

JUSTICELA

March 27, 2020

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Sent via email

RE: Supporting Transitional Services During COVID-19 Crisis

Honorable members of the Los Angeles County Board of Supervisors:

JusticeLA, a coalition of Los Angeles-based community organizations, advocacy groups and individuals impacted by the LA County carceral system write to implore you to take immediate action in support of the safe transition of incarcerated people into the community. COVID-19 safety protocol demands that the county dramatically reduce the jail population; however, **the fear of infection is causing transitional service providers to close their doors**. We [wrote a letter](#) on March 13 where we made demands for jail reduction to protect the lives of people impacted by the county jail system. In that, we called for enhanced funding for community-based services, and in this letter, we are lifting up the health strategies that can be employed to meet that goal. People who would otherwise be released into treatment are now serving extended jail time, hindering the county's ability to divert those most vulnerable.

On March 10 you collectively voted to move forward with the Alternatives to Incarceration: Care First, Jails Last vision and foundational recommendations. This is an opportunity to realize that vision; to prevent needless suffering and death and to support the decentralized community-based system of care. We urge you to view this time as an opportunity to be flexible, to detach from the ways that we have functioned historically, and to address this crisis with vision. We ask that the Board take the following actions to support service providers admit new clients during the COVID-19 pandemic:

- Medical Clearances and Medication Needs:
 - Allocate some of the COVID-19 tests for individuals that will be diverted in the next month, to prioritize testing for those who cannot practice social distancing and are most vulnerable.
 - Prioritize use of COVID-19 tests for individuals who are going to be released into group home settings to ensure the safety of other group home residents as well as facility and treatment team staff.
 - Ensure that individuals get medical clearance upon leaving jails and develop medical protocol for service providers to follow for admissions.
 - Ensure that individuals are released from jail with a minimum of two weeks of physical medication (including injectable medications) and a 3 month prescription for all medication to address the likelihood that it will be difficult to see a psychiatrist or medical doctor quickly during the crisis.
- Develop Provider Protocols and Incentivize Use:
 - Develop an emergency plan for community-based providers to be able to intake more people by decreasing the amount of paperwork for admission to the minimum necessary to provide sufficient services.
 - Require that jail linkage staff provide as much information as possible to community-based providers without delaying release.
 - Provide funding for hazard pay to community-based mental health organizations to ensure that they are able to repurpose staff from existing programs to implement emergency programs in consultation with agency leadership.
 - Provide relief support to existing programs to ensure that they can continue to function with decreased staff.
 - Establish a team to develop an emergency mental health treatment plan for individuals with a variety of needs with an understanding that level of care may not exactly match the need right now, but holding the value that release from jail is priority.
 - People who may need extensive treatment will be able to maintain stability temporarily if they are only able to receive medications and weekly or biweekly meetings with a mental health treatment team but ***this is better than being incarcerated*** even if it is not ideal.
 - Clearly define what services are considered essential - service providers will provide more consistent, safe, and effective treatment with guidelines created by county leadership in partnership with community-based service providers.
 - Change jail policies to allow service providers to conduct phone or video interviews in lieu of in person interviews. Many providers ***will not be able to accept*** new people into their programs without having contact first.
- Fund and Deliver Supplies to Staff Engaged in Diversion:
 - Develop a method for providers and health staff engaged in diversion to have consistent access to Personal Protective Equipment (PPE), food, and other basic needs.
 - Establish a flexible funding pool for clients' basic needs (clothing, hygiene products, etc) so that service providers can purchase necessities immediately upon release.
- Emergency and Long Term Housing Approaches:
 - Utilize hotels, motels, universities and/or similar emergency shelters as Interim Quarantine Housing (IQH) [to divert impacted individuals to particular locations](#) and support provider crisis plans. Many of these locations such as the hotels and motels can be utilized as long term housing after the crisis.

- Quarantine housing includes housing for both people who have symptoms and people who are housed in Quarantine Units within the jails but are asymptomatic and/or housed with Patients Under Investigation (PUI)
- Utilize the flexible housing subsidy pool to guarantee funding for service providers to cover treatment and housing for individuals who are undocumented/uninsured into long term housing approaches.
- Identify vacant housing locations in Los Angeles and utilize as emergency shelter, IQH, and ultimately long term housing after the crisis.
- Immediately develop a plan for coordinating remote releases to minimize people going into court and prepare for potential court closures.

We will support you in taking this bold, but necessary, action to protect the health of every Angeleno, especially the most vulnerable.

In solidarity,
#JusticeLA