



**Los Angeles County**  
**COMMISSION ON**  
**ALCOHOL AND OTHER**  
**DRUGS**

# **Annual Report**

January - December 2025

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**COMMISSION ON ALCOHOL AND OTHER DRUGS COMMISSIONERS BY  
SUPERVISORIAL DISTRICT**  
**JANUARY 2025 – DECEMBER 2025**

**COMMISSION OFFICERS**

Tonya McKenzie, Chair  
Jack Hadjinian, Vice Chair  
Bruce Boardman, Second Vice Chair  
Amanda Cowan, Recording Secretary  
Christina Gonzalez, Member-At-Large  
Deena Duncan, Member-At-Large (served until August 2025)

**COMMISSION LIAISON**

Diana Carranza  
Mayra Colunga Aguilera

**FIRST SUPERVISORIAL DISTRICT**

**SUPERVISOR HILDA L. SOLIS**

Bennett Root (served until  
April 2025)  
Christina L. Gonzales  
Jack Hadjinian  
Jerry G. Velasco

**SECOND SUPERVISORIAL DISTRICT**

**SUPERVISOR HOLLY J. MITCHELL**

Bruce Boardman  
Johng Ho Song  
Tonya McKenzie

**THIRD SUPERVISORIAL DISTRICT**

**SUPERVISOR LINDSEY P. HORVATH**

Adam Siegel (appointed in May 2025)  
Amanda Cowan  
Avia Rosen (served until April 2025)  
Charles Robbins (served until June 2025)  
Kanin Pruter (appointed in August 2025)  
Ruben Rodriguez

**FOURTH SUPERVISORIAL DISTRICT**

**SUPERVISOR JANICE HAHN**

Brian Heyman (appointed in September 2025)  
Deena Duncan (served until August 2025)  
G. Lola Worthington (served until May 2025)  
Juan Navarro  
Mark Mendoza, Jr.

**FIFTH SUPERVISORIAL DISTRICT**

**SUPERVISOR KATHRYN BARGER**

Jozef Essavi (served until April 2025)  
Howard L. Winkler  
Rebecca Birotte  
Tony Bell

**SUBSTANCE ABUSE PREVENTION  
AND CONTROL**

Alicia Garoupa

**COUNTYWIDE CRIMINAL JUSTICE  
COORDINATION COMMITTEE**

Jake Fisher (appointed in April 2025)

**LEAGUE OF CALIFORNIA CITIES  
LOS ANGELES DIVISION**

Ana Maria Quintana (served until June 2025)  
Paul Cheng (appointed in September 2025)

# COMMISSION ON ALCOHOL AND OTHER DRUGS MISSION STATEMENT AND ORDINANCE

## **MISSION STATEMENT**

The Los Angeles Commission on Alcohol and Other Drugs (CAOD) advises and makes recommendations to the Los Angeles County Board of Supervisors on alcohol and drug issues with the goal of reducing problems and the negative impact of Substance Use Disorders (SUD) on the quality of life for individuals and their families residing in Los Angeles County.

## **ORDINANCE**

The Commission, as an advisory board, is established pursuant to California Health and Safety Code Sections 429.997, 11752.1(e), 11798.1(a), 11805 and 11998.1(f)(2). The Commission functions pursuant to Chapter 3.15 of the Los Angeles County Code; Board Order Nos. 10 of January 19, 2010, 55 of January 19, 2010, 64-B of January 19, 2010, 19 of January 26, 2010, Ordinance No. 2010-0003 (Which consolidated the Commission on Alcoholism and the Narcotics and Dangerous Drugs Commission and repealed Chapters 3.06 and 3.40), and Board Order No. 125 of June 26, 1990, Ordinance No. 90-0086 (Term Limits); Board Order No. 31 of April 6, 2010, and Ordinance No. 2010-0016. Board Order No. 38 of October 19, 2010, Ordinance No. 2010-0046. The Commission is charged by its ordinance to:

- Review federal, state and local legislation and recommend to the Board appropriate measures for the implementation thereof
- Recommend to the Board strong programs in the field of enforcement, medication, prevention, and rehabilitation concerned with problems associated with the abuse of and addiction to alcohol and other drugs
- Advise the County Substance Abuse Prevention and Control (SAPC) on goals and policies of the County Substance Abuse Prevention and Control Administration and on any other related matters the County SAPC Administrator refer to it or which are raised by the Commission
- Organize and assist in alcohol and other drug conferences in areas of the County
- Encourage and educate the public to understand the nature of addiction, and encourage support throughout the county for development and implementation of effective programs for prevention and treatment of alcohol and other drug abuse, addiction and related problems
- Do all other things necessary or helpful to reduce the illicit and problematic use of alcohol and other drugs

The Commission remains a dedicated and diversified entity providing discussion and perspective around topics and concerns related to the use and regulation of alcohol and other drugs within the County of Los Angeles. Through a diverse multicultural and comprehensive viewpoint involving a wide variety of community representatives, the commission provides advocacy on the importance of substance use prevention and treatment among all age groups and populations residing within the County. The Commission is committed in supporting and partnering with SAPC and the Los Angeles County Board of Supervisors to create a system of inclusive integrated services by advocating thorough policy, planning, education, prevention, and recovery, those services that are designed to address and reduce the negative impact of alcohol and other drug use on the quality of life for children, youth and adults in Los Angeles County.

## KEY ISSUES IMPACTING AT-RISK AND SYSTEMS-INVOLVING ALCOHOL AND OTHER DRUGS

For our Commission, in 2025 we welcomed five new Commissioners, who brought in new perspectives from a variety of knowledgeable individuals engaged with serving diverse populations across Los Angeles County. Those who serve have helped the Commission become a stronger advocate in the health and well-being of all Angelenos.

With the intensifying crisis of fentanyl laced illicit drugs plaguing all age groups in our Los Angeles communities, substance use has become an epidemic of its own leading to too many unnecessary deaths. Methamphetamine use continues to wreak havoc on communities and loved ones, destroying the minds and health of Angelenos and all the families involved. Alcohol abuse continues to increase leading to more cases of domestic violence resulting in families being pulled apart from the devastating effects. The toll of substance use and abuse is having a profound effect on our learning institutions, homelessness, families, workforce and communities as a whole.

The Commission recognizes the importance of taking action now to strengthen our Communities, Families, Educational Institutions, Medical Providers, Behavioral Health Providers, Emergency Responders, Homeless Outreach Services, Courts, Probation, Parole, Department of Health Services (DHS), Department of Public Health (DPH) SAPC and the Los Angeles County Board of Supervisors to create partnerships in providing increased prevention, education, harm reduction and low barrier treatment strategies to address our critical Los Angeles' societal needs.

The Commission is tightly integrated with SAPC, the principal agency within the County authorized to create and maintain County programs designed to assist in the prevention of alcohol and drug related problems and to coordinate and support County efforts to provide harm reduction, treatment and recovery options for its residents confronting alcohol and drug use and abuse.

With the passage of the Federal reconciliation legislation H.R. 1 there are impacts that will reduce Medicaid, CHIP, and ACA Marketplace funding by \$1.2 trillion over the next 10 years, increase the number of uninsured Americans by at least 10 million, and make substantial changes to the Medicaid system nationwide. In California, 3.4 million Medi-Cal members are at risk of losing coverage and over \$30 billion in annual federal funding is at-risk. While SUD clients and behavioral health services are exempted from several of the key reductions of covered services there are anticipated impact for SUD clients. SAPC and is working closely with other County departments to mitigate the impacts of H.R. 1 to the Medicaid program and on individuals enrolled or eligible for Medi-Cal. This is being done by identifying strategies of reduce the number Medi-Cal disenrollments due to the changes enacted. Additionally, SAPC is developing community messaging to inform County residents on the impact of H.R. 1, including exemptions to some enacted changes (e.g., work requirements) for individuals receiving SUD services.

The CAOD adopted and enacted a new strategic plan with a focus on prevention. To that end, we adopted a new Strategic Prevention Framework (SPF). The SPF six step planning process guides the development of prevention services. The following is a list of our strategic priorities and how we informed and educated the commission in each of these areas.

CAOD's strategic plan focused on two (2) Priority Areas, including:

- Priority 1: Address the Changing Environment in Providing Substance Use Disorder Treatment
- Priority 2: Address the Lack of Youth Services in Substance Use Disorder Prevention and Treatment and Promote Increased Access and Services

## STRATEGIC PRIORITIES FOR 2025

### **STRATEGIC PRIORITY 1: ADDRESS THE CHANGING ENVIRONMENT IN PROVIDING SUBSTANCE USE DISORDER TREATMENT**

**Goal 1:** Discuss plans with SAPC on implementation of Prop 36.

**Goal 2:** Collaborate with County of Los Angeles Commission on Behavioral Health, Human Immunodeficiency Virus, and Youth.

**Goal 3:** Collaborate with SAPC on any pending legislature and promote approval/disapproval with County of Los Angeles Board of Supervisors.

**Goal 4:** Collaborate with SAPC on outreach and engagement funding and implementation opportunities.

### **STRATEGIC PRIORITY 2: ADDRESS THE LACK OF YOUTH SERVICES IN SUBSTANCE USE DISORDER PREVENTION AND TREATMENT AND PROMOTE INCREASED ACCESS AND SERVICES**

**Goal 1:** Collaborate with SAPC and County partners on securing increased youth SUD treatment within the County of Los Angeles and promote by making recommendations to the County of Los Angeles Board of Supervisors.

**Goal 2:** Promote SAPC's efforts in educating the public on substance use and prevention services at Public Health core centers, educational institutions, and recreational parks Countywide.

**Goal 3:** Promote school-based education to instructors, faculty, and parents on substance use and prevention and advocate for increased resources through advocacy of SAPC and County partner efforts and promotion to County of Los Angeles Board of Supervisors.

## COMMISSION ON ALCOHOL AND OTHER DRUGS MEETINGS

Commission meetings are the primary vehicle through which information regarding alcohol and other drug related issues in Los Angeles County is disseminated and the venue at which policy matters are considered and recommendations are developed.

During 2025, the Commission held 10 regular meetings during which reports, and presentations were given in alignment with our strategic goals by County departments, advocates and stakeholders on SUD related issues, services and programs were provided. The meeting topics included:

### **Re-Energizing Drug Prevention by Investing in Youth Development**

Keith Humphreys, OBE, PhD  
Stanford School of Medicine

### **Report from Substance Abuse Prevention and Control**

Michelle Gibson, MPH  
Deputy Director for Substance Abuse Prevention and Control Bureau  
Brian Hurley, M.D.  
Chief of Clinical Services Los Angeles County Department of Public Health Substance Abuse Prevention and Control Bureau

### **Behavioral Health Administrative Integration and Collaboration Between SAPC and Department of Mental Health**

Dr. Gary Tsai, M.D.  
Director for Substance Abuse Prevention and Control Bureau

### **Youth Prevention and Treatment Initiatives**

Stephanie Chen, LCSW, MPH  
Chief of Prevention Services Los Angeles County Department of Public Health Substance Abuse Prevention and Control Bureau  
Yanira Lima, MPA, MHM  
Chief of Treatment Services Los Angeles County Department of Public Health Substance Abuse Prevention and Control Bureau

### **Health Deputy Roundtable**

Health Deputy – 1<sup>st</sup> District: Jazmine Garcia-Delgadillo  
Health Deputy – 2<sup>nd</sup> District: Victoria Gomez  
Health Deputy – 3<sup>rd</sup> District: Angelica Ayala  
Health Deputy – 5<sup>th</sup> District: Tyler Cash

The Commission also has two active subcommittees that meet every other month. These subcommittees are focused on Education and Prevention and Policy and Planning, and the following topics were discussed and brought to the Commission in 2025:

## **EDUCATION AND PREVENTION COMMITTEE**

- Our SPOT Teen Center  
Mercedes Santoro, Assistant Director of East Agency of Los Angeles County Department of Parks and Recreation
- Prevention Services  
Stephanie Chen, LCSW, MPH, Chief of Prevention Services, Los Angeles County Department of Public Health Substance Abuse Prevention and Control

- Update on Nitazenes  
Brian Hurley, M.D., Chief of Clinical Services Los Angeles County Department of Public Health Substance Abuse Prevention and Control

## **POLICY AND PLANNING COMMITTEE**

- AB 37 (Elhawary) Workforce development: Mental Health Service Providers: Homelessness
- AB 255 (Haney) The Supportive-Recovery Residence Program
- AB 309 (Zbur) Hypodermic Needles and Syringes
- AB 396 (Tangipa) Needle and syringe exchange services
- AB 425 (Davies) Certification of Alcohol and Other Drug Programs
- AB 543 (Gonzalez) Medi-Cal: Street Medicine
- AB 564 (Haney) Cannabis: Excise tax rate increase repeal
- AB 877 (Dixon) Health care coverage: Substance Use disorder residential facilities
- AB 1037 (Elhawary) The Substance Use Disorder (SUD) Modernization Act
- AB 1205 (Muratsuchi) Mental Health Services: Assisted Outpatient Treatment
- AB 1320 (Patterson) California Affordable Drug Manufacturing Act of 2020
- Executive Order (EO) 14321 on “Ending Crime and Disorder on America’s Streets”
- Executive Order (EO) 14332 on “Improving Oversight of Federal Grantmaking”
- Executive Order (EO) 14356 Ensuring Continued Accountability in Federal Hiring
- HR 1 One Big Beautiful Bill Act
- HR 2483 – Support for Patients and Communities Reauthorization Act of 2025
- HR 5371 Continuing Appropriations, Agriculture, Legislative Branch, Military Construction and Veterans Affairs, and Extensions Act, 2026
- HR 5462 “Michelle Go Act”
- HR 6104 – Dark Web Interdiction Act of 2025
- SB 35 (Umberg) Alcohol and Drug Programs
- SB 329 (Blakespear and Umberg) Alcohol and drug recovery or treatment facilities
- SB 395 (Wiener) Alcoholic Beverages Additional Licenses retail district

## COMMISSION RECOMMENDATIONS

The CAOD, as a whole recognizes the lack of residential treatment services for youth in Los Angeles County who have been impacted by substance use and need residential care due to influences in their community of residence and/or educational institutions which make it difficult to cease alcohol or drug use. Youth who have become addicted to alcohol or other drugs need residential treatment services to remove them from the environments that greatly influence their decision making and continued substance use, which with readily available fentanyl laced drugs could be life threatening. Therefore, the CAOD will revise next year's strategic priorities to include a focus on increased access and availability of youth services. The goal of the CAOD will be to collaborate with County partners on increasing youth services across Los Angeles County so that those families and the youth needing care will have a continuum of substance prevention, use, and abuse treatment available.

The Commission also recognizes the need for low barrier admission policies for substance use treatment services and the changing environment of substance use treatment as a whole. Los Angeles County with its rising homeless populations, increased moderate to severe mental health populations and increased deadly drug combinations must be readily able to promote introductions into a helping environment that is welcoming and all-inclusive in generating whole person care even when those being served are not ready for an abstinence-focused model. Medications for Addiction Treatment (MAT) of substance use must be accepted in all facets, including interim housing as a lifesaving method. Harm reduction strategies and trauma informed care are keys to building rapport and success with those individuals still contemplating if substance use/abuse is detrimental to their ability to function in society or an unhealthy means to cope.

The Commission recognizes that it is important to continue to advocate for the unhoused residents of Los Angeles County to have access to treatment, while also creating better opportunities for engagement and providing long-term support.

## COMMISSION ON ALCOHOL AND OTHER DRUGS STRATEGIC PARTNERSHIPS

The Commission maintains a critical and distinct role in Los Angeles County. As advisors to the Board, and advocates for those with SUDs and their families, the Commission often serves as a bridge between the County and its partners, including the County service agencies, law enforcement, courts, philanthropy, the nonprofit sector, and the community. The Commission's experience, expertise and steadfast commitment to at-risk children, youth and adults has contributed to the forging of strong partnerships with some of the most important entities shaping public policy in Los Angeles County.

### **COMMISSIONER REPRESENTATION ON OTHER COUNTY/COMMUNITY BODIES**

Alicia Garoupa	Countywide Prevention and Promotion Coordination Implementation Team (PPCIT) Countywide System of Care Executive Advisory Committee Student Mental Health Policy Workgroup, California Department of Education Tri-Chair, California Mandated Reporting Advisory Committee (MRAC)
Amanda Cowan	Community Advisory Board for IAS PhD Candidate MAT Community Advisory Board Prevention & Education in Communities of Color Grant UCLA- ISAP Community Advisory Board (CAB) for the Clinical Trials Network (CTN) Project
Brian Heyman	Vice President of Vietnam Veterans of America, Chapter 756 in Long Beach  Vice Chair of the Board of Trustees for the Downey Cemetery District
Bruce Boardman	Member of the California Association of Alcohol and Drug Program Executives (CAADPE)
Christina Gonzales	California Association of Alcohol and Drug Program Executives, Inc. California Association of DUI Treatment Programs SAPC Provider Advisory Committee
Howard Winkler	West Coast Vaad Hachessed
Jack Hadjinian	Western Prelacy of the Armenian Apostolic Church of America

Jake Fisher	Greater El Monte Community Hospital – Board of Directors Hispanic American Police Command Officers Association LA, Inc. – Board of Directors
Jerry G. Velasco	Board Chair Mexican American Opportunity Foundation Board Chair San Gabriel Valley Civic Alliance Board Member and Founding Member El Monte Promise Foundation Board Member Greater El Monte Hospital Trustee Member San Gabriel Mosquito Abatement
Jong Ho Song	Queens Care Charitable Foundation Board
Juan Navarro	Juvenile Justice Coordinating Council Board member of the California Association of Alcohol and Drug Program Executives (CAADPE) Board member of the PIH Health – Community Benefit Oversight Committee
Paul Cheng	Councilmember City of Arcadia
Ruben Rodriguez	Cesar Chavez Commemorative Committee - SFV
Tonya McKenzie	Black Public Relations Society – Vice President North Redondo Beach Business Association – Past President Redondo Beach Emergency Crisis Council

## LOS ANGELES COUNTY DEPARTMENT OF PUBLIC HEALTH SUBSTANCE ABUSE PREVENTION AND CONTROL

### 2025 Milestones and Highlights:

#### Prevention – Media Campaigns

Media campaign program evaluation data are currently being analyzed. Final evaluation results will be ready in 2026 and will be shared at a later date.

#### Prevention – Investments

Prevention services are key to preventing or delaying initiation of alcohol and other drug use by young people and creating advocacy opportunities to reduce the impact of alcohol/cannabis outlets on communities. Therefore, SAPC increased funding commitments to SUD prevention services by maximizing available federal dollars. Since 2017, the prevention services budget increased by 260% to expand primary prevention and harm reduction activities such as launching 43 Student Wellbeing Centers at high schools; training 300 student peer advocates on how to administer naloxone; expanding Connecting to Opportunities for Recovery and Engagement at Public Health Centers to educate community members on substance use services; launching media campaigns on core substance related topics; growing positive youth development programs; and supporting coalition-building initiatives in addressing consumer education and awareness, access, availability, and local enforcement issues for both regulated products (i.e. alcohol) and unregulated products (i.e. delta-8 THC).

#### Prevention – Community Outreach

Community engagement events are an integral component of SAPC's ongoing efforts to increase public awareness and understanding that SUDs are chronic, treatable health conditions, and that seeking care is both encouraged and supported. SAPC demonstrates this commitment through multiple large-scale outreach activities, including the annual **AI-Impics**, during National Recovery month, which unites individuals in recovery, their families, treatment providers, community leaders, and SAPC representatives to celebrate recovery through sports competition and artistic expression. SAPC also serves as a sponsor of the **Shatterproof Walk to End Addiction Stigma** in Los Angeles, bringing together staff, SUD provider networks, partners, and community members to promote advocacy, education, and shared commitment to ending stigma surrounding addiction. In addition, SAPC participates in major community outreach events such as the **Taste of Soul Festival** to share SUD education materials about available treatment and prevention services, provide naloxone education and distribution, strengthen service linkages, and increase public visibility of Los Angeles County's continuum of care services and recovery resources. Collectively, these initiatives advance SAPC's mission to reduce the harms associated with substance use and reinforce its message; "**Prevention First, Treatment Works, and Recovery is Possible.**"



### **Prevention – Retail Cannabis**

The local retail cannabis industry is expanding, and County efforts are underway to promote a safer and more regulated market that supports social and economic justice as well as public health and safety. SAPC participated in this effort by advocating to also focus on implementation of strategies that concurrently prevent access by minors, inform community members how to report violations by retailers in the regulated and unregulated market, and acknowledge potential community harms. To support this approach, SAPC has created a series of factsheets that simply articulate [Cannabis Prevention Activities](#), [How to Submit Complaints About Cannabis and Hemp Products](#), [Packaging and Labeling Requirements](#), [How to Read a Cannabis Label](#), [Facts About Delta-8 THC](#), and [How to Respond to Teens](#); SAPC has also conducted community education presentations to speak frankly on the impact of cannabis use and known risks.

### **Prevention – Early Intervention**

Youth (12-17) and Young Adults (18-20) who have initiated alcohol and/or drug use may benefit from Early Intervention Services. To increase access to a full spectrum of services available in outpatient treatment settings to those who do not meet medical necessity for a SUD but are at risk of developing one, SAPC has encouraged contractor providers to increase access to Early Intervention Services and developed a Screener for Youth and Young Adults to assess needs for these services and, in collaboration with Azusa Pacific University, developed the Healthy Youth Early Intervention curriculum to train providers how to implement this level of care with the target population.

### **Harm Reduction – Services**

SAPC continues to prioritize expansion of its harm reduction services to prevent communicable disease transmission and overdose deaths for people who use drugs and deliver public health and SUD services to residents regardless of their individual recovery goals. Over 2025, SAPC increased annual funding from \$5.5 million to \$8.5 million and launched a new solicitation to expand the SAPC-contracted network of Education and Overdose Prevention (EOP) beyond 12 agencies which is currently scheduled for expansion in 2026. Harm reduction services are currently provided in 150 outreach and engagement sites each week. EOP Hub services are a

critical component of Los Angeles County's Harm Reduction Initiative, which (collectively, across all of Los Angeles County contracted harm reduction programs), conducts 150,000 encounters annually, reverses over 10,000 overdoses annually, 500 referrals to substance use treatment annually, and facilitates over 1,000 encounters involving telehealth-provided addiction medication (through Los Angeles County MAT Consultation Line service) each year.

### **Harm Reduction – National and State Leadership**

SAPC is leading harm reduction understanding and expansion across California and nationally, including being involved with developing and as presenters in the now-sunset California Department of Health Care Services' Harm Reduction in SUD Treatment Summits. SAPC was also instrumental in the development and is leading the local dissemination of the American Society of Addiction Medicine's *Engagement and Retention of Nonabstinent Patients in Substance Use Treatment* Clinical Considerations Guidance for Addiction Treatment Providers.

### **Harm Reduction – Reaching the 95%**

National survey data tells us that 95% of people with a SUD either don't want or don't access SUD treatment services and another 4% think they need services, but don't seek it. This means that currently only 1% of people who need services actually connect with care. Therefore, much more needs to be done to attract individuals to care, including increasing funding for the SUD system so SAPC can add more service locations that offer any or all of the full continuum of care inclusive of harm reduction, outpatient, residential and withdrawal management services. It also led to the launch of a new initiative to enable [Reaching the 95% \(R95\)](#) across the network. This required a comprehensive strategy, in partnership with network providers, to determine how to evolve their admission and discharge policies, and train and support staff, to make program modifications necessary to engage those who may not be ready for "treatment as usual". This is a critical effort to reduce the negative impacts of substance use of individuals and families, and to find workable solutions to the overdose crisis. Momentum continues to build as providers begin to implement these strategies at their sites and demonstrate to patients through their words and actions that they are valued and deserving of services that match their preferences whether or not they have current abstinence goals.

### **Better Integrating Treatment and Harm Reduction**

A key R95 initiative that continued through 2025 was better integrating harm reduction and treatment approaches through coordinated engagement of both SAPC's contracted EOP Hubs network and treatment network. SAPC conducted six Harm Reduction & Treatment Integration Meetings throughout 2025 involving both SAPC-contracted EOP Hubs and treatment agencies to discuss better serving people who use drugs in Los Angeles County, and additional R95 trainings designed to minimize barriers and preconditions for admission to SAPC contracted treatment services. In 2025, SAPC also launched its directly operated field-based SUD services team focused on providing consultation and technical assistance to non-SUD outreach programs that serve people experiencing homelessness for the purposes of increasing the reach and accessibility of SAPC treatment services to these populations, consistent with the mission of R95.

### **Treatment – Moving the Specialty SUD System to Value-Based Reimbursement**

SAPC leveraged new opportunities from the Department of Health Care Services (DHCS), California Advancing and Innovating Medi-Cal (CalAIM) in year two of Payment Reform which enabled SAPC to leverage new flexibilities for reimbursement, including creating a three-tiered reimbursement structure to financially reward providers who offer more comprehensive continuums of care and to support the higher infrastructure and operational costs of such systems; and to promote a more diverse clinical direct service workforce in outpatient levels of care, that includes future options to expand access to Medications for Addiction Treatment (MAT) services. SAPC is the first specialty SUD system in the State to move to a value-based reimbursement model and continues to identify solutions to ensure appropriate fiscal accountability and clinical investment after DHCS moved away from cost settlement requirements to ensure that higher rates result in meaningful clinical investments to support positive patient outcomes and the transition to value-based care.

### **Treatment – Capacity Building and Incentives**

SAPC was the first County behavioral health (BH) entity in California to design and implement Capacity Building and Incentives (CB&I) efforts in direct response to DHCS transformations under CalAIM Payment Reform. The maximum investment of \$50 million for the contracted provider network for Fiscal Year (FY) 2023-2024 and up to \$70 million for FY 2024-2025 was made possible through careful fiscal analysis of new Drug Medi-Cal rates and determining how much to raise provider rates to support movement towards parity with the mental health system and improved clinical care and outcomes, and how much could be invested in innovative strategies to motivate contractors to implement new efforts that are directly associated with what SAPC deemed critical to advance the SUD system in an effective and coordinated manner; the broad categories are 1) Workforce Development, 2) Access to Care - [Reaching the 95%](#); and 3) Fiscal and Operational Efficiency. See [SAPC's CB&I Webpage](#) for more information on this effort, including specific projects and resources that can be used as a model for other BH systems. SAPC's CB&I approach received a Recognition Certificate from Los Angeles County's Productivity and Quality Awards Program.

### **Treatment – Performance Metrics**

In partnership with its Provider Advisory Committee, SAPC developed a set of performance metrics in the categories of clinical care (e.g., service expansion, patient perceptions, care coordination, MAT), financial health (e.g., revenue and investment opportunities, payment reform and CBI, productive practitioner time), workforce (e.g., training, recruitment, retention, gaps) and organizational processes (e.g., intake process, discharge process, community reach) with the purpose of preparing SUD contractors for value-based care under CalAIM, and testing the applicability of these metrics in detecting delivery of effective care and promoting improved services for Los Angeles County residents. SAPC recognized that with the movement from cost-based to fee-for-service and ultimately to an outcome-based care reimbursement model in the near future that it is essential to begin these discussions with contractors early, earn their buy-in and gain voluntary participation. Furthermore, it is important to SAPC to be a State-wide SUD

leader and initiate efforts before required to influence the State process and advocate for requirements that align with Los Angeles County priorities.

### **Treatment – Legislation**

Building on the work of the R95 initiative, SAPC gathered feedback from provider and patient advocate stakeholders and drafted AB 1037 (Elhawary) The “SUD Modernization Care Act”, to change outdated requirements in statutes to reflect current evidence-based best practices and increase access to SUD treatment. This is a critical step to reduce stigma against people with SUD and codify language that demonstrates respect for individuals with this chronic health condition through the words we use to describe them and their service needs. This also serves to shift the narrative about these individuals from one of a moral failing to a treatable brain condition. Los Angeles County sponsored AB 1037, which passed out of the State Legislature and was signed into law by the Governor. The majority of the provisions of the law go into effect on January 1, 2026.

After successful passage of the AB 2473 (Nazarian), which was initiated by SAPC to increase SUD training standards from 9 to 80 hours prior to the delivery of the Drug Medi-Cal reimbursable services to align with minimum standards for peer providers. SAPC remains engaged in the implementation process in anticipation of the January 1, 2026, effective date.

### **Treatment – Counselor Workforce**

Recognizing the critical role that SUD counselors play in the delivery of treatment services (approximately 80% counselors, 20% clinicians) and the workforce shortages that plague the Behavioral Health system, SAPC decided to renew its workforce recruitment initiative – Tuition Incentive Program (TIP) – which supports the cost of registration, tuition and education materials to entice individuals to enter the SUD field and become a certified counselor. TIP launched its first ever Spanish language cohort in September 2025 to recruit primarily Spanish speaking individuals in becoming SUD Counselors. Funded through the Care First Community Investment fund, SAPC expanded upon the success of the TIP pilot to support additional SUD workforce development; and partnered with the Tarzana Treatment Center College Certificate Program to implement TIP throughout Los Angeles County. TIP is open to all interested Los Angeles County Residents. SAPC’s TIP effort received a Recognition Certificate from Los Angeles County’s Productivity and Quality Awards Program.

### **Treatment – Medical Clinician Workforce**

The SUD system has historically had few medical doctors delivering care at community-based contractors as the workforce is predominantly (~80%) SUD counselors. Therefore, it has impacted the ability to broad expand access to MAT for individuals with an alcohol and/or opioid use disorder outside of SAPC’s approximately 13 Opioid Treatment Program (OTP) agencies that generally limit MAT prescribing to methadone. To promote onboarding of physicians to expand MAT prescribing at contracted (non-OTP) outpatient and residential sites, SAPC continued the one-time start-up cost sharing initiative to promote the integration

of medical staff into the treatment workforce. As of 2025, 30 contracted agencies are participating in this effort. The provision of addiction medications alongside other behavioral health services, is central to advancing the SUD system and ensuring patients have access to all effective options to treat their condition. Financial investments are central to achieving this objective.

**Treatment – Medi-Cal Peer Support Specialist Program**

Contributing to the provider workforce recruitment efforts, SAPC has continued to invest in the development and growth of Medi-Cal Peer Support Specialists in SUD treatment programs through the Peer Certification Scholarship Program. In 2025, the program is in its sixth cohort, and SAPC awarded scholarships across three cohorts this year, totaling 165 awards (40, 53, and 72, respectively). This year, 29 scholarship recipients successfully completed certification as Medi-Cal Peer Support Specialists. This initiative aims to strengthen the peer support workforce by empowering individuals with lived experience to deliver critical behavioral health services throughout Los Angeles County.

**Treatment – Wraparound Youth Services**

Recognizing that Drug Medi-Cal only covers services for the youth in treatment, and ultimate success is also dependent on the family unit, SAPC launched the Building Relationships, Inspiring Development, Growing Engagement (BRIDGE) program outside of Drug Medi-Cal to fund supportive services to their parents, caregivers, and families. This will ensure that youth are maximally prepared to address their substance use issues, and their loved ones will be prepared and willing to support them in achieving their recovery goals. Additionally, SAPC launched the Reimagining Youth SUD Engagement (RYSE) which includes four pillars: 1) Reimagining Environments for SUD Engagement and Treatment (RESET) which provides funds that support treatment setting improvements and create more engaging, welcoming spaces for youth treatment services. 2) Update the Program (RYSE-UP) which provides funding to SUD youth treatment providers with funding to support program, service, and activity enhancements that increase youth engagement and retention. 3) Field-Based Services (FBS) Enhanced Benefit which provides an additional 10 percent (10%) reimbursement on approved claims to help cover the added cost of delivering youth SUD services through FBS. 4) Youth Listening Sessions which provided an opportunity for SAPC to hear directly from youth and youth treatment providers to guide change.

In 2025, SAPC enhanced and expanded SUD services in the Juvenile halls and camps. Providers at Campus Vernon Kilpatrick, Barry J. Nidorf, and Dorothy Kirby Center increased the number of SUD counselors to address the growing need for SUD treatment services. At Los Padrinos Juvenile Hall, where Client Engagement and Navigation Services (CENS) are presently available, SAPC will provide SUD treatment services beginning 2026. As of December 2025, SAPC expanded SUD services into Camps Afflerbaugh and Rockey by offering screenings, assessments, and Early Intervention services to youth and young adults at the camps. In 2026, SAPC will begin providing additional treatment services at these locations.

### **Treatment – Pregnant and Perinatal Women (PPW) Services**

SAPC implemented the Child-Friendly Environment Funds, which are one-time funds designed to support treatment providers to create and enhance child-friendly spaces (like playrooms, indoor and outdoor play areas, childcare spaces) across PPW treatment and Recovery Bridge Housing (RBH) sites. This program will make up to \$15,000 available for outpatient sites and up to \$25,000 for residential and RBH sites. The program launched in October 2025 and funds must be expended before June 1, 2026.

### **Treatment – Recovery Bridge Housing for Dads**

SAPC initiated Recovery Bridge Housing for fathers with dependent children (RBH-Dads) in April 2025. Like RBH for the pregnant and parenting women (PPW) population, the RBH-Dad's pilot program is designed to provide temporary housing for men who are receiving outpatient SUD treatment with up to five accompanying children (aged 0-16). The program is intended to support families affected by SUD to remain together or, for those with involvement with the Department of Children and Family Services (DCFS), work towards reunification. The goal of the program is to promote both child wellbeing (by facilitating continuity in parent-child relationships) and improve treatment outcomes for parents (who are not forced to choose between accessing a recovery-oriented housing option and living with their children).

Currently, RBH-Dads is being implemented at an eight-bed site in Service Planning Area (SPA) 3, operated by the Grandview Foundation. SAPC is working to expand the program across Los Angeles County and is working to identify potential RBH-Dads sites with six to eight beds in each remaining SPA.

### **Treatment – Field-Based Services**

SAPC promoted expansion of field and street-based SUD services for people who are not interested or able to receive services in traditional treatment settings and increased efforts with other areas of health and social systems to better engage individuals who would benefit from SUD care in those systems. SAPC provided additional funding to provider agencies delivering FBS to cover the additional costs of providing services in the field. Forty-two (42) additional field-based service locations were added in 2025 in school, community centers, housing locations (e.g., interim, permanent, encampments settings) and other settings. Field-based services increase access to SUD care by offering services in the places where people live, learn, work, and engage in recreation and improve opportunities to support patient centered care and the integration of behavioral health.

### **Treatment – Interim Housing Outreach Program**

The Interim Housing Outreach Program (IHOP) allows for the service category of Client Engagement and Navigation Services (CENS) to engage people with potential SUD risk or needs to receive services in interim housing locations. During 2025, CENS have implemented new services under IHOP in all Service Planning Areas and served 537 clients at 103 interim housing locations.

### **Treatment – Bridge Housing Expansion**

During 2025, DPH-SAPC continued to expand Recovery Bridge Housing (RBH) and Recovery Housing (RH) beds with Behavioral Health Bridge Housing (BHBH) and other funding sources, including Opioid Settlement funds. The BHBH funding includes an expansion of an additional 370 Recovery Bridge Housing (RBH) beds, start-up infrastructure funding, the development and introduction of 145 Recovery Housing (RH) beds to SAPC’s continuum of services, and the development and introduction of Housing Navigation to assist all RBH and RH residents in obtaining long-term stable housing, and Participant Assistance Funds, which provides a maximum of \$1,500 per participant to assist with moving costs associated with obtaining permanent housing. Additional beds have been incorporated and operationalized on a rolling basis throughout 2025. Once the expansion is complete, total RBH bed capacity will total approximately 2,000 and RH capacity will be 195 across the County. As of December 2025, DPH-SAPC has a RBH bed capacity of 1,770, with an additional 164 beds undergoing contracting and RH capacity of 147 beds, with an additional 20 beds undergoing contracting. In April 2025, Housing Navigation Services was launched across all 8 Service Planning Areas. Between April through September 30, 2025, 440 individuals were served. Data from October – December have not yet been received.

### **Treatment – Housing, HomeKey+**

On November 26, 2024, the California Department of Housing and Community Development (HCD) released a Notice of Funding Availability (NOFA) to award Behavioral Health Infrastructure Bond Act funds, included under Proposition 1 for the HomeKey+ Program. This funding opportunity will support the development of Permanent Supportive Housing (PSH) for veterans and individuals with mental health or substance use disorders, who are at risk of, or experiencing homelessness.

The NOFA allocated \$599,296,672 for Los Angeles County (\$277,863,641 for Veterans and \$321,433,030 for the General Population). Applications were accepted continuously from January 29, 2025, to May 30, 2025.

DPH-SAPC projects will target individuals who meet the Behavioral Health Services Act homeless or chronic homeless criteria and whose SUD is the primary barrier to independent living. DPH-SAPC is committing \$5 million per year for five years to implement low-barrier recovery-oriented housing (consistent with Housing First principles), including rental subsidies. This funding commitment will support approximately 120 rental subsidies.

In May 2025, the Board of Supervisors approved six Homekey+ projects to be submitted by the Los Angeles Community Development Authority (LACDA), as the lead County agency. Two of the six projects will require SAPC-funded rental subsidies and supportive services, with units dedicated to individuals with an SUD. DPH-SAPC also partnered with the Housing Authority of the City of LA with one project with units dedicated to Transitional Aged Youth with SUD and requiring rental subsidies and SUD supportive services. DPH-SAPC also partnered with the City of Lancaster for one project requiring SUD supportive services only. In addition, one project applied with LACDA for gap funding and SUD supportive services only and was approved by the State on October 13, 2025.

If all applications involving individuals/families with SUD are approved there will be a total of 171 PSH units committed for those with SUD. Of those, DPH-SAPC will be providing rental subsidies for 87 PSH units and SUD supportive services for all 171 PSH units. Rental subsidies and/or SUD supportive services are projected to begin in 2026.

### **Treatment – Administrative Integration**

In partnership with the Department of Mental Health (DMH), SAPC is implementing 11 collaborative efforts outlined under the State’s Behavioral Health Administrative Integration (BHAI), including but not limited to a single 24/7 access line, joint cultural competency plans, joint beneficiary materials and grievance and appeals processes, data sharing – including through Health Information Exchanges (HIEs)- with particular emphasis on federal restrictions on release of SUD patient records (42 CFR Part 2) and the impact on information sharing without consent, and network adequacy reporting. The DMH and SAPC call centers were combined in July 2024 enabling individuals to receive mental health and SUD screenings and referrals via a single call. This effort demonstrates that patients can have an integrated experience even when the specialty SUD and specialty mental health systems are managed under different departments. SAPC and DMH collaborated for the second year to prepare and submit the Integrated Cultural Competence Plan (ICCP) report. This joint effort reflects the ongoing partnership between both departments to strengthen equity, cultural responsiveness, and accessibility across the behavioral health system.

The report highlights a wide range of projects, initiatives, and accomplishments designed to reduce racial, cultural, and linguistic disparities in care. Key areas of focus included enhancing culturally informed service delivery, expanding language access efforts, and advancing workforce training in cultural humility practices. The submission also outlines cross-departmental, and community collaborations aimed at improving service engagement and addressing systemic barriers experienced by underserved populations.

Overall, the ICCP report, demonstrates DMH and SAPC’s continued commitment to provide equitable, culturally responsive, and behavioral health services, supported through coordinated planning and shared accountability.

### **Treatment – Language Access Services**

Over the past year, SND has undertaken comprehensive research and analysis to support the development of a SAPC Language Access Plan (LAP) to strengthen language access support across our provider network. This work aims to ensure that all members receive timely, appropriate Language Access Services (LAS) at no cost, in alignment with state and federal requirements.

These resources are intended to improve provider awareness, streamline workflows, and ensure that all members—regardless of language preference—receive equitable, high-quality care. SAPC has continued with the Value Based Incentive Bilingual Bonus reimbursement program that has been shown to strengthen the provider network’s ability to serve diverse communities while investing in workforce development. Through this initiative, staff who demonstrate proficiency in a certified second language receive financial bonus, reinforcing the value of linguistic skills in service delivery. Participation has grown steadily since the first year with over 20 agencies participating in the program and over 240 staff certified since its inception. This has directly improved communication with clients,

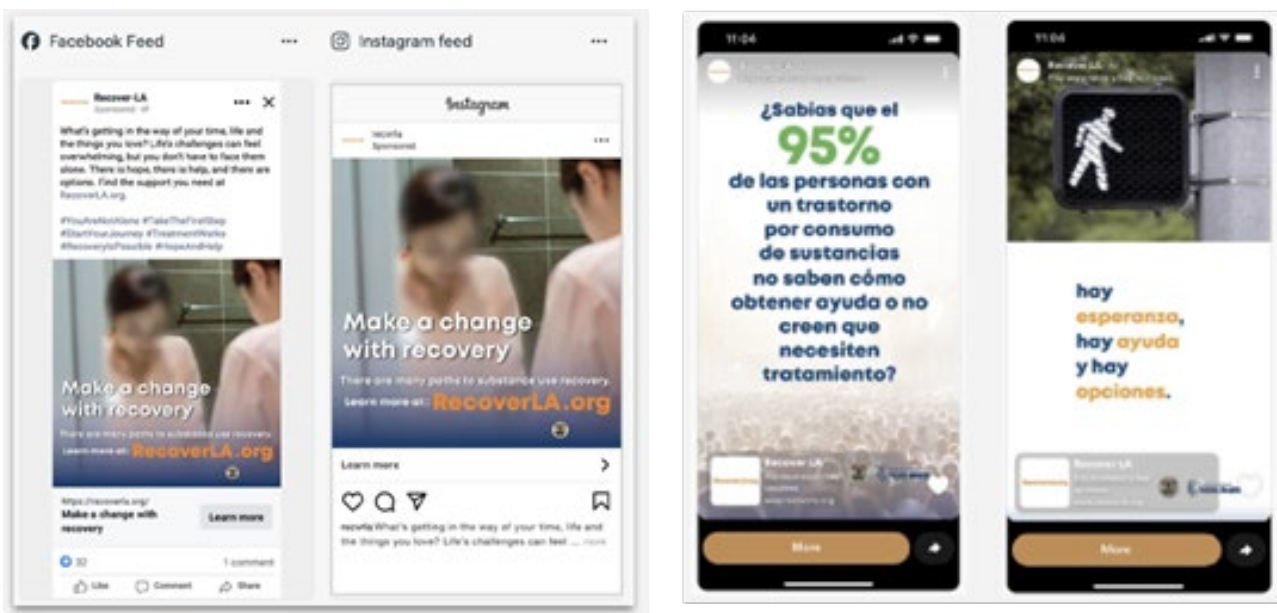
reduced reliance on external interpretation services, and enhanced overall service efficiency.

Overall, SND remains committed to strengthening systemwide language access, supporting provider readiness, and fostering an inclusive, responsive service environment for the diverse communities we serve.

### **Treatment - Reaching the 95% (R95) Social Media Campaign | Digital Engagement**

As part of the Reaching the 95% (R95) Initiative, SAPC launched a targeted social media campaign aimed at reaching LA County residents with substance use disorders who are not currently receiving care. SAPC’s initiative utilized bilingual messaging and directed residents to the [RecoverLA.org](https://RecoverLA.org) platform, raising awareness about treatment options and emphasizing that “*there are many paths to recovery.*”

The marketing objectives were to increase both awareness and engagement with the resources available on [RecoverLA.org](https://RecoverLA.org). To achieve this, the strategy involved rolling out a messaging strategy across various social and digital platforms, including Facebook, Instagram, Reddit, YouTube, TikTok, and Snapchat. Overall, the campaign reached approximately 44% of LA County residents through these digital channels, engaging over 4.5 million unique users across Meta, TikTok, Reddit, and YouTube. From this outreach, more than 11,000 users interacted with the content to learn more about SUD or to find additional information.



This initiative marks a significant change: it aims to expand the system’s reach to those who haven’t yet sought treatment and meeting them where they are, breaking down traditional barriers to receiving SUD treatment, and welcoming them into consider hope and help through the recovery-friendly treatment options that are available to meet their specific needs.

### **Treatment – SAPC Impact Webpage**

[SAPC's website](#) has a new addition, the [Impact Page](#), which highlights SAPC’s powerful influence in transforming people’s lives and creating space for meaningful change in communities and within the SUD system throughout Los Angeles County. The Impact page showcases achievements that SAPC has garnered from 1) innovative payment reform strategies that improve efficiencies across the treatment continuum, to 2) service expansion in our prevention, harm reduction, treatment, and

recovery portfolio, as well as 3) award- winning technology. The Impact page demonstrates the human impact of SAPC’s work and features [Impact Stories- video testimonials](#) from individuals who have accessed SAPC’s system of care and treatment services through the Provider Network. These stories serve as potent reminders of how SAPC touches lives and strengthens communities.



### **Treatment – Partnership with Strides in Recovery**

SAPC established a new partnership this year with Strides in Recovery, the nation’s largest sober running and walking program. This partnership strengthens client and community engagement through physical activity initiatives, organizing year-round running and walking programs to support individuals across Los Angeles County on the path to sobriety. These initiatives improve substance use disorder treatment retention while also adding the physical and mental health benefits of regular exercise and social engagement. Strides in Recovery coordinates over 100 walk/run engagements every month for clients attending substance use treatment within SAPC’s treatment provider network.



### **Treatment – Reaching the 95% (R95) Service Design**

Another Reaching the 95% (R95) Initiative effort included a focus on provider agency Service Design, by supporting agencies with adapting their operations and programs to facilitate a more positive, welcoming, and engaging experience for the individuals they serve. Provider agencies “walked-

through” their treatment process to see where there are areas that can be streamlined or optimized to lower barriers to treatment and improve customer experience. From this client-centered perspective, provider agencies work toward adapting organizational changes that lead to lower barriers to accessing services, better engagement of individuals in services, and treatment retention.

### **Treatment – Martin Luther King, Jr. Behavioral Health Center (MLK BHC)**

Since opening in 2022, the Martin Luther King, Jr. Behavioral Health Center (MLK BHC) has continued to expand its role as a central access point for coordinated behavioral health services in South Los Angeles. The center addresses high community needs—including substance use, mental health conditions, homelessness, and justice involvement—by co-locating integrating mental health, substance use disorder (SUD) treatment, physical health, and supportive services in one location. This structure strengthens the County’s ability to deliver client-centered, whole-person care.

#### **Integration and Cross-Department Collaboration**

Throughout 2025, SAPC strengthened collaboration across multiple County departments operating at the BHC and broader MLK campus—including the Department of Mental Health (DMH), Department of Health Services (DHS), Probation Department, and the Department of Aging and Disabilities (AD). Quarterly meetings with campus-based providers continued to serve as a key mechanism for sharing challenges, successes, operational updates, and opportunities to simplify referral pathways. These efforts improved mutual understanding of available services, increased coordination, and contributed to more seamless client transitions across programs. Since 2024, SUD programs at the BHC have increased referrals to MLK campus partners and community providers by improving access to complementary behavioral health, medical, and social services.

#### **SAPC Program Support and Staffing Expansion**

To enhance oversight, coordination, and integrated care efforts, SAPC expanded staffing for the Integrated Care Team in 2025. Staffing increased from 1.5 full-time equivalents to 4 dedicated team members, significantly strengthening SAPC’s on-site presence at the BHC. The expanded team now provides:

- More frequent provider technical assistance and program monitoring
- Support with referrals and care coordination across BHC departments
- Increased participation in cross-departmental operational workgroups
- On-site troubleshooting to address service delivery barriers in real time
- This enhanced presence has improved responsiveness, strengthened partnerships across the MLK campus, and accelerated the implementation of integrated care strategies. One example of this expanded capacity is SAPC’s collaboration with SUD treatment providers and the MLK Urgent Care Center to establish a process for supporting urgent medication refill needs for residential clients.

#### ***Respite and Recover Center***

##### **Sobering Center (Respite Services)**

The 15-bed Sobering Center provides a low-threshold alternative to emergency departments for individuals experiencing acute intoxication, offering stays under 24 hours focused on stabilization and linkage to care. Between January and November 2025, 1,525 individuals utilized Sobering Center services. Compared to this same period for 2024 (650), utilization was up 135%. In September 2025, the center was designated an Alternate Destination by the County EMS Agency, allowing EMS to transport medically stable intoxicated individuals directly to the Sobering Center. This designation has reduced unnecessary emergency department utilization and improved timely access to SUD

support services.

#### **Withdrawal Management (Recovery Services)**

The 18-bed Withdrawal Management program provides medically supervised detoxification and stabilization for up to 14 days, with extensions as clinically indicated. The program supports transition to residential and outpatient levels of care. From January through November 2025, the program served 517 clients, representing a 14% increase from this same period in 2024 (452).

#### ***Residential Treatment Services***

The 99-bed residential program offers three levels of SUD treatment intensity for individuals experiencing homelessness, co-occurring conditions, or justice involvement. Core services include counseling, medication-assisted treatment (MAT), life skills, case management, and linkage to housing and continuing care. Between January and November 2025, residential programs served 493 clients, an 86% increase compared to January 1 thru November 30, 2024 (265).

#### ***Outpatient and Intensive Outpatient Services***

Outpatient and intensive outpatient programs support more than 150 clients per day and provide a vital step-down level of care for individuals transitioning from residential or withdrawal management services. Services include assessment, counseling, MAT, case management, and aftercare planning. From January–November 2025, outpatient programs served 431 clients, a 34% increase from this period in 2024 (322).

## COMMISSION ON ALCOHOL AND OTHER DRUGS 2025 ACCOMPLISHMENTS

In 2025, the Los Angeles Commission on Alcohol and Other Drugs continued to meet at the Kenneth Hall of Administration with a full meeting schedule, which made significant progress towards addressing our strategic priorities and implementing improvements in support of our mission to improve awareness, education, prevention and treatment to our Los Angeles County residents.

I appreciate our Commissioners for their commitment and work throughout this year, our SAPC County support liaisons, Diana Carranza and Mayra Colunga, and our partnership with DPH SAPC for providing their input, expertise, and guidance on strengthening the quality of services to the communities we serve. Also, outstanding have been our Subcommittees on Policy and Planning, and Education and Prevention, which have informed and educated our efforts and helped us track and impact legislation that affects key issues of interest to our commission. Of particular success, this year our Commissioners continued to support initiatives such as the Rx Safe Med LA Let's Make A Difference (LMD) program, through which a total of 142.2 pounds of medications were collected during the October Rx Take Back Event.

Another success that this commission got to witness was the graduation of 42 at-risk youth, who participated in the Teaching Obedience Respect Courage & Honor (TORCH) program. This program is led by Commissioner Fisher's El Monte Police Department, who are dedicated to rehabilitating at-risk juveniles. Our Commission looks forward to further accomplishments through the collaboration of our other County partners to strengthen our advocacy on various issues which overlap with our purpose and mission including the Los Angeles County Commissions on Mental Health in our mutual effort to improve the quality of life for our Los Angeles County communities.

Thank you for the opportunity to serve.

Tonya McKenzie