Welcome and Introductions

The meeting began with a welcome from Dr. Robert Ross, President of The California Endowment, followed by introductory remarks from Peter Espinoza, Director of the Los Angeles County Office of Diversion and Reentry, and Dr. Mark Ghaly, Director of the Los Angeles County Office of Health and Social Impact.

Dr. Ghaly began a PowerPoint presentation and requested that the group provide input around guiding questions and values for this process. He asked that participants use the boards posted around the room to share their thoughts. The guiding questions were:

(1) What values do you hope will guide the alternatives to incarceration work group?
(2) How can we contribute in building a different form of justice across Los Angeles County?

Corrin Buchanan, Deputy Director of the Office of Diversion and Reentry, led group introductions by asking participants to share their name, organization and vision or grand idea of what they could contribute to this group.

Ideas and contributions included:

The political will is there, we need good ideas. I can identify buckets of money. We can identify high quality alternatives to custody for substance use disorders. We bring data to the table. We need to focus on racial equity. We have direct experience working with the court and what it takes to provide a system of care for this population. A highly specialized system of care needs to be developed. We need to restructure the system to provide services in a more appropriate way. Let’s break up criminalization of homelessness. We need to fundamentally restructure what we are doing. Let’s remember that what we are doing is for the children. There are consequences for conviction, including deportation. We should move away from retributive justice and get toward transformative justice to allow our communities to thrive. We want to get to a place where our communities have what they need to prevent justice involvement in the first place. Focus on implementation. We need to cultivate expanded capacity of service providers and community-based organizations, including case management. We have expertise in the area of pretrial services and the pretrial population. We continue to build partnerships with our providers, reduce recidivism and motivate positive behavioral change instead of retribution. We must stop criminalizing homelessness. Work is critical to self-esteem and dignity. I focus on organizational efficiency and execution. The effort lacks coordination and real action items so far – we need to move closer to concrete solutions and direction. Let’s reimagine the justice system and uplift voices of the incarcerated. Other jurisdictions are looking to Los Angeles County. We need to be bold,
courageous and persistent. We can help figure out how to best integrate efforts currently in place and what comes out of this work. Let’s get people with mental health needs out of the criminal justice system and address any innovative measures for folks not to come into the system before filing. There are not enough resources in the community. We can bring experience with some alternatives, but we have not moved far enough along. We want to move as many clients out of system as early as possible. We want to grow efforts to decriminalize homelessness and, for those who must be incarcerated, grow programs for them and when they exit have somewhere to go and avoid recidivism. We bring the perspective of community organizations doing the work without many resources and the perspective of the communities most impacted.

Ms. Buchanan ended introductions by stating her belief that the whole is greater than the sum of its parts and her hope that the group can build consensus leading to forward movement.

Presentation

Dr. Ghaly returned to the PowerPoint presentation, sharing information about the working group’s main purpose, to provide a roadmap of alternatives to incarceration to the Board of Supervisors with an action-oriented framework and implementation timeline.

Diana Zuniga, of the Los Angeles County Department of Health Services’ Whole Person Care unit, described the process characteristics and goals, as well as initial guiding principles. She encouraged participants to share additional suggestions of principles.

- Characteristics of the process: Inclusive, aligned, innovative, Care First-Jail Last, Community Based, Regional – Services Should be Local, Housing is Key to Stabilization, Not “One size fits all” (Individualized Care), Right Size Community Continuum, Don’t forget about employment, Holistic, Human Centered
- Goals:
  - Develop a vision, values, process and structure that will guide the creation of a comprehensive plan to build a more effective justice system
  - Utilize emerging data and recommendations from the range of studies currently being conducted to expand diversion and increase community treatment opportunities including special consideration for justice-involved sub-populations
  - Create a roadmap for expanding alternatives to custody and diversion while preserving public safety
  - Analyze legislative and policy changes needed to advocate for the roadmap
  - Coordinate with related efforts to ensure that they are aligned with the County’s goal of diverting people into treatment and not incarceration

Dr. Ghaly then reviewed the timeline and overarching goals.

- Interim Report: 3-month report focusing on safe alternatives and diversion of those with clinical needs
- Final Report: At 9-months a report that looks at the broad population in jail and opportunities for safe alternatives and diversion
Dr. Kristen Ochoa, Medical Director for the Office of Diversion and Reentry, provided information about a current local study. ODR has undertaken a study, based on an August Board motion, to determine how many people with clinical mental health needs are divertible from the jail into housing. She described a team of researchers from RAND, UCLA Law, and Groundswell that has identified a study population for ODR to review and how some of the early results can be used to inform the Alternatives group.

Break for Questions and Comments

The speakers then asked for mid-point questions and comments.

• Suggestion to bring unions into the discussions as stakeholders
• Caution about being realistic about the current state of the system of care and what is needed to expand capacity, and the need to vet the concept of community-based care—what are we trying to achieve in terms of integration of goals? Also recognizing that we are targeting limited mental health resources, in competition with other agencies.
• Suggestion to ensure that other voices need to be in the room, especially those impacted most by the system. Offer philanthropy as a means to bring those voices in.
• Suggestion to incorporate issues of racial justice and racial healing to the guiding principles.
• Suggestion to make sure people with service needs know about community resources.
• Question about the range of facilities that are needed and their characteristics, whether locked or not secure. Comment about needing to expand the courtroom culture away from locked facilities as alternative placements.
• Comment that Mental Evaluation Teams (LASD) should be part of this effort.
• Comment that community-based providers should be in the room.
• Suggestion to determine the social safety net in different communities and examining the county contracting process to expand the providers of those different safety nets.

Presentation Resumed

Dr. Ghaly resumed the presentation with a description of local and national models of recent reform and jail downsizing.

Dr. Ochoa described the ODR Housing Program as a local model of diversion.

• The Misdemeanor Incompetent to Stand Trial Program was started in 2015, with cases in Department 95, Mental Health Court. She then described starting a housing program in Department 44 and started taking felony cases, initially lower level felonies but after earning the trust of the court and justice partners, started taking more serious cases. Dr. Ochoa said that they now have felony IST programs in collaboration with the state hospitals.
• Case study: Dr. Ochoa described the case of a 56-year old woman charged with kidnapping who has a long-term history of schizophrenia. This woman saw children in her building she thought were lost and cared for them for a few hours. She was then arrested and charged with kidnapping, which caused her to lose her housing. She is now in ODR community housing where a team is helping her to achieve competency to stand trial and will continue to provide care and treatment along with permanent supportive housing moving forward.
Dr. Ghaly then described the process and outcomes of the Lippman Commission in New York City that spent a year working on downsizing and planning to close Rikers Island. He mentioned similar efforts in New Orleans, emphasizing the creation of a volunteer Community Advisory Board that provides oversight and accountability for reforms.

Next Steps

Corrin Buchanan discussed next steps for the group, including forming subcommittees and ensuring alignment with other related efforts such as the recent motions around the women’s jail, coordinating mental health and substance use disorder efforts across agencies, recent voter measures, etc.

The upcoming meeting schedule is:
- March 21: Second Workgroup Meeting from 1-3pm
- April 11: Third Workgroup Meeting from 1-3pm
- May 2: Fourth Workgroup Meeting from 1-3pm
- May 23: Fifth Workgroup Meeting from 1-3pm
- Monthly TBD starting in June

Public Comment

Comments included:
- Emphasizing what helps people who are incarcerated, such as community members going into facilities and providing community connections and focusing on strengths and growth and development.
- Need to hear from more people with lived experience and what they feel they needed to succeed.
- Make sure wrongfully convicted and formerly incarcerated individuals are in the space.
- Request for clarity around the working group and its members versus those providing technical assistance and support. Request for a list of members and the slide deck.
- Question about how subcommittees will be identified. Response provided with initial subcommittee areas:
  - Bricks and mortar facilities
  - Clinical programs
  - Comm engagement oversight portions
  - Funding piece
  - Justice processes, what might be open or mutable and could be resourced differently
- Closing comment thanking everyone for being in the room and appeal to focus on the goal of having many people in jail who should not be there and are better served in a different setting. We know we can do better. Have heard ideas of what we need to do. Don’t be afraid to put bold ideas in front of the Board. Capacity is perhaps the number one challenge we face. This challenge is not one that is solved by open free market. We have to solve it. We have to create capacity. We hope you can think through all the steps we have to take.

Guiding Principles

Participants added comments to the guiding principles questions, as follows:
What values do you hope will guide the alternatives to incarceration work group?

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<tr>
<th>Process Values</th>
<th>Philosophical Values</th>
<th>Program Ideas</th>
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<tbody>
<tr>
<td>Specific</td>
<td>Embrace and cultivate “radical re-imagining”</td>
<td>Infrastructure</td>
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<td><strong>Inclusion of many voices</strong></td>
<td>Trust the community</td>
<td>Holistic spectrum of care – employment, housing</td>
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<td>(nonprofits: those with lived</td>
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<td>experience)</td>
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<td><strong>Thinking BIG</strong> (outside the</td>
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<td>Create subcommittees of people who have</td>
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<td><strong>Action oriented</strong></td>
<td>Not criminal justice, but economic, racial and gender justice</td>
<td>Ensure there are services for immigrants</td>
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<td><strong>Human first language</strong></td>
<td>Dignity</td>
<td>Support better health care</td>
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<td><strong>Equity and racial justice</strong></td>
<td>A change in values from punishment to rehabilitation by law enforcement and prosecutors</td>
<td>Changing our concept of justice</td>
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<td>Police and jails do not equal public safety</td>
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<td>People are not risks</td>
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<td>I hope people let go of the fear to public safety</td>
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<td>“can’t get well in a cell”</td>
<td>Racial healing and community healing</td>
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<td>Discuss carceral humanism</td>
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<td>Think about people’s resilience and possibility</td>
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<td>What’s working is broken</td>
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<td>Racial justice: acknowledge and dismantle history of white supremacy, build on /</td>
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<td>acknowledge innovative work happening in black and brown communities to combat racial</td>
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How can we contribute in building a different form of justice across...
Los Angeles County?

- Stop throwing money away on useless items in prison officers office and equipment
- Brainstorm and design sessions with community
- What are the ten best ideas for alternatives across the nation?
- Commit long-term to the work. Do not allow one mistake to trigger folks back to incarceration
- Invest in community-based care
- Pre-arraignment release
- Create a system of accountability with community oversight
- Fund community member development
- Shouldn’t need law enforcement contact for services
- Simplify contracting from County to community-based organizations
- Build on strengths
- Prioritize the voices of system-impacted people
- Focus on preventing the criminal justice system from impacting others
- End for-profit service provisions
- Prioritize community-based and led services
- Prohibit the use of private prison industry complex
- Ease the process and hurdles to getting people with lived experience in the jails to work with those incarcerated
- Opportunities for diversion at many stages (e.g. pre-arrest, pre-trial, etc.)
- Data analysis, evidence-based practice
- Recognize how badly the current system is failing people with mental illness so we are bold in proposing alternatives

Adjournment

The meeting was adjourned at 2:55pm to allow for networking and participants to add comments to the guiding questions boards.