



PUBLIC COMMENT TO ADDRESS THE BEHAVIORAL HEALTH COMMISSION
Executive Committee Meeting
April 24, 2025

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
Commissioners	Susan Friedman	Kathleen Austria	Stacy Dalglish	Victor Manalo	Lawrence Schallert
	Bennett W. Root, Jr.	Reba Stevens	Thomas Roache	Michael Molina	Brittney Weissman
	Imelda Padilla-Frausto	Erica Holmes	Jaqueline Sandoval-Valenzuela	Marilyn Sanabria	Vacant

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

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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	In Person	General	<p>Good morning, full support of the commissioners, this is so important. I want to say I appreciate that you worked very hard. Especially during the time of the fires. They are very stressful. And we all know how hard everyone worked to be able to help other people survive.</p> <p>While we feel up here today though, what is the problem? One thing we understand about life, what goes around comes around. No one wants to hear what is going on.</p> <p>Is it because, when they speak, they find somebody else talking on the word? Everybody has a responsibility of</p>

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				<p>leadership, and Commissioner Mike, you set the standard. You are that leader people imitate. In doing so, when I was speaking last time, I was speaking on something really important I had to stop. What goes around comes around. [Indiscernible] you reap what you sow, if for the community we want to be able to still have the model. The purpose. DMH is listening, we have that. And when I was speaking last time, it just showed the reason why this room is so empty. Four years people want to be heard. Especially when given to minutes. We haven't change that, that needs to be adjusted. Please, please, please as in the case of the information at JW.org. I was like okay. That is something that is really helpful. Only one person was able to show that they wrote down that zoom number. That shows when you do those things the person is really listening. And I'm sure in the future, open as the last statement that these will not come back upon us. That we can have this from field.</p>
Public Comment	Dr. Mohammed	In person	General	<p>Good afternoon. Good afternoon commissioners, my name is Dr. Estrada Al Mohammed clinical psychologist author of the Bureau care to custody cemetery pipeline. The system equity framework formally submitted to the commission on April 10.</p>

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				<p>Now a part of public record.</p> <p>At that meeting, your inquiries reflected two of the models for findings. The bureaucratic complexity is obstructing access to care. Family caregivers remain unsupported across the county system. The department's inability to offer a structured response or analytic framework and real-time, only underscores the relevance, and the urgency of the work.</p> <p>Since then, there has been no formal engagement or follow-up, despite the model being asked to leave reference. To show interest to show inquiry. That silence is not neutral. I urge the commission and the department, leadership to avoid selective or silent application of the framework. Without consultation or fidelity or purpose. Such use undermines ethical standards in public trust.</p> <p>Custody cemetery pipeline is ready for ethical and fermentation. What's missing is not infrastructure, but institutional courage. A QR code has been shared with relevant stakeholders.</p> <p>It links to the full framework summaries cemented into the public record. Than you for your stewardship and honoring the families in the community's you a charge to</p>

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				serve.
Public Comment	Dr. Siddler	By phone	General	<p>Good afternoon commissioners, my name is Dr. Suzanne Siddler. I thank you for the opportunity to speak today. I do want to address their recent care court town hall that I dissipated in a few weeks ago. And share reflections on the community feedback that was provided. Particular by families who are directly impacted by loved ones suffering from severe mental illness PICT</p> <p>We must recognize what we share at the town hall, is not simply anecdotal. These were real stories of families, navigating the heartbreaking reality of mental illness with their loved ones. Participants voiced a deep concern about systemic gaps and the need for continuous family involvement and care court proceedings.</p> <p>The fear that individuals might fall through cracks without adequate and compassionate and sustained care. I do ask, what is the outcome of the town hall? It's not simply writing a report and submitting it. The family's spoke clearly at that meeting.</p> <p>The need for transparency, and how decisions are made ongoing support for both family and their individuals, and a genuine commitment to improving the behavioral health</p>

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				<p>system.</p> <p>Not just meeting requirements and closing up gaps. These are real people, they need the care, these are lives that we are talking about, I hope that the town hall that was cut conducted a few weeks ago at the request of supervisor Hon. Will share ongoing policy changes in the help family members to help coordinate the care through care court. It is not an adversarial process. There is a need to get families involved and help support their loved ones.</p> <p>For me, I have no idea what is happening with my loved one in the care court system. It is become adversarial, and I urge that this is reconsidered. Thank you for the opportunity to speak.</p>
Public Comment	Irene Ratliff	In Person	General	<p>Good afternoon, Eileen Ratliff, the request of the commissioners has there been any effort to look at the city of Los Angeles counsel? Because you know we do have salt four and service areas that are managed by the city of Los Angeles? Any consideration for that? Any outreach to the city of Los Angeles counsel? Et cetera.</p>
Emailed Public Comment				
Public Comment	Dr. Esroruleh Mohammad	Email	General	To: Behavioral Health Commission & MHSA Planning Team

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				<p>CC: Dr. Lisa Wong, Ms. Patty Choi, Ms. Rimmi Hundal, Ms. Kalene Gilbert, Dr. Gary Tsai</p> <p>Dear Behavioral Health Commission Members,</p> <p>Thank you for your continued service and for the thoughtful dialogue during the April 24 Executive Committee meeting. I appreciated the opportunity to attend and observe the Commission’s leadership in advancing public engagement and systems oversight.</p> <p>I’m writing to respectfully follow up on two items discussed:</p> <p>1. April 4 CARE Court Town Hall Feedback Letter</p> <p>During the meeting, the Commission referenced a letter or report submitted to the Board of Supervisors following the April 4 CARE Court Town Hall. As a community member who submitted written public comment addressing equity gaps, systemic exclusion, and implementation risks, I respectfully request a copy of the letter or a summary of its content.</p> <p>Transparency around how stakeholder input informs official</p>

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				<p>communication is essential to public trust and meaningful engagement.</p> <p>2. Commissioner Roles and Inclusive Participation The Commission’s reflections on structural access and the framing of service as public honor were timely and important. However, these questions also point to a deeper inquiry: Who is formally invited to shape systems—and whose lived expertise is being drawn upon without recognition, attribution, or inclusion?</p> <p>As referenced in my public comments, the BureauCare-to-Custody-Cemetery Pipeline™ (BCCP™)—introduced publicly on April 10—has already begun informing internal discourse on access barriers and structural accountability. Its frameworks are now reflected in ongoing systems shifts. Yet, its original authorship remains unacknowledged in many of the very spaces where it is being operationalized.</p> <p>If the Commission remains committed to ethical reform and inclusive systems design, I welcome the opportunity for</p>

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				<p>structured collaboration—grounded in transparency, attribution, and shared accountability.</p> <p>Additional Note: During the April 24 MHSA Oversight & Accountability Committee meeting, I appreciated Dr. Gary Tsai’s public reflection on the need to reduce bureaucratic complexity and improve access to community-based care. The BCCP™ framework was developed specifically to address these challenges—and offers tools to map fragmentation, track equity impact, and strengthen cross-departmental implementation.</p> <p>Requested Follow-Up:</p> <ul style="list-style-type: none">• Please confirm whether the April 4 letter has been finalized and submitted to the Board of Supervisors, and whether public comment is reflected in its content.

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				<ul style="list-style-type: none"><li data-bbox="1276 435 1982 540">• If available, I would appreciate clarification on how community input is documented and incorporated into Commission processes. <p data-bbox="1226 586 1969 654">Thank you again for your time, leadership, and continued commitment to transparency and structural equity.</p> <p data-bbox="1226 699 1927 768">With appreciation and continued dedication to equity, accountability, and public trust,</p> <p data-bbox="1226 813 1398 849">Respectfully,</p> <p data-bbox="1226 889 1976 1036">Dr. Esroruleh Mohammad Clinical Psychologist Author, BCCP™ Public Behavioral Health Advocate (On Approved Leave — ADA/FEHA)</p> <p data-bbox="1226 1084 2028 1273">Note: A public-facing article outlining the BureauCare-to-Custody-Cemetery Pipeline™ was formally submitted to the Behavioral Health Commission and MHSA Planning Team as part of the public record on April 10, 2025. The article affirms authorship</p>

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				<p>and outlines institutional relevance and systemic implications across County divisions.</p> <p>Link: BureauCare-to-Custody-Cemetery Pipeline™</p> <p>This reference is provided in support of transparency, authorship integrity, and public accountability standards.</p> <p>Confidentiality Notice:</p> <p>This message contains information that may be confidential, legally privileged, proprietary, or otherwise protected from disclosure. It is intended only for the individual or entity to whom it is addressed. If you are not the intended recipient, any use, disclosure, copying, distribution, printing, or reliance on the content of this communication is strictly prohibited.</p> <p>Disclaimer:</p> <p>This message is sent from my personal account due to my current leave status. My LACDMH address is included solely to preserve continuity and ensure institutional transparency regarding prior contributions.</p>

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				P.S. Several protocols and oversight strategies now active within CMMD, CLRM/Safety Intelligence, and Access to Care reflect frameworks I submitted during unpaid medical leave. Their silent adoption—absent formal acknowledgment or accommodation—raises serious ethical and procedural concerns, especially as I remain professionally excluded.

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