

L.A. County Alternatives to Incarceration (ATI) Work Group

Community Workshop in Pomona

Meeting Notes

— Wednesday, September 18th, 2019 —

Partner Organization: **Prototypes Women's Center** (845 E. Arrow Hwy, Pomona, CA 91767)

Purpose of Alternatives to Incarceration (ATI) Community Workshops

The Los Angeles County Board of Supervisors established the ATI Work Group in February 2019 and is partnering with stakeholders to develop a roadmap to expand diversion options so care is provided first and incarceration is a last resort. To elevate the voices of formerly incarcerated people and their loved ones, the ATI Work Group's Community Engagement Ad Hoc Committee partnered with community-based organizations to hold a series of community workshops in selected communities. At these workshops, formerly incarcerated people and family members with loved ones in custody, shared their experiences and advice on which services, supports and policies are most needed to prevent incarceration.

2. Activity #1: Building the System Together — Input on Three Key Recommendations of the Draft ATI Roadmap

Recommendation #1: *Train 9-1-1 operators to screen for mental health and substance use disorder crises and to direct calls involving behavioral health crises that do not require law enforcement to mental health and substance use disorder professionals who can help the person in crisis.*

- Sample of participants' suggestions for making Recommendation #1 work:
 - ◇ Ensure that operators are trained to be compassionate, non-judgmental, and sensitive to the situation.
 - ◇ Allow mental health professionals to decide where to send the individual.
 - ◇ Educate police officers on mental health issues to prevent use of excessive force.
 - ◇ Provide training for first responders and paramedics as well.
 - ◇ Have 9-1-1 operators ask callers about potential history of mental illness.

- Sample of participants' concerns regarding Recommendation #1:
 - ◇ Safety of mental health professionals when accompanying police officers.
 - ◇ Ability of team to handle domestic violence situations.
 - ◇ Possibility for individuals to falsely claim to have mental health disorders and take advantage of the program.
 - ◇ Difficulty of assessing the entire situation through a phone call.

Recommendation #2: Put in place a practice where law enforcement, whenever possible, addresses and releases people with clinical behavioral health disorders at the time of contact and helps connect the person to the appropriate service provider.

- Sample of participants' suggestions for making Recommendation #2 work:
 - ◊ Emphasize a humanistic, people-centered approach when working with at-risk individuals.
 - ◊ Provide holistic, wrap-around services that incorporate the whole family.
 - ◊ Have a mental health professional on-site for appointment booking.
 - ◊ Include staff members who have expertise in co-occurring disorders, such as mental health and substance use disorders.
 - ◊ Ensure there are enough staff members to prevent burnout.

- Sample of participants' concerns regarding Recommendation #2:
 - ◊ Need for sensitivity to an individual's situation to prevent misunderstandings or misdiagnoses.
 - ◊ Budget/finances.
 - ◊ Longevity of care to prevent relapse following treatment.
 - ◊ Need for a place at the County jail to evaluate individuals' mental health.
 - ◊ Need for experienced case managers.



Recommendation #3: *Develop a strengths and needs-based system of pretrial release by establishing an entity outside of law enforcement that conducts voluntary needs and strengths assessment quickly upon law enforcement contact and/or initial detention, whenever possible. The entity would prioritize pre-booking with a presumption of release and link people with clinical behavioral health disorders to community-based care.*

- Sample of participants' suggestions for making Recommendation #3 work:
 - ◇ Need for thorough assessment and evaluation.
 - ◇ Maintain communication with individuals' families throughout the process.
 - ◇ Create a specific mental health crisis hotline to call instead of 9-1-1.
 - ◇ Provide help for individuals who have been over-sentenced for crimes they committed while under the influence and who were not receiving medical treatment when the crime was committed.
 - ◇ Provide better mental health resources and better access to medical care.

- Sample of participants' concerns regarding Recommendation #3:
 - ◇ Police officers might be unwilling to cooperate.
 - ◇ Need for more detailed and defined plan of action for individuals.
 - ◇ Ensure that mentally ill individuals do not receive harsh punishments for decisions made while self-medicated and untreated.



3. Activity #2: Small Group Discussion on Services Needed for Successful Prevention, Support During Custody, and Re-entry

a. What supports and resources would have helped prevent you and/or your loved one from entering the criminal justice system?

- ◇ Strong support system and nurturing environment during youth.
- ◇ Grief support/therapy that addresses childhood trauma.
- ◇ Peer-support groups for children with justice-involved family members.

b. What were the services you and/or your loved one needed the most in the PRE-RELEASE phase of incarceration?

- ◇ Meetings with case managers in a timely matter to develop a plan in advance.
- ◇ Affordable housing and means of transportation to access support programs.
- ◇ Directory of available services for formerly-incarcerated individuals.
- ◇ Assistance with job training and placement.

c. What were the services you and/or your loved one needed most in the POST-RELEASE phase of incarceration?

- ◇ Assistance with job placement/vocational training.
- ◇ Assistance with finding housing.
- ◇ Family reunification.

d. What have been the most significant barriers to you and/or your loved one in accessing the resources you need during the pre-release and post-release phases of incarceration?

- ◇ Lack of finances and poor credit history.
- ◇ No means of transportation.
- ◇ Lack of help or support from family members.
- ◇ Social stigma and discrimination felt in the community as a person on parole.

