

REVISED MOTION BY SUPERVISORS LINDSEY P. HORVATH

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Better Reaching the 95%

Substance use disorders (SUD) impact a significant portion of our communities. In Los Angeles County, over 16% of individuals aged 12 and above are estimated to have had an SUD over the past year¹. Addiction also results in tremendous human and societal costs in terms of lost lives, relationships, jobs, and rising health care expenses. It is critical to prevent substance use upstream, and to better identify and provide treatment downstream once substance use results in a diagnosable substance use disorder. Fatal overdoses, one of the most tragic outcomes of SUDs, have soared over the past five years and have become the leading cause of death among people experiencing homelessness (PEH) in the County. Further, Black populations are the racial group with the highest rate of accidental drug overdose deaths in Los Angeles

¹ Alcohol and Other Drug Surveillance Dashboard; Los Angeles County Department of Public Health, Bureau of Substance Abuse Prevention and Control: <https://lacountydphsapc.inzastories.com/>

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County, highlighting that the consequences of addiction impact communities differently and directly fuel inequities.

Data across the United States consistently shows that between 5% and 10% of people with SUDs access needed treatment, and of those that do not access care, 95% of these individuals do not feel that they need it². While growing the availability of the treatment capacity (supply) is a need and challenge, the type of supports and treatment being offered must be addressed to meaningfully increase the proportion of people receiving those services. It is essential to ensure that health systems better engage this 95% and are designed not just for those seeking services, but also for people who need services but aren't seeking them out.

In recognition that addressing this 95% requires multi-pronged efforts to target the variety of reasons that contribute to people with SUDs not being interested in care, the Department of Public Health's Bureau of Substance Abuse Prevention and Control (SAPC) launched the "Reaching the 95% (R95)" Initiative in the Summer of 2023. The two key focus areas of the R95 Initiative are: 1) enhancing outreach and engagement, including through the expansion of field-based services; and 2) lowering barriers to treatment through interventions such as broadening admissions criteria, narrowing discharge criteria, being intentional about creating a welcoming and inviting environment through a customer service lens, and establishing closer bidirectional referral relationships between harm reduction agencies that serve many of the 95% and SUD treatment agencies. Expanding access to medications for addiction treatment and

² 2021 National Survey on Drug Use and Health: <https://www.samhsa.gov/data/release/2021-national-survey-drug-use-and-health-nsduh-releases>

harm reduction services are other strategies under the R95 Initiative to broaden the appeal and availability of services that better meet the varied needs of people with SUDs at various stages of readiness for treatment. While focusing on the specialty SUD system through the R95 initiative will be helpful, the reality is that most people, including youth, with SUDs are not already engaged with the SUD system. As such, better reaching the 95% will require new and different ways to broadly identify and appeal to all those struggling with addiction who are in other systems or disconnected from health or social service systems altogether. Additional collaborative efforts are needed urgently to minimize the toll of substance use disorders and save lives across the County.

WE I, THEREFORE, MOVE THAT THE BOARD OF SUPERVISORS:

1. Direct the Chief Executive Office and the Department of Public Health (DPH) to collaborate with leadership from the Departments of ~~Public Health (DPH)~~, Mental Health (DMH), Health Services (DHS), Public Social Services (DPSS), Children and Family Services (DCFS), Office of Child Protection (OCP), Justice, Care and Opportunities Department (JCOD)/Department of Youth Development (DYD), Probation, the Homeless Initiative (HI), and other County Departments focused on health, social determinants of health, and public safety to develop plans, in consultation with relevant community stakeholders, on how those Departments can implement strategies to better engage individuals, including young people, impacted by substance use and ensure familiarity with accessing needed SUD resources.

2. Direct the County Departments referenced above to provide education to County staff and pertinent contracted providers, including but not limited to homeless outreach providers and case managers, on how to access beds in real-time using DPH developed tools/resources, such as the Service and Bed Availability Tool (SBAT), the mobile-friendly www.RecoverLA.org platform, and the Substance Abuse Service Helpline (SASH). This should include technical assistance, training, and additional support for contracted homeless service providers to address the unique needs and challenges of people experiencing homelessness in accessing SUD services.
3. Direct the Department of Public Health to partner with DHS, DMH, LAHSA, HI and other outreach providers to ensure the existing network of outreach teams and interim and permanent housing providers are directly connected to all available specialty SUD resources. SAPC should continue to enhance capacity to provide immediate bed access for people with SUD who express openness to treatment.
4. Direct the Department of Public Health to enter into new agreements and work orders, and amend or extend existing agreements/work orders for professional and other services via expedited contracting processes, including sole sources and change notices, approved as to form by County Counsel, that support the mission and aims of SAPC's R95 Initiative.
5. Direct the Department of Public Health to provide a verbal report to the

Board on February 2024, and a written report to the Board in 120 days and then biannually thereafter with a plan to engage individuals with substance use disorders who are not currently accessing needed services and needed resources to accomplish this aim. Considerations in this plan should include, but are not limited to:

- a. Description of existing SUD services and R95 Initiative services offered by DPH, and the delivery of an outreach and education campaign to ensure the public is aware of available SUD services and how they can be accessed, in culturally and linguistically appropriate ways.
- b. Working with the Chief Executive Office and others necessary to support SAPC's R95 Initiative, including but not limited to the expansion of services provided outside of traditional settings inclusive of field-based services, outreach and engagement, ensuring sufficient resources to continue to expand on harm reduction services that target the 95% referenced above, all with the broader aim of elevating the visibility of and access to SUD services. This should include efforts to address the unique challenges for people experiencing homelessness in accessing SUD services.
- c. Engaging local managed care plans (MCP) around the expansion of Screening, Brief Intervention, and Referral to Treatment (SBIRT)

to include screening for all drugs as opposed to primarily being focused on alcohol, as well as other strategies the MCPs can be implementing to better reach people who need SUD services but aren't accessing them.

- d. Engaging the Los Angeles County Office of Education, secondary school systems and local colleges and universities on their strategies to prioritize positive youth development programs that increase access to substance use education, early intervention, naloxone, and other substance use and overdose prevention resources, all with the broader aim of ensuring that these preventative strategies minimize the adverse consequences of addiction for youth and young adults.

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