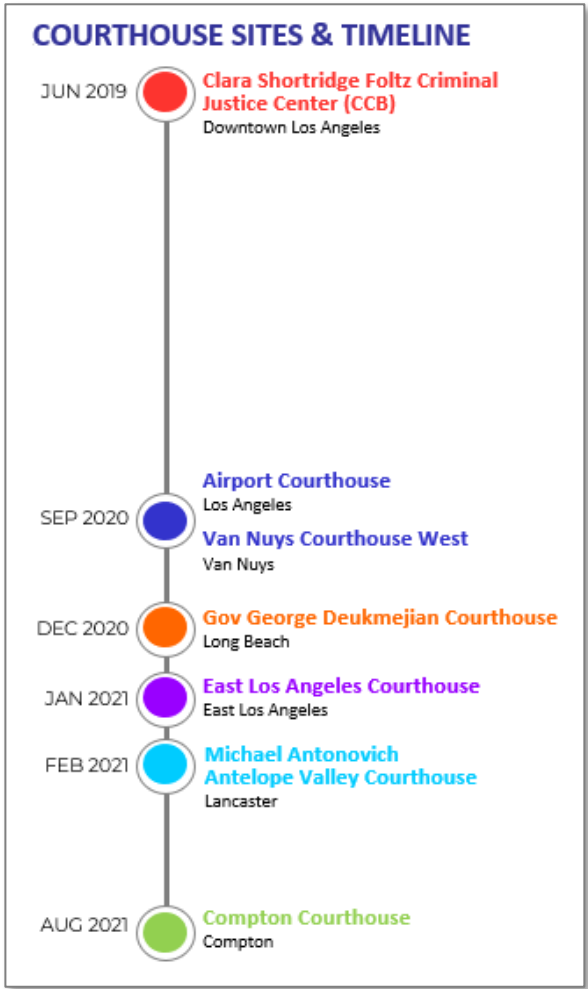
# DMH SPECIALTY MENTAL HEALTH SERVICES



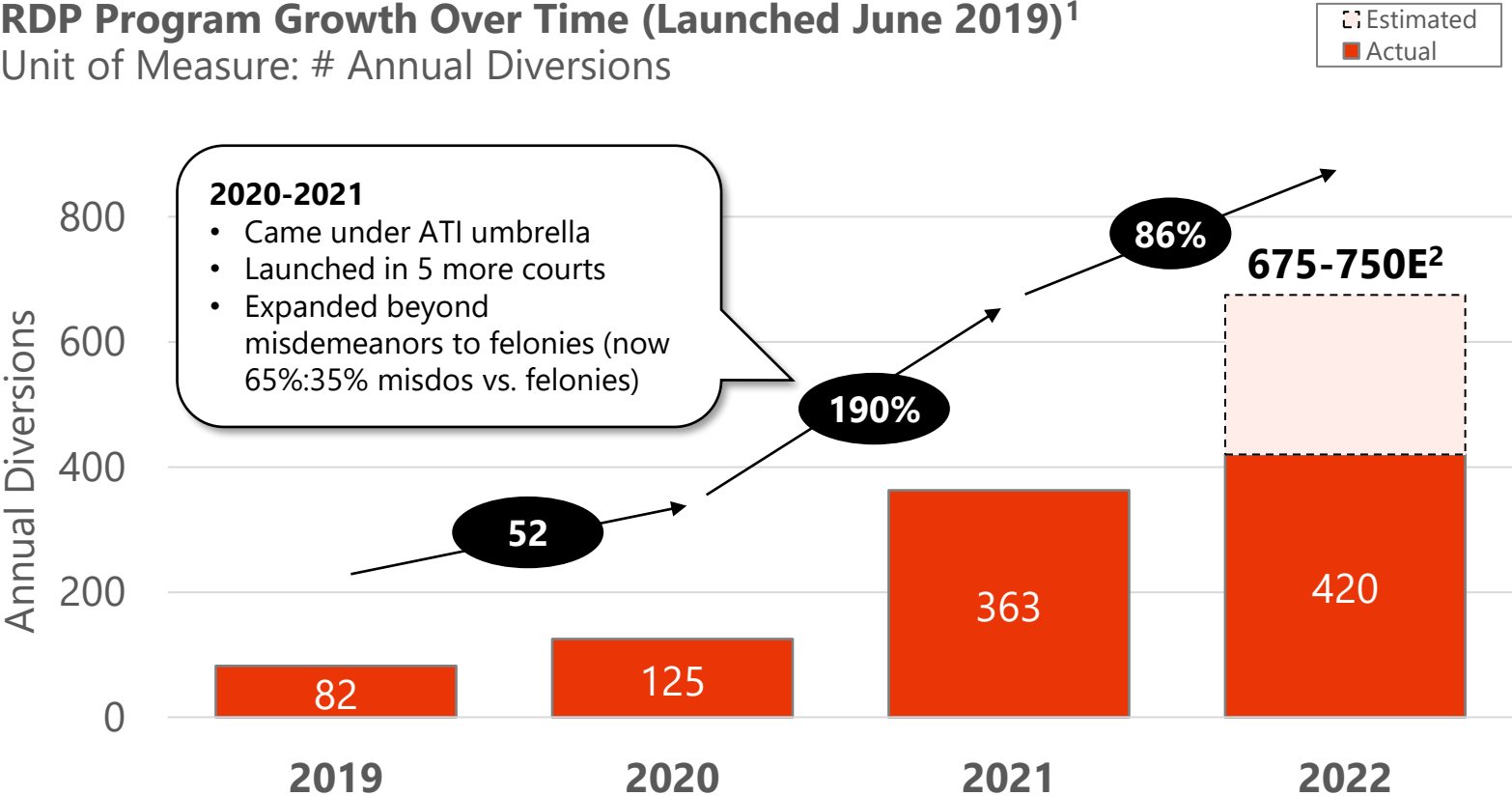
LOS ANGELES COUNTY  
**DEPARTMENT OF  
MENTAL HEALTH**  
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# RDP Growth and Expansion

Program launched in June 2019, with ATI taking over in September 2020 and expanding to 5 more sites – even after major growth spurt in 2020-2021, program is still growing and on track to see an 86% growth in diversions this year



**RDP Program Growth Over Time (Launched June 2019)<sup>1</sup>**  
Unit of Measure: # Annual Diversions



<sup>1</sup> PD diversions only  
<sup>2</sup> Total estimated at 2022 year-end, based on current run-rate  
Note: East LA is no longer an active site. At this time there are now 6 active sites: CCB, LAX, Van Nuys, Long Beach, Lancaster and Compton  
Source: Public Defender's Office, MacArthur Foundation Safety & Justice Challenge

# Rapid Diversion Program (RDP), cont'd

The program reached a major milestone in June, achieving 1,000 diversions granted – results shown below reflect cumulative program performance, from inception to date (June 2019-August 2022)

## Inception to Date (June 2019-August 2022)

Metric	Unit of Measure
<b>Step 1: Clinical team assessments</b>	<b>3,125</b> individuals
<b>Step 2: Diversion “granted”</b> <i>enrolled in services, with charges dismissed if treatment completed in:</i> <ul style="list-style-type: none"> <li>1 year (misdemeanor cases)</li> <li>2 years (felony cases)</li> </ul>	<b>1,108</b> individuals
<b>Step 3</b>	
<b>Step 3a: Active diversions</b> <i>individuals currently in compliance</i>	<b>525</b> individuals
<b>Step 3b: Terminated</b> <i>Individuals currently out of compliance</i>	<b>355</b> individuals
<b>Step 3c: Graduated</b> <i>completed treatment and charges dismissed by Judge</i>	<b>228</b> individuals

### 65% graduation rate

- Based on 350 individuals in step 2 (out of 1,108 total) who reached the minimum qualification period to be considered for graduation
  - 1 year for misdemeanors
  - 2 for felonies
- Besides 350 eligible individuals eligible for graduation, the remaining, even those that have been terminated or are out of compliance, have not been in diversion long enough to be considered eligible for graduation (i.e., misdemeanors must have been diverted Aug '21 or earlier to be eligible for graduation; program did not expand to felonies until Feb '21 therefore earliest possible felony graduation is Mar '23)

# Next Steps for PFD and RDP

PFD model will continue to be tested and refined; RDP will scale, grow, optimize and evaluate continued impact

## A PFD



- Continue to test model and working hypotheses
- Work with providers to optimize engagement, especially post emergency bail schedule rescindment
- Work with law enforcement and prosecutors to continue eligibility expansion
- Increase data analytics

## B RDP



- Expand to further sites
- Scale clinical reach and expand scope
- Further incorporate into larger system of care
- Formally evaluate program impacts
- Increase data analytics, especially re: equity