



DEPARTMENT OF MENTAL HEALTH

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April 30, 2025

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

Michael Molina
Chair, Behavioral Health Commission
510 South Vermont Avenue
Los Angeles, California 90020

Dear Supervisors and Commissioner Molina:

RESPONSE TO BEHAVIORAL HEALTH COMMISSION INQUIRIES ON THE PUBLIC HEARING FOR THE MENTAL HEALTH SERVICES ACT ANNUAL UPDATE, FISCAL YEAR 2025-26

On April 25, 2025, the Los Angeles County Behavioral Health Commission (Commission) submitted a letter outlining their comments and questions to the Los Angeles County Board of Supervisors (Board) and the Los Angeles County Department of Mental Health (LACDMH) pertaining to the April 10, 2025, public hearing on the Mental Health Services Act (MHSA) Annual Update, Fiscal Year (FY) 2025-26.

Thank you for the Commission's commendation for the successful completion of this year's planning process, along with its collaboration, support, and active engagement throughout. The recommendations from the Commission will be considered and integrated as LACDMH initiates its planning for the Behavioral Health Services Act (BHSA) Integrated Plan, FYs 2026-2027 through 2028-2029. The LACDMH MHSA Administration leadership is committed to providing continuous updates on the recommendations and the progress of the BHSA implementation plans.

The Commission provided recommendations focused on the following three key themes:

1. Unspent Funds
2. Increased Community Engagement
3. Interdepartmental Collaboration

The following are LACDMH's responses to the Commission's recommendations:

Unspent Funds

The Commission noted the amount of the unspent balance and is requesting quarterly progress reports to include methods to spend these funds in a timely manner. LACDMH has a plan to address the unspent balance which includes the shift of dollars to the MHSA components: Capital Facilities and Technological Needs and Workforce Education and Training, in the next fiscal year. LACDMH will work with finance to provide quarterly updates.

Increased Community Engagement

The Commission is requesting staff to provide an update at an upcoming meeting on methods used to seek a more robust level of participation as well as increase its outreach to a broader community. In past years, LACDMH has set a standard for itself beyond what is required from the State to ensure transparency and access for the community into the planning process.

LACDMH is collaborating with Substance Abuse Prevention and Control (SAPC), and together we are reaching out directly to a broader range of stakeholders. Additionally, we will strengthen our partnership with the Service Area Leadership teams and Underserved Cultural Communities to ensure diverse representation. The MHSA team continues to explore innovative strategies to engage youth and others who may not be able to attend during regular meeting times, ensuring they receive updates and have opportunities to provide input. We look forward to partnering with the Commission as we strive to engage a wider audience and encourage greater participation.

Interdepartmental Collaboration

The Commission recommends a cross-sector alignment be facilitated in order to provide a thorough and productive disbursement of MHSA funds throughout the pertinent agencies. In addition, the Commission is seeking regular briefings from LACDMH staff on the process to achieve collaboration among the County's departments.

LACDMH currently partners and provides MHSA funds to several County departments to achieve its overall goals. Such departments include: Children and Family Services, Health Services, Library, Military and Veterans Affairs, Public Health and Sheriff. LACDMH is partnering with SAPC to develop the BHSA Integrated Plan and have already begun meeting. As we transition to the BHSA we will continue to engage and collaborate with our county partners which each have representation in the County planning process.

In addition to the three key themes, other issues were addressed:

- a. Limited engagement with the 88 independent cities in LA County on MHSA, especially around unhoused communities; more collaboration needed. A meeting has already been arranged with the MHSA Coordinator and Commissioner Victor Manalo to discuss strategies to reach out to cities.
- b. Need for more inclusive and respectful language in LACDMH materials, e.g., "unhoused" instead of "homeless." LACDMH will prioritize inclusivity and dignity in the language used in materials developed by the Department and will advocate for use of inclusive language with State and other contributing partners to the report.
- c. Concerns over low participation in programs like Full-Service Partnership relative to the County's population. LACDMH would like to acknowledge the Full-Service Partnership program reached 500 additional consumers this year and it will continue to grow under BHSA.
- d. Encouraged to partner with Public Health, Sheriff's Department, and others to enhance suicide prevention, wellness, and postvention efforts, modeled after Santa Clarita Valley. LACDMH has actively worked with many other County departments and partner agencies to strengthen Suicide Prevention and wellness efforts. Partners include but are not limited to the Department of Public Health, Department of Parks and Recreation (DPR), the Sheriff's Department, the Los Angeles County Office of Education (LACOE), the Office of Violence Prevention (OVE) and community providers such as Didi Hirsch. Efforts include work with the Youth Advisory Board, the Veteran Suicide Review team, and collaborating with "Striving for Zero" program with Department of Public Health, Didi Hirsch, and LACOE.
- e. Asked to expand the Early Childhood Mental Health Consultation model, focusing on 3-5 year-olds in preschools, based on the Georgetown Model. The California Youth Behavioral Health Initiative (CYBHI) offers a timely opportunity for Local Education Agencies (LEAs) to expand access to services by leveraging Medi-Cal fee schedule funding. To support long-term sustainability and equity, LACDMH is committed to supporting LEAs interested in implementing the Early Childhood Mental Health Consultation (ECMHC) model, with a focus on children ages 3-5.
- f. Recommended to develop a Foster Care Allies and Case Management program, inspired by Santa Clarita's Foster Youth Independence (FYI) program, in collaboration with the Department of Children and Family Services. LACDMH shares the Commission's commitment to improving outcomes for foster youth and ensuring that comprehensive, community-based supports are accessible and responsive. We appreciate the Commission's reference to the FYI program in Santa Clarita as a promising practice and agree that dedicated case management and peer ally support tailored to foster youth is a powerful and effective approach. Examples of LACDMH led programming that align with the Commission's vision include the Antelope Valley Community Family Resource Centers (CFRCs) and the Prevention and Aftercare (P&A) Networks. These programs provide critical

The Honorable Board of Supervisors
Commissioner Molina
April 30, 2025
Page 4

prevention and early intervention services throughout the County. These programs are designed to meet families where they are, offering trauma-informed, culturally relevant services that include navigation assistance, and case management. Case management is a core component of these programs and aligns closely with the model the Commission has elevated.

I remain committed to collaborating with stakeholders, partners, and the Commission to ensure that our MHSAs resources support those most in need in leading healthy, independent, and fulfilling lives.

If there are any questions, you may contact me at lwong@dmh.lacounty.gov or Kalene Gilbert, MHSAs Services Coordinator, at kgilbert@dmh.lacounty.gov.

Respectfully submitted,

A handwritten signature in black ink that reads "Lisa H. Wong, Psy.D." with a stylized flourish at the end.

Lisa H. Wong, Psy.D.
Director

LHW:RH:JB:KG:RR