

# Meet Peter Espinoza

## Director, Office of Diversion & Re-Entry

By Michael Wilson

Retired Superior Court Judge Peter Espinoza spent 25 years on the bench; in his new role, he will focus on building the Office of Diversion & Re-Entry with the goal of reducing the population of mentally ill and co-occurring disorder inmates in the County Jail. Espinoza envisions DHS, law enforcement and the courts aligning goals to stem jail overcrowding, reduce recidivism and keep communities safer.



### How are you adjusting to the new role?

I've been here five or six weeks and I love it. The team has been very welcoming and very supportive. The culture here is very different. I was in the criminal justice system where the emphasis was on community safety. The goals here are different. One of my priorities is to figure out how to blend a restorative approach to the mentally ill with the community safety concerns of the criminal justice system. It's going to be challenging.

### Why this job now at this point in your career?

I've done everything I wanted to as a judge — family law, probate, civil, criminal, juvenile — and I was looking for something to do that could make a difference on a policy level where you have the ability to affect thousands of people. As a judge you hear just one case at a time. For 25 years I dealt directly with mentally ill defendants and felt ineffective to make orders in their cases that would lead to meaningful change. I heard about the position and made contact. I was interested, they seemed interested, and it happened.

### What does the Office of Diversion and Re-entry aim to accomplish?

In broad terms we want to reduce the mentally ill population in

the County Jails. The L.A. County Jail system operates the largest mental health facility in the state and has for years; roughly 4,000 inmates suffer from some sort of mental illness. It's not the best way to deal with the mentally ill or the best environment to provide treatment in. Many of these individuals are not inherently criminal but their mental illness causes them to act in a way that brings them into contact with the criminal justice system. There's also the co-occurring disorder population, which is the mentally ill treating themselves with street drugs.

### What happens currently when someone with mental health issues is arrested?

They are booked into the local jail and then moved to a county jail after the first court appearance. A decision is made as to whether they are so mentally ill that they can't participate in the criminal justice system, their mental illness is the root cause of their behavior, and whether treatment would be better than incarceration. If they are so mentally ill that they can't understand the court proceedings, they are

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## A Message From the Director



Mitch Katz, MD

Long before I moved to Los Angeles I heard that the LA Jail was the largest mental health facility in the United States. It struck me then, and now, as such a sad statement. Mental illness is a disease that needs to be treated as any disease, but the jail is a very difficult place to treat people with severe mental illness because of the inherent stresses and isolation of incarceration. The exceedingly high rate of incarceration after mentally ill patients serve their time, usually for the same crimes that got them into jail in the first place, is a testimony to the failure of our current system.

I believe we can do better. Often it is the mental illness itself that leads to the crime. I believe that if we provide mentally ill offenders with the appropriate treatment in the community they will be much less likely to commit the same crimes. Our community will be safer.

That is why I am so happy to welcome Judge Peter Espinoza to DHS and the Health Agency (see profile to the right). He understands the judicial system, and with his colleagues in the Office of Diversion and Re-entry as well as those in the District Attorney, Public Defender, and Sheriff's Office, we can make a major difference by providing treatment to those who need it and breaking the cycle of crime.

Another important building block in keeping people from recommitting crimes is helping them rebuild their lives. Housing is a critical component of this, and I am glad to see the Department of Public Health and the Department of Health Services collaborating on a Robert Wood Johnson funded project evaluating our Housing for Health programs (see below). Best wishes.

High Quality  
Patient Centered  
Cost-Effective Health Care

From Dr. Katz

FAST FACTS

## New Study to Evaluate Impact of Supportive Housing

By Michael Wilson

A \$250,000 grant from the Robert Wood Johnson Foundation (RWJF) will allow researchers from the Department of Public Health (DPH) to study the impact of DHS' Housing for Health (HFH) permanent supportive housing model on service utilization and health outcomes.

HFH works with housing providers to create affordable housing for chronically homeless individuals that is combined with rental subsidies and wrap-around intensive case management services. The aim is to reduce Emergency Room visits and system costs and improve health outcomes for clients who often battle multiple health conditions, mental health issues, and substance dependence. DHS has allocated \$60 million to fund subsidies and supportive services this fiscal year.

The L.A. County research effort is one of four studies being funded by RWJF through its Systems for Action program that aims to improve health in communities by better integrating delivery and financing of medical care, public health, mental health and social services.

"What we gain is an opportunity to look more deeply at our work and its impacts on behavioral and physical health," says DHS Office of Diversion and Re-entry housing director and study co-investigator Corrin Buchanan.

"Permanent supportive housing has ripple effects across other sectors, like criminal justice, that we will be better able to measure through this research."

Lead investigator Ricardo Basurto-Davila, Ph.D., Chief of the Policy Analysis Unit within the DPH Office of Health Assessment and Epidemiology, said HFH's innovative approach is a perfect match for the project's research goals because of the way it integrates the housing, health care and public health and social services sectors to address chronic homelessness. The research will investigate these complex cross-system effects and HFH



The Star Apartments complex on Skid Row.

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removed from the criminal justice system temporarily to restore competency; in cases of a misdemeanor, these individuals can only be held for six months to a year, after which point the case gets dismissed. Before this new Office was created, they would just linger there in county jail for up to a year. Some are so disabled they are not going to be restored to competency.

**Are you referring to the Misdemeanor Incompetent to Stand Trial (MIST) program?**

Yes. For those who are charged with a misdemeanor and are mentally incompetent to stand trial, we now remove them from jail and get them restorative treatment in community settings. There are currently 160 inmates and it is one of our most ambitious and exciting programs.

**What other programs are you working on?**

We are creating a pre-filing diversion program which involves use of intercept points. If a person is arrested and it's clear to law enforcement that the real problem is mental illness and not criminal behavior, we are building a system of places where law enforcement can make a pre-filing determination -- places where they can be taken and treated instead of incarcerated. Later this year we will open a 50-bed sobering center in Skid Row for people who are so intoxicated or such a nuisance that they will get hurt or hurt someone else. The goal is to intercept them and provide services rather than book them into jail. We will also have a system of urgent care centers where law enforcement can take individuals with mental health issues in lieu of jail.

**Why is this new approach happening now? Weren't these the same problems 10 years ago?**

There's a national conversation taking place now

about mass incarcerations in general and the incarceration of the drug dependent which is a national problem; in fact, people want the Centers for Disease Control (CDC) to declare a national health crisis. The thinking is that there must be a better, more humane way to do this. We have an enlightened Board of Supervisors right now that wants to take this project on and attempt to reduce this jail population. Health Services is the perfect place for this Office because we need a medical model that is divorced from a criminal justice model that hasn't produced the results it could have.

**What do you hope to accomplish in the next few years?**

I'd like to be able to point to thousands of individuals who have been diverted from intercept points into treatment facilities to not only deal with their current criminal problems but also with their recidivism, which is higher than average because of their inability to control behavior when they are not on medication. I hope that every year we see more people diverted out of the criminal justice system.

**Can you make a meaningful impact with this population through diversion?**

Absolutely you can. With the right system in place that includes a variety of initiatives including intercept points, supportive housing, intensive treatment and the right professionals advising the criminal justice system, there is no question we can make a difference.

**What keeps you busy in your personal life?**

I have four kids and a grandson. We do a lot of family stuff together. I enjoy cooking, traveling, reading.

## Health Officials Raise Alert on Meningitis Cases

Los Angeles County interim health officer Jeffrey Gunzenhauser, MD, joined L.A. County Health Agency director Mitchell Katz, MD, and representatives from the Los Angeles Gay & Lesbian Center, AIDS Healthcare Foundation (AHF), the Long Beach Department of Health,



and AIDS Project Los Angeles (APLA) this month to bring public awareness to an outbreak of Invasive Meningococcal Disease (IMD). Health officials are concerned by a disproportionate number of cases of IMD among gay and bisexual men in recent weeks. IMD is spread through sharing of saliva and can cause serious illness and death. HIV positive or gay and bisexual men are urged to consult with their provider and get vaccinated. Vaccine is available at all DHS outpatient facilities; vaccine is also available for persons who have no regular sources of care, and/or are uninsured, at clinics operated by the Department of Public Health and other community agencies and retail pharmacies. For more information on IMD prevention and free vaccine locations [click here](#).

## “ASK NICE” to Prevent Harm...

Timeout checklists are not limited to just the operating rooms. Whether patients are having their procedures in the operating room (OR), or at bedside, or in clinic, patient safety is of utmost importance. To that effort, we will “ASK NICE” prior to performing non-OR procedures that require a written informed consent.

The DHS Patient Safety Committee has developed a [standardized Non-OR procedural time out checklist](#) to help prevent wrong site, side, patient or procedural events performed outside of the operating room. The checklist includes the necessary (core) elements we are to assess prior to starting a procedure:

- A** - Announce time out. Allergy check.
- S** - Specimen (plan/collection/labeling) [if not applicable, skip this element]
- K** - “K”orrect PPS (patient, procedure, site/laterality)
- N** - Needed equipment/supplies
- I** - Informed consent completed
- C** - Coagulation status
- E** - Expiration date “call out” when supplies and medications are opened

If you have questions, email [patientsafety@dhs.lacounty.gov](mailto:patientsafety@dhs.lacounty.gov) or [mamendoza@dhs.lacounty.gov](mailto:mamendoza@dhs.lacounty.gov). (Please consult your facility Patient Safety Officer for implementation dates at your facility). [Click here](#) to watch a video illustrating the standardized checklist.

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impact on the physical and mental health of clients. Stakeholders including the Community Development Commission and the Los Angeles Homeless Services Authority will be apprised of the findings and recommendations of the study, which could have far-reaching policy implications.

“Health and social services are supported through a fragmented mix of agencies, community institutions and funding streams that contribute to the large differences in health outcomes and costs that we see across the US,” said Dr. Glen Mays, director of the Systems for Action National Coordinating Center. “These studies will help us learn how to restructure delivery and financing systems in ways that give everyone an equal chance to be healthy.”

The RWJF Systems for Action research program is based at the University of Kentucky and conducts rigorous scientific research on ways of aligning the delivery and financing systems that build a Culture of Health across America. For more information visit [www.systemsforaction.org](http://www.systemsforaction.org).



Study lead investigator Dr. Ricardo Basurto-Davila designed the research model to study the impact of the Housing for Health supportive housing model on other sectors, including healthcare and the criminal justice system.

## Jail Poster Sends Powerful Message

Inmates battling mental health issues housed in the Twin Towers facility recently took part in a poster design contest to communicate a suicide prevention message. Over 700 individuals housed in Twin Towers battle depression and mental health issues. Organizers received 20 submissions and took the entries on a “road tour” of housing units within the jail complex. The artists shared their designs in group settings to facilitate discussion on depression and personal struggles overcoming mental health challenges. The winning entry (right), created by a group of patients housed together in the same unit, features the Colorado Street Bridge in Pasadena, a local landmark long associated with suicides. The image features hands supporting a heart suspended atop the bridge and includes suicide warning signs. The image will be posted in housing and visitor areas in all County jails.



## Provider Messaging added to Patient Portal

The benefits of registering for the patient portal keep growing! In addition to viewing their medications, visit summaries, appointments and lab results from home or on the go, registered MyWellness patients can now ask non-emergent questions of their provider online. The secure messaging feature was added in June. Patients can also use the portal to request medication renewals and manage appointment scheduling requests. Encourage your patients to take a more active role in their health care and register for the MyWellness patient portal at their next appointment.