



DEPARTMENT OF MENTAL HEALTH
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December 7, 2020

TO: Supervisor Hilda L. Solis, Chair
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FROM: Jonathan E. Sherin, M.D., Ph.D.
Director, DMH

Judge Songhai Armstead (Ret.) *S. Armstead*
Executive Director, CEO-ATI

SUBJECT: REPORT RESPONSE ON THE PROGRESS OF THE LOS ANGELES COUNTY ALTERNATIVE CRISIS RESPONSE (ITEM 18, AGENDA OF SEPTEMBER 29, 2020)

On September 29, 2020, your Board approved the motion "Los Angeles County Alternative Crisis Response," directing the Department of Mental Health (DMH), in coordination with the Chief Executive Office's Alternatives to Incarceration (CEO-ATI) Initiative, to move forward with the recommended "Next Steps" in the August 8, 2020, report, "LA County Alternative Crisis Response: Preliminary Report and Recommendations," and provide the Board with a progress report in sixty (60) days as specified in the Directives below.

- 1) Identify and implement changes that can begin immediately to improve the current system while addressing current barriers that exist and developing remedies to resolve those issues including, but not limited to, creating a direct line to DMH ACCESS for law enforcement;
- 2) Develop the three, alternative crisis system core components and associated subcommittees referenced in *LA County Alternative Crisis Response* report dated August 14, 2020. These subcommittees will seek input from all relevant stakeholders;

- 3) Map the current, in development, and potential assets within each supervisory jurisdiction in Los Angeles, prioritizing those to whom response is most impacted by behavioral health crisis and issues relating to social determinants as well as incarceration; and
- 4) Secure a consultant who, in coordination with DMH and its Alternative Crisis Response (ACR) steering committee, will help:
 - a. Analyze LA County's (LAC) existing crisis system and gaps in more detail;
 - b. Develop focused recommendations and an implementation plan to improve the existing system and identify "early wins." These "early wins" need to address the current barriers that exist and provide remedies to resolve those issues;
 - c. Design a new, scalable system structure, including a completed return on investment analysis and approval of the ACR Steering Committee and other impacted County departments, in which the County can allocate the needed resources in a way that will maximize a return on investment;
 - d. Develop a long-term implementation plan for the new system design and work with County, state and federal leaders to develop a sustainable funding plan for it before it is implemented; and
 - e. Establish performance metrics by which the system can measure and hold itself accountable for high quality outcomes.

The following is a brief progress report on the above mentioned Directives.

DMH and CEO-ATI: ACR-related accomplishments to date:

- Established an inventory for tracking 25+ proposed and in-progress ACR-related projects.
- Developed a CEO-ATI diversion programs inventory which includes several ACR-related programs in preparation for ATI program funding discussions.
- Established a direct line for law enforcement to step down calls/cases to the DMH Help Line (formerly the ACCESS Center) for triage to non-law enforcement crisis response.
- Established ACR subcommittees and charters (kick off meetings to follow shortly) focused on, respectively: (1) our regional crisis call center network; (2) crisis mobile team response services; and (3) crisis receiving and stabilization facilities.

- Went live with the Mental Health Resource Locator and Navigator (MHRLN) application for tracking DMH mental health treatment bed availability (including crisis beds) across the system.
- Went live with InterQual for support with utilization management and making level of care decisions for the DMH treatment bed network (including crisis beds).
- Began a Therapeutic Transportation pilot with LA City Fire (LAFD) to increase non-law enforcement crisis mobile response and transportation capacity.
- Developed and socialized an Request for Information (RFI) for a consultant to support ACR work.
- Numerous key ACR-related conversations thus far including with the Department of Public Health Office of Violence Prevention (OVP), CEO-Chief Information Office, California Office of Emergency Services (CalOES), Didi Hirsch Suicide Prevention Center (SPC), South Bay Regional Public Communications Authority (commonly known as RCC), LAC Emergency Medical Services (EMS) Commission Ad Hoc Workgroup on Mental Health / Substance Abuse Emergencies, as well as several key internal DMH and CEO-ATI discussions on ACR.

Partner ACR-related accomplishments to date:

- Didi Hirsch: Began 911 diversion pilot with LA City/LAPD to divert certain 911 calls to the Didi Hirsch Suicide Prevention Center (SPC) with option to triage back to 911 for mobile response if needed.
- LA City: City Council approved a non-law enforcement crisis mobile response pilot based on the Crisis Assistance Helping Out On The Streets (CAHOOTS) model.
- LAC EMS: Developed new guidance for EMS providers to allow for alternate transport to EMS designated behavioral health urgent care centers (UCCs) and sobering centers, when indicated.

Related Board motions on which we are collaborating:

- Implementing the Office of Violence Prevention's Strategic Plan and Creating a Coordinated Community-Based Crisis Response System ([September 29, 2020](#)).

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- Ensuring Reliable and Consistent Public Safety in Los Angeles County Parks ([October 13, 2020](#)).
- Alternative Transportation ([November 24, 2020](#)).

If you have any question or need additional information, please contact me, or staff may contact Dr. Amanda Ruiz, Mental Health Psychiatrist, at (213) 738-4651 or amaruiz@dmh.lacounty.gov.

JES:JSA:jfs

c: Executive Office, Board of Supervisors
Chief Executive Office