

**LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
FAITH-BASED ADVOCACY COUNCIL**

550 S. VERMONT AVENUE, LOS ANGELES, CA 90020

February 23, 2015

Dear Honorable Board of Supervisors:

Community Stakeholders Input on Health Integration Motion

We are writing to provide input to your proposal to create a Health Agency to oversee the Departments of Health, Mental Health and Public Health and ensure service integration amongst the three. We are the **Faith-Based Advocacy Council**, an interfaith body of representatives from diverse faith communities **convened by the Los Angeles County Department of Mental Health (DMH)** to collaborate on promoting hope, recovery and wellness in our neighborhoods. At the Council's monthly meeting on February 5, 2015, at the Magnolia Place Family Center, we had the pleasure of hearing more about your integration proposal in a discussion led by Carol Meyer, Los Angeles County's Community Outreach Coordinator for Health Care Integration. A vigorous response was provided by our diverse members and we want to send this letter as a summary of that response.

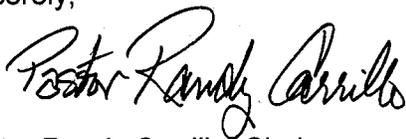
The key points advocated by our members are summarized below. A list of the comments received is attached:

- 1) Engage in a transparent and inclusive process to determine the best option to achieve optimal service for Los Angeles County residents.
- 2) Involve faith communities from the beginning and give them an equal voice in determining how best to help the communities they serve and support.
- 3) Service integration and not consolidation should be the main focus.
- 4) View the health agency role as a communication/coordination hub and not as a hierarchical overseer (see attached diagram).

We believe the voice of the faith community is critical in matters that affect the health and wellness of our residents. Faith leaders are often the first responders to people in need and continue to help after other helping organizations leave. We are also involved in services and support with or without government partners in addressing entrenched communal problems. We are aware of the importance of being involved in important government proposals that will profoundly affect the quality of life of our constituents. We hope the current effort is an opportunity for effective involvement.

We thank the Board for the opportunity to provide feedback through the Office of Health Care Integration. We appreciate your consideration of the suggestions expressed in this letter in making your decision.

Sincerely,



Pastor Randy Carrillo, Chair
The Faith-Based Advocacy Council

LISTING OF COMMENTS MADE BY MEMBERS OF THE DMH FAITH-BASED ADVOCACY COUNCIL

AT THE MEETING ON FEBRUARY 5, 2015.

IN THE CATEGORY OF RECOMMENDED NEEDS

- 1) Work with the faith community throughout the planning process
- 2) Develop parity between departmental staff and faith leaders
- 3) Unify EHRs (Electronic Health Records)
- 4) Partner and improve the neighborhood clinics
- 5) Look at why the departments were divided in the first place
- 6) Create good checks and balances
- 7) Transparency
- 8) Look at the needs of communities throughout the planning process
- 9) Make the integration fluid
- 10) Work on alignment and communication
- 11) Create the freedom for everyone to access the services they need

IN THE CATEGORY OF CONCEPTUAL RECOMMENDATIONS, CONCERNS AND QUESTIONS

- 1) Including the faith community in planning for the integration of departments is essential
- 2) This change is an opportunity to embed a faith-based advocacy component in the new structure
- 3) Will the motion increase, decrease or not affect integrating spirituality into the departments' service delivery?
- 4) There is a concern that integration will delay access to health services
- 5) There is a concern that adding a layer will create more bureaucracy
- 6) How will integration benefit the multicultural population?
- 7) Will underserved populations continue to be underserved due to a larger structure?
- 8) The community must be the support component of the newly configured system
- 9) Will the experience of getting a live person on the phone be as difficult as it is now?
- 10) Listserv is helpful and important
- 11) "Integration" of departments is preferred over "consolidation"
- 12) A circular rather than vertical inter-departmental structure is suggested (see graphic below)

CIRCULAR STRUCTURE

