



LA COUNTY BEHAVIORAL HEALTH COMMISSION (BHC)
“Advocacy, Accountability, and Oversight in Action”
Victor Manalo, Chair, Presiding

Yes,

REGULAR MEETING MINUTES

MEETING DATE	March 12, 2026	
START TIME	11:00 AM	ADJOURNMENT TIME: 1:41 PM
LOCATION	510 South Vermont Ave., Terrace Level Conference Room, Los Angeles, CA 90020	
ATTACHMENTS	MEETING RECORDING LINK	AGENDA LINK

IN ATTENDANCE		ABSENT (E= Excused; U = Unexcused)	
COMMISSIONER NAME			
Kathleen Austria, Reba Stevens, Dr. Brian Banks, Dr. Erica Holmes, Victor Manalo, Lawrence Schallert, Brittney Weissman, Tyler Cash, Susan Friedman, Alex Tsobanoudis, Bennett Root Jr., Deena Duncan, Andrew Roble, Stacy Dagleish, and Yun Hee Anna Lee		Guadalupe Orozco (E)	
QUORUM PRESENT: Yes		APPROVAL: Yes. Minutes approved on 5/14/2026. Motion made by Commissioner Weissman. Seconded by Commissioner Tsobanoudis.	
ADJOURNED: 1:41 PM			

MEETING MINUTES

AGENDA / ACTION ITEMS	DISCUSSION/DECISION SUMMARIES	FOLLOW-UP ITEMS	UPDATE ON FOLLOW-UP ITEMS
4. Commissioners' Updates and Chair Report			
	Discussion: Commissioner Holmes reported meeting with the Department of Youth Development to discuss the		



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	status of transitional group homes and their relationship with the Department of Mental Health (DMH). • Commissioner Schallert reported attending meetings with SALT 2, the Substance Use Disorder Subcommittee, the Human Trafficking Committee, and a local group home provider. • Commissioner Roble provided an update on his health and reported on attending a SALT 7 meeting. He also met with a Whittier City Council member to discuss hosting a community participation meeting focused on local mental health needs. Additionally, he met with the Director of Correctional Health to explore ways to strengthen coordination between Correctional Health and DMH. He met with physicians at the Whittier Wellness Center to discuss services and community needs, and visited an ODR program, where he plans to schedule a walkthrough with the program director. His goal is to ensure individuals transitioning from correctional health services receive consistent support to prevent re-entry into the system. • Commissioner Austria reported speaking with Commissioner Lee regarding substance use issues. She also shared that she has been communicating		



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	with patients transferred from Hawkins Mental Health Center to LA General Hospital. She reiterated her interest in receiving a report from the Department of Health Services (DHS) regarding emergency services but was advised to direct the request through the DHS Commission. • Commissioner Friedman noted a program that provides services to individuals experiencing homelessness and expressed interest in inviting the organization to present to the Commission so that DMH may learn from and potentially replicate aspects of their approach. • Commissioner Weissman reported hosting leadership from Trieste, Italy, who provided trainings to community-based organizations and discussed strategies related to accessing and leveraging state funding. • Commissioner Stevens reported supporting churches and organizations in Service Planning Area (SPA) 6 that provide resources to individuals experiencing homelessness. She shared that she actively looks for opportunities to connect those individuals to mental health services. She also reported monitoring SHARP and advocating for the organization to receive adequate funding. Additionally, she shared a personal		



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	update regarding her son’s recent deployment to the U.S. Navy. • Commissioner Lee reported meeting with Commissioner Austria, attending the Skid Row Oral History Project event, and preparing a presentation titled “AI in Behavioral Health.” She also attended a personal event that allowed her to reflect on her recovery, attended “A Portrait of LA,” which reinforced the importance of culturally responsive care, and plans to attend the Multicultural Conference later this month. • Commissioner Tsobanoudis reported attending the SALT 3 meeting and working on incorporating an end-of-year award ceremony as suggested by Chair Manalo. He also shared that he continues his work in clinical settings and hopes to collaborate with Westley Hope Centers. • Chair Manalo reported meeting with Commissioner Tsobanoudis and attending the groundbreaking ceremony at Metropolitan State Hospital in Norwalk alongside Commissioner Banks. He also met with Supervisor Horvath and her Mental Health Deputy and offered to assist with filling two Commission vacancies from her district. Additionally, he met with Rob Lain, Director of the California Association of		



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	Alcohol and Drug Program Executives (CAADPE), and plans to introduce himself to the LGBTQ+ Commission. - Commissioner Dalgleish reported attending the California Behavioral Health Board and Commission (CALBHBC) meeting, noting that several committees are active and inviting Commissioners to participate. She also attended the SALT 5 meeting, where members asked her to explore how the County collaborates with cities. She asked fellow Commissioners to share any relevant information. - Jossie reported that the Board of Supervisors is currently considering a motion regarding the relationship between DMH and the newly established homelessness department.		
5. ACTION ITEM			
a. Approval of February 12, 2026, minutes	The minutes were approved. Motion made by Commissioner Dalgleish. Seconded by Commissioner Duncan.		
6. CONSENT AGENDA			
a. DMH Constituent Follow-Up Report b. BHC Budget Report c. BHC Topics of Interest	Discussion: Chair Manalo encouraged Commissioners to review reports prior to meetings and submit their questions to Kenia in advance so responses can be prepared.	Kenia to create a report based on Commissioner Steven’s request.	A questions and answers sheet will be generated after each regular meeting. It will be



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	- Commissioner Austria expressed concern about limiting discussion during meetings and emphasized the importance of maintaining opportunities for public conversation. - Commissioner Stevens requested that questions be submitted outside of meetings and their responses be documented and shared with the full Commission. Requests and Decisions: - The Committee agreed that questions submitted by Commissioners and the corresponding responses should be documented and shared with the full Commission. All items on the agenda were approved. Motion made by Commissioner Dalglish. Seconded by Commissioner Root.		emailed to the commission separate from the minutes and made part of the minutes document. See pages 14-16.
7. WRITTEN REPORTS AND UPDATES			
a. DMH and DPH-SAPC Director Reports	Discussion: - Chair Manalo again encouraged Commissioners to submit their questions to Kenia prior to meetings to allow staff time to prepare responses. - Dr. Tsai encouraged Commissioners to review the Director’s Reports, noting that they contain current information regarding individuals receiving substance use services and include updates related to BHSA and Proposition 1.	Kenia to contact DHS to ask about any reports they would be willing to share with the BHC.	The only reports we currently have access to are those made publicly available by the HHCD Commission and those available on the DHS website.



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	- Commissioner Duncan asked whether the Commission would receive a report from the Department of Health Services (DHS). - Kenia clarified that the Commission does not have oversight authority over DHS and therefore cannot require reports. However, DHS may be asked if they are willing to share reports that have been prepared for their own commission. - Commissioner Roble reported that he met with the Director of Correctional Health Services, who expressed willingness to provide a report to the Commission. Additional details are still pending. Requests and Decisions: - Kenia will continue to contact DHS to inquire about any reports they may be willing to share with the Commission.		
b. DMH and DPH-SAPC Legislative Reports	Discussion: - Commissioner Weissman requested that legislative reports addressing the same items from both departments be consolidated into a single document to reduce duplication and back-and-forth. - Crystal stated that the departments are currently working on a strategy to improve coordination for future legislative reports. Requests and Decisions:		



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	The Commission requested that departments explore consolidating legislative reports addressing the same topics into a single document where possible.		
c. Stakeholder Group (e.g., SALTs, UsCCs) Reports	Discussion: - Chair Manalo asked about the outdated forms from the stakeholders. - Kenia stated that they have been updated and shared with the stakeholders. - Chair Manalo also asked what happens with the requests from stakeholders when they pertain to the department instead of the BHC. - Dr. Horn stated she is still working with the SALTs with ongoing training on what to add to the reports.		
8. STAFF PRESENTATIONS			
9. MHSA Update: Mid-Year Adjustment FY 2025-26	For additional discussion questions, see the Commissioner’s Questions and Responses Report on pages Discussion: - Commissioner Stevens asked that the report be separated by SPAs. Requests and Decisions: - Commissioner Stevens requested that Southern California rehabilitation programs are investigated.		



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10. BHSA Update: Integrated Plan (IP)	For additional discussion questions, see the Commissioner’s Questions and Responses Report on pages Discussion: • Commissioner Stevens stated that receiving only 15 public comments is low given the size of the County’s population. • Commissioner Austria complimented the department for hosting well-attended CPT meetings. • Commissioner Lee suggested that BHSA staff explore ways to include substance use clinicians in order to encourage them to remain in the field. She also suggested that Promotoras de Salud be cross trained on substance use disorder (SUD) topics to help reduce stigma, or that an SUD peer accompany Promotoras when engaging with the community. • Commissioner Lee also commented on the level of funding directed toward Full-Service Partnerships (FSPs), noting that these programs experience high burnout rates due to limited staffing. She encouraged BHSA staff to consider ways to support FSP staff. • Commissioner Schallert asked for clarification on when his submitted questions would be addressed.	• BHSA staff to provide data on the average number of public comments over the past five years and identify gaps in community outreach.	• Kenia will follow up with BHSA Admin for these data.



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	• Dr. Horn confirmed that she had received his questions and stated they would be answered during the Public Hearing. • Commissioner Schallert expressed concern regarding the increase in housing-related funding, stating he would like clarification on who is responsible for tracking the distribution of those funds and ensuring they are not misused. • Commissioner Dagleish commented that the use of an external auditor may be a more efficient approach when audits are conducted. Requests and Decisions: • Commissioner Austria requested information on the average number of public comments received over the past five years and asked that staff identify areas or communities that may not yet be adequately reached through outreach efforts. • Commissioner Weissman requested that the Public Hearing presentation focus primarily on Sections 2, 6, and 7. • Commissioner Weissman also requested that Jacob present the fiscal plan during the financial portion of the presentation.		
9. BHC Discussion			



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a. Prioritizing Goals/Issues to Advise DMH/DPH-SAPC/BOS - Chair Suggested goals/issues to prioritize - Transition to BHSA - Loss of Prevention Funding - Homelessness and Housing - Integration of a care system	Discussion: Chair Manalo stated that perhaps after the public hearing they might have a clearer picture on how to move forward with a more informed plan and so it will remain as an item on the agenda.		
b. Executive Committee Officer Elections FY 2026-27 March: Nominations Committee Interest Survey	Discussion: - Chair Manalo announced that the Executive Committee will begin the process of officer elections for the next fiscal year. - The interest survey to serve on the nominations committee will be sent and if any commissioners are interested, they must submit the survey. - The announcement for the chosen commissioners to be part of the Nominations Committee will be given on April 9th.		
11. PUBLIC COMMENT			



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<i>Stakeholder Group Reports</i>	Stakeholder groups in attendance: • SALT 2 • SALT 4 • SALT 7 • SALT 8 • Latino UsCC • AI/AN UsCC Stakeholder reports: • <u>SALT 2</u> Reported some confusion between the written and oral Stakeholder report. Additionally, they pointed out which facilities are in need of funding in their service area. • <u>SALT 4</u> Reported on a past event they hosted and asked if a BHSA opening ceremony could be hosted to inform the public of the changes. • <u>SALT 7</u> Reported on recent events and future events they will host and promoted their Instagram page. • <u>SALT 8</u> Reported on the information they have received from BHSA and the importance of calling it a Peer Resource Family Center and reported on their future events.		



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	• <u>Latino UsCC</u> Reported on the recent cancellations of their meetings and ways in which the BHC can offer support and what the current focus is for their program. • <u>AI/AN UsCC</u> Reported on events they attended and asked the BHC to continue to offer opportunities for workforce development. They also mentioned their plans for their future meetings. • <u>LGBTQIA2S</u> Reported on the needs of their community.		
<i>General Comments</i>	Jim “the Hat”, Mark Karmatz, Ricardo Kim, Vaughn Simmons, James Gibson, Carrie Greir, and one anonymous person addressed the Commission by phone, in-person, and with emailed communication. See pages 17-30 for the Public Comment document.		



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Commissioner’s Questions and Responses

Behavioral Health Commission Regular Meeting 3/12/2026

Topic: MHSA Update: <u>Mid-Year Adjustment FY 2025-26</u>			
Question	Commissioner Name	Respondent	Answer
When we talk about treatment facilities and these dollars we set aside, are they earmarked for specific projects or just set aside to indicate funding availability?	Commissioner Stevens	Kalene Gilbert	To indicate funding availability.
Can you remind the Commission of their role regarding MHSA?	Commissioner Weissman	Kalene Gilbert	“Actually, there is not an official role. I think we come here because we post, and this is just a platform for us to make sure we are getting the word out and people have an opportunity for feedback.”
Can you outline the total unspent MHSA funds?	Commissioner Weissman	Kalene Gilbert	Kalene stated she would need to follow up with a breakdown of larger unspent funds, noting that most are allocated to BHSS outpatient services.
There is almost a billion unspent dollars. Can you include a chart of where that money is being allocated?	Commissioner Weissman	Kalene Gilbert	“And this is not a plan for those unspent funds; these are adjustments to this year’s budget... 85% will go to BHSS and specifically it is going to support outpatient services. Then 15% of it is going to full-service partnership expansion.”
How will the sunseting of PEI funds affect programs like the wellness centers?	Commissioner Austra	Kalene Gilbert	Kalene noted that some prevention programs will need to sunset, and they are working to complete ongoing projects.
Can staff be shared so programs continue to run?	Commissioner Austria	Kalene Gilbert	Kalene indicated that this is not something she can answer on the spot, but she will follow up.



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Topic: BHSA Update: <u>Integrated Plan (IP)</u>			
Question	Commissioner Name	Respondent	Answer
How is the information being communicated with the community?	Commissioner Stevens	Dr. Horn and Rimmi Hundal	Dr. Horn explained that the written comment period is the final stage of community feedback. Over 438 unduplicated individuals are surveyed after every meeting using multiple data collection methods. Rimmi added that low comment volume suggests most participants found the plan clear.
What outreach strategies are being used?	Commissioner Friedman	Dr. Horn and Katherine Li	Dr. Horn shared multiple initiatives, including targeted outreach to underrepresented demographics and the “Beyond the Walls” program, which holds informational events on weekends. Katherine noted that recruitment is challenging because the program is new, so they rely on contracted agencies. Additional initiatives are dedicated to involving individuals with SUD experience in policy decisions.
Is there a way to make the plan more concise or offer an audio version, and leave QR codes in offices to encourage comments?	Commissioners Dalglish, Weissman, and Duncan		Answer pending.



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What is the plan for the presentation and public hearing so the Commission can provide support?	Commissioner Weissman		Answer pending.
How is the auditing process structured to ensure funds are used efficiently and prevent fraud?	Commissioner Schallert		Answer pending.
On page 83, Table 10, Letter A, the growth/early intervention percentage is only 1%. Can you explain this?	Commissioner Weissman		Answer pending.
On page 102, housing intervention may overlap with other resources. Can a graphic show how all funds support objectives/outcomes?	Commissioner Weissman		Answer pending.
Where can unmet needs be found in the booklet?	Commissioner Stevens	Dr. Horn and Katherine Li	They are listed under the Statewide Behavioral Health Goals (pages 17–18) and Local Planning Process & Local Health Jurisdiction (page 69).
How does this plan set the stage for the next three years for growth, innovation, and integration?	Chair Manalo		Answer pending.
What challenges or barriers currently prevent a smooth process?	Chair Manalo		Answer pending.



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Commissioners by Supervisorial District

District	1 st	2 nd	3 rd	4 th	5 th	
Supervisor	Hilda L. Solis	Holly J. Mitchell	Lindsey P. Horvath	Janice Hahn	Kathryn Barger	Members at Large
Commissioners	Susan Friedman	Kathleen Austria	Stacy Dalgleish	Victor Manalo	Lawrence Schallert	Alex Tsobanoudis
	Bennett W. Root, Jr.	Reba Stevens	Vacant	Deena Duncan	Brittney Weissman	Guadalupe Orozco
	Vacant	Erica Holmes	Vacant	Andrew Roble	Yun Hee Ann lee	Brian Banks

L.A. County Board of Supervisors Member: Supervisor Kathryn Barger

Agenda #	Name	Method used to address the Commission (e.g., By phone, in-person, or email)	Type of Public Comment (e.g., General or Stakeholder Report)	Comments
The following individuals addressed the Commission either in person or by phone during this meeting. PLEASE NOTE: The text below has been retrieved from the non-verbatim transcript produced by our live captioning service. For the emailed communication, we have copied the text from the email received and pasted it on to this document.				
Public Comment	Anonymous	Teams Chat/Online	General	1. Commissioner Weissman requested a breakdown of how the ~\$900 unspent funds would be spent - I wanted to confirm that this will be an action item for the next meeting. 2. 1% of prevention on page 83 - Can there be a rationale of how it was deemed the 1% was appropriate, and what mitigations are in place for how this low number may impact the community, both for individuals and/or organizations who currently do this work
Public Comment	Maria Elena Arauco	In person	Stakeholder Report/Latino UsCC	Hi, I name is MARIA -- we continue to move forward with has provided by to bring home to mental health awareness to our Latino community. Please identify any challenges you experience and opportunity for improvement this past couple of months we have multiple cancellations safety concerns specific to our community we put effort into this meeting to reinforce



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				speakers with efforts to our community we hope that they need for canceling meetings can be met in the future. How can DHS provide support to benefit the effort to our community we would appreciate ongoing support and funding opportunities to continue to the capacity or SALT capacity with topics of interest in your groups next meeting future meetings will be provided information regarding immigration issues and mental health. As well as presentations about health topics such as information in regard to capacity and employees. Finally, what else do you want BHC to know? There needs to be more information and knowledge and advocacy for his ago challenges and disabilities but also disabilities that come from on telehealth challenges. Thanks.
Public Comment	Yvonne Sandoval	In person	Stakeholder Report/SALT 7	Hello, everybody pretty I'm Yvonne Sandoval. I am from salt seven. I get to do this on stuff. I get to let you know what is going on in the events that anyone can participate in. So, thank you everybody for your interest, commissioners, you don't get a dime for doing all of this work. So, greatly appreciate that but, of course, my time is running. So, first things. We at salt seven have an Instagram page. We are at 938 followers on our Instagram. Once we hit 1000, we will be able to live stream and that is at LACDMHSA7 Those that are online, I hope you have a pen and paper. I will be announcing something else after this. We are planning, also, our fourth annual men's health awareness and family fun day. On June 13. 2026 S. gate Park starts at 10 o'clock. The next thing 32 episodes of coffee with the site healing will go up on YouTube



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				this week which will feature our senior deputy director have to say this right Dan Perkins., We're planning May is mental health awareness month, take action. This will take waste the first one is May 5 then, we have launched our community compass and you interactive way sharing resources with our community and I don't know if you can see it but it is LACDMH the March edition will be on there soon. It is online, you can find it. Now, I also have another message this is from Erica. Erica is in charge of the interface I went to last years, I cannot wait to go again. It is just amazing. We will be at do I have the right one? Okay. It will be at a temple a Hindi temple Wednesday, April 15 and it will be at the actual name of the temple is Hindu Temple SANATAN and DHKRMA this is on Pioneer Boulevard 153 Pioneer Blvd. In the city of Norwalk. 90650. These are all the great stuff that are happening. I get to do the pleasure of announcing all this good stuff I know has been a tiring morning. This is a lot of information and all of you are just doing such great work. So, my time is up, I was able to complete that. One more thing. A project that I started, they have a calendar, they have things going on all of the time. When I got there the other day to do my thing with my group I realized that they have, for anyone interested, they have computer information stuff. Older people that don't know how to do certain things, at 2 PM on Friday afternoon, if you can partake in the project, bingo, I am done. Thank you.
Public Comment	Barbara Wilson	In person	Stakeholder Report/SALT2	Feels good to be back. It has been a while. So, I am Barbara Wilson. Service area two. I am not clear on role o of the old



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				report “ is written report are we supposed to read what we've already written, or what? We gotta get going. We are supposed to read them. You can give us any information in addition to what you have provided in the written form. Or you can read what is written. I do want to call the commission's attention since you were talking about dinero. In my report I mentioned that we continue to not have any licensed adult facilities in the Santa Clarita Valley. Which is a part of surface area two. We also have no gender specific licensed ARF will serve our people I say low income people that have serious mental this with or without substance abuse. There is that. Service area two, we have lost 50% of all the licensed that are a IF from 2012 to 2024. We did not have a huge number to begin with but now we have even less then 50% of that. We are one of the largest land areas in the entire county. We have a lot of people. Multiple ethnicities. In many of our ethnicities have very strong feelings about housing their female love ones. In a facility where they are also men. I want to put out a plea for housing licensed residential facilities identified by our service area as a priority back in 2010 I think it was the hearing in 2026 and now we have less than we had then. And we have more people. I would like the commission to do whatever it takes to transfer some of the money that goes directly housing into recognizing people living in licensed residential facility five, 10, 20 years that is also permanent housing.



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				Do whatever it takes to get some of that money transfers that we can house people is not locked, it saves public taxpayer money, so, so.
Public Comment	Ricardo Pulido	In person	Stakeholder Report/SALT8	Hi, good afternoon hairperson to all of our commissioners-- taking care of business from the heart I am Ricardo Pulido I am the cochair. We are working on something very big and vital that I want to remind the commissioners about. The first thing is the clubhouse. It's going to be DHSA Dr. Lee and Kathleen have given us excellent information about the CPT meetings. We have been well-versed and we pretty much have a lot of good information this one sticks out to us as something that is going to happen every solid clubhouse we've been talking about this for years. The key is, we make sure that it is called PR as CP resource family center. We are some of the strongest and biggest and best and we need our peers to have a place to hang out I was downstairs listening before I came up here there are some good meditations for those of you I'm going to leave this with you so you can get it to the other commissioners. If you have not heard about it or seen it, I would like to leave this information with you. Make sure that we we have it here presented because-- this is mom not only Mother's Day-- that have been forgotten mothers that have anxiety and stuff happening to them this video I would like to share this with the commission. I'm sure we can make the tomorrow at 1159 we've all talked about it but public comment is ending for the DHSA plan. Put your public comments and, I promise, put our comments in here



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				so we have more than 15, maybe 50 so, Dr. Lee and salt eight has been doing a wonderful job I want to give a shout out because with them and our commission reports that you see here, they have highlighted everything we have done mental health centers, it is a new clinic that they had remodeled this is the state-of-the-art. I would suggest if you can get out there, please do. We need those types of clinics LADMH. Everything is right there we have social workers people that go to the one stop shop clinic where they can feel really good being able to talk to their doctors. That, to me, is number one. Shout out to Kathleen and Mary Salas I hope she's listening I told her I would give a shout out. The workforce training, we have a model here at NAMI peers specialist program. I think that is a great model we have filled up all of our slots, told a lie. I believe this would help our peers, we need jobs for our peers. In recovery, my daughter, my son, many years now they need something to do, go to college, take a class, do something that they can handle, gardening, whatever holistic approach get them a little job, he would be surprised when people are able to start working and get on their feet and get back on track. I like to end with that I really appreciate today's dialogue I will come to your meetings all the time the last thing I will put up there 10 year anniversary Stacy knows when talking about taco night April 13 come down and help out because and stamp out stigma and bring up the awareness and great times with a great dinner. Thank you very much, God bless you all, thank you for all you do.
Public	Pastor Joshua Nah	In person	Stakeholder Report/SALT	Good afternoon, it is good to say everybody this-- so, one thing



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Comment			4	that was not included in the report because we just had an event last Tuesday I wanted to report on that first. On March 10 at our church we had the beyond the wall event. We shared SAPSE information there but one thing that was shocking is that people attending that meeting, many of them showed up and they did not know how to access services provided by DMH. I understand DEI modernization of the call center has been completed I was wondering if we could have a business card size about that call center information, that would be very helpful. If the commissioners can provide that out there in the community the community can access language services and resources. So, I discovered a diagram the diagram shows press one for crisis and number two for emotional support, that has now been changed to SUD, right? When I actually called that number you press one for crisis mental health services and press number three for emotional support. As the next step. I was thinking that it would be great to create DMH diagram in a business card size so that people can select numbers for each of the languages and they can be aware of what kind of services are out there. As we know, DHSA is starting in July but in June in preparation for the start we can have a conference in June? It would be sort of like a DHSA opening ceremony where staff and providers and families can get together to share information about services. It would be an opportunity for not only staff members providers, families and



LA COUNTY BEHAVIORAL HEALTH COMMISSION (BHC)
“Advocacy, Accountability, and Oversight in Action”
Victor Manalo, Chair, Presiding

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				consumers and families to come together to know about the upcoming changes it is an opportunity for them to have hopes for the future in a couple of years. As you know, the co chair elections command engine and it would be great to have a meeting to get together and get to know each other, that is my input.
Public Comment	Ricardo Kim	In person	General	Every time I come up, I get nervous, I don't know why. Good afternoon, Chairman, I am Ricardo Kim I'm in LA County stakeholder I would like to discuss agenda 8B. Circle back to I am really interested in the dialogue that you guys had half hour ago or so. It starts with, Commissioner Wiseman the overall picture followed by Commissioner Lee who made a great point in the sud side there is a need for clinicians funding in these charts, I'm also looking at the adjustment and all these numbers I want to see what is happening, how much money is being devoted to reaching out to clinicians and psychiatrists and social workers licensed conditions for SUD to get them employed? On the other side, and the mental health side, we need more peers. S3D they have a great base. Great commissions, mental health side we have clinicians we don't have a lot of peers. This goes back to the past few years if we look at the images and developed better for April 9 being devoted to our mental health community health workers and peers. What kind of trainings are being done with MHSA workforce education, training, funds, funds projected to preserve this money in an interest-bearing account for 10 years. And what is being done in the mental health side to get more peers employed and have more peers able to access career ladders and emotional opportunities, thank you very much.



LA COUNTY BEHAVIORAL HEALTH COMMISSION (BHC)
“Advocacy, Accountability, and Oversight in Action”
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Public Comment	Mark Karmatz	In person	General	My name is Mark Karmatz. I am part of the peer support network. My comment is very much the same we need peers in the programs and peers running the programs. We need to have that in their and their therapies recently developed called the emotional or relying on others one that was talked about last night at a meeting the national organization for mental health recovery and that had to do with one of the concerns that they have is not enough people of color when they are calling not enough people of color coming into the meetings, we need that. I think we should reach out to people of color like those who are black and Jewish, those who are Asian, whatever. Need to bring that into the community and bring them into the consumer movement as well. That is my thought is that there might be a lack of representation we do a great job but there needs to be more. I also have a couple of announced to make the conference on the 17th and 18th 900 Wilshire Blvd. at the inter-continental Los Angeles convention center. I have about three more coalition meeting the national coalition that took place yesterday there's going to be another one on 8 April again, they want peers to be there. We are doing this in reaction to the drop in peers services March 20 worth national empowerment 11 AM to 1230. We need to have people will on those calls, the revitalization is called ECPR we need to be need to know the consumers at those meetings so that they can do-- they can have some tools that they can use in order to recover, thank you.
Public	Jim “The Hat”	In person	General	Good morning, commissioners, honest and trustworthy true



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Comment				information because the things I just said in 2018 someone was shoving all the money in the pocket 2020 all of a sudden all of these homeless apartments go up to benefit from that, it is still going on. I'm glad you brought that up. With AI, yes, it cuts down we start to integrate them with what we are doing the more people we get house easy and faster we are able to catch up for three days, for sure, you have somebody housed as soon as they get SSI it takes, what, two months I just heard for someone to get house. So, ideally we are all dealing with distress. From the ice breaking up families to the war breaking up families. Where can we find a source of relief from this distress? Commissioner Ariva mentioned, wearing the community can we find a source of relief from this distress? The ones you are starting to be able to learn, as myself, mental health originated in the Scriptures in the first place. Taking people on a nature walk relieving trauma, losing their children, that's what he did, he went on a nature walk, God was his social worker, Jonah, God was his social worker he went to one end of the earth he came back again he wanted to die. He was in place darkness in the belly, the deep depression then when I learned all these things, well, this weekend, it is an article, at this Kingdom Hall you can successfully fight the fulfillment this is a five minute series a few months, two months since all of the ice activity the epidemic and also, the war. This is affecting families. This is not just a matter of resources mental health, commissioners, add to the resources for people to get paid, besides programs, get beyond the walls, that is where a lot of things are happening behind the walls, in the homes.



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				99 councils, the LA department, 5 million congregations that you can attend to get skilled, trained, and help a level beyond college. JW.4G. Free, available to all 410 languages thank you very much.
Public Comment	Vaughn	In person	General	Good afternoon, happy women's history month. My name is Vaughn, I want to make a comment on the integrated plan. I have had a chance to go through it thoroughly. One of the things that I noticed, I am really disappointed that there is no mention of early intervention programs starting on page 79 a lot of the programs highlighted are EUAPs balanced and holistic approach it speaks more to lived experiences some of the differences cultural responsiveness as well. It feels like there is no mission community voices are not being heard. Cdeps offered the opportunity for health equity culturally relevant interventions especially for historically underserved and marginalized groups I was curious, why are those CDEPS not included especially in regards to mental health.
Public Comment	James Gibson	In person	General	I am James Gibson I'm the executive director and national provider for evidence based intensive outpatient programs focused on mental health and well-being PHP and IOP provide more than individual counseling but allows them to remain at home and out of the hospital recently we open our first location here in California in West LA in SALT5 want to ensure that all of our neighbors have high quality healthcare and I firmly believe that everyone deserves access to world class behavioral health services regardless of the background or economic status. That's where partner with Medicaid plans and other markets to ensure that our care is available to all who need it, when they need it. We would like to bring the same quality of care to Los



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				Angeles County. I understand that adding additional services networks requires a formal formal procurement. Our goal today is to introduce ourselves to you and our services in respect we ask the county consider opening due process to give guideline the opportunity to serve you. As we all know, people experience acute mental health crises they face long waits in emergency departments or limited access to step down care these gaps increase hospitalization utilization and rising costs and worse outcomes, that's where we come in IOP and PHP trauma, mood disorders, co-occurring behavioral health needs. PHPNIOP residential care, or a visit to the ER. To best serve our clients we refer patients we refer partners and communities that critical care is available when people need is the most people in crisis should not have to wait for weeks to begin care. That's why we offer clinical evaluations within 24 hour program starts or next business day we see shorten inpatient stays and ensuring stabilization. Evidence-based programs that incorporates D letter the T letter other guidelines with outcome measures. We come to be a partner within Los Angeles county for services and the adult population.
Public Comment	Dr. Jessica Mosher	Teams/Online	Stakeholder Report/AIAN UsCC	I hope you are well and happy I am Dr. Jessica Moser. I'm here to provide the report for the American native USC see where I am the cochair. As far as group successes this past weekend it is called the Los Angeles American Indian health centers andihss to open under this new contract with LA County. We would like to ask that you-- continue to offer culturally grounded workforce development another has been a lot of changes around policy to



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				offer workplace development I would like to continue to provide that also, for our next meeting will be highlighting the AI AM workforce developer for Los Angeles and Orange counties. As far as we like you to know, we're trying to get ahead of some issues along transitional rent I've heard from other counties that having trouble getting history with their tribe this County behavioral health system to recognize and to be eligible and we know in our community and history with us it should be enough to get services through the county. Just trying to get ahead of being seen for other counties. Also, it was brought up several times your work with I would like to highlight that on the DHS website there are program gap filling plans is part of the component here in California they had to fill out each one of these to see what gaps there are and what service areas they would like to address. They are also required to have have a tribal liaison. I would encourage the county to reach out to that liaison and inquire about the services of and meet the needs of the tribal community. I have a second report I'm going to read not part of my group. It is for the LGBTQIAS group those of us in the LGBTQIAST -- long-term housing options for safety and have homes
Public Comment	Carrie Greir	By phone	General	Good afternoon. My name is Carrie Greer I sent an email I was interested in applying for one of the vacancies as I reside in I can hear you, go ahead Yes, I sent an email to the commission. Yes, I did.



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				Yes, sent to the executive officer of the county. Send an email there and then especially interest and they will make sure that it gets to supervisor Horvath. If you live in her district. Executive office of Los Angeles County. There is a link for you to complete a form. If you visit the Board of Supervisors website, you will see Commissioner services, there is a place for you to complete a form of interest to serve in any commission, you will see a list of commissions.