



Quick Reference Secretarial & Clerical Handbook

Lisa H. Wong, Psy.D.
Director

November 2024



LOS ANGELES COUNTY
DEPARTMENT OF
MENTAL HEALTH
hope. recovery. wellbeing.

LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
OFFICE OF THE DIRECTOR

November 6, 2024

TO: DMH Secretarial/Clerical Support Staff

FROM: Aracely Kubota
Executive Secretary

SUBJECT: **“QUICK REFERENCE” SECRETARIAL AND CLERICAL HANDBOOK**

This “Quick Reference” Secretarial and Clerical Handbook was developed to provide easy, ready-reference guidance for preparing departmental correspondence. It establishes the standard secretarial and clerical procedures used by our department. Adherence to this handbook will ensure that all correspondence leaving the department will be handled in a uniform, consistent, and organized manner.

Your correspondence, personal contacts, and telephone usage represent the Department of Mental Health (DMH). Therefore, setup is very important in a business letter/memo. It is a noticeable feature of a letter/memo and can interest or prejudice a reader at a glance. Lopsided letters, top-heavy letters, letters running off the bottom of pages, misspelled words, or typographical errors, all are a sign of inefficiency and reflect on the merits of the senders. If an ill-balanced letter is received, it suggests that all other services offered by the sender might be as carelessly constructed.

No matter how busy you are, take a moment to review your correspondence. Proofread the finished product. Always remember, if you are not pleased or satisfied with the finished product, other people will feel likewise.

If you have questions regarding the contents of this handbook, do not hesitate to contact your division management secretary or one of the senior management secretaries in the leadership team. This handbook will be updated as necessary.

AK

Noted and Approved:



Lisa H. Wong, Psy.D.
Director

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LACDMH LEADERSHIP TEAM

Office/Program	Name	Title	Secretary	Phone
Office of the Director	Lisa H. Wong, Psy.D.	Director	Aracely Kubota	(213) 947-6620
Office of the Chief Deputy Director	Rimmi Hundal, M.A.	Chief Deputy Director	Thao Do	(213) 738-4602
Office of the Medical Officer	Curley L. Bonds, M.D.	Chief Medical Officer	Judith Leal	(213) 738-4613
Administration	Kimberly Nall	Administrative Deputy	Amanda Duran (Actg.)	(213) 947-6682
Administration Services & Capitol Projects	Damien Parker	Chief, Admin. Support Bureau	Shawn Williams	(213) 943-8617
Alternative Crisis Response	Miriam Brown, LCSW	Deputy Director	Ana Williams	(213) 947-6705
Board Liaison	Crystal Kibby	Executive Assistant	N/A	
Chief Information Office	Mark Cheng	Chief Information Officer	Judy Huynh	(213) 943-8012
Chief of Nursing	Stacy Williams, RN, MHA	Chief of Nursing,	Belinda Caldera	(213) 349-7906
Chief of Peer Services	Tonica Robinson, DBH, LL.M.	Chief of Peer Services	Roxanne Pitts	(213) 948-2048
Chief of Psychiatry	Vacant			
Chief of Psychology	Jorge Partida Del Toro, Psy.D.	Chief of Psychology, MH	N/A	
Chief of Staff	Patty Choi, Esq.	Chief of Staff	Thelisa Nunley	(213) 947-6641
Chief of Social Services	Vacant	Chief of Social Services	N/A	
Child and TAY Outpatient	Vacant	Deputy Director	Vacant	
Child Welfare	Anabel Rodriguez, LCSW	Deputy Director	Maria Barakos	(213) 943-9658
Contract Management & Monitoring Div.	Joo Yoon	Acting Deputy Director	Ebony Loot	(213) 943-8665
Contracts Administration	Stella Krikorian,	Admin. Services Division Manager	Andrew Mihaila	(213) 943-9158
Countywide Engagement	La Tina Jackson, LCSW	Deputy Director	Colleen Castro	(818) 610-6707
Financial Services	Sara Lee Dato	Chief Financial Officer	Maria Ponce	(213) 947-6365
Health Access and Integration	Jaclyn Baucum	Senior Deputy Director	Sylvia Santa Cruz	(213) 947-6686
Housing and Job Development Division	Maria Funk, Ph.D.	Deputy Director	Hellen Tanudjaja	(213) 947-6965
Human Resources	Stanley Yen	Human Resources Manager	Fleur Sirakian	(213) 705-4174
Managed Care Operations	Vacant	Deputy Director	Vacant	
Mental Health Commission	Kenia Fuentes, MPH	Executive Assistant, MHC	Vacant	
MHSA Administration and Oversight	Kalene Gilbert, LCSW	Program Manager IV	Alicia Avelar	(213) 943-8224
Outpatient Care Services (OCS)	Theion Perkins, RN, BSN, MSN	Senior Deputy Director	Thao Do	(213) 738-4602
OCS - North County, Service Areas 1-4	Jesus Romero, Jr., LCSW, MPA	Program Manager IV	La Sonne Jackson	(213) 947-6509
OCS - South County, Service Areas 5-8	Carrie Esparza, Psy.D.	Program Manager IV	Christine Au	(213) 947-6588
Pharmacy and Laboratory	Susana Sou, Pharm.D., APH, MHA, BCPS	Pharmacy Services Chief	Hermelinda Romo-Salas	(213) 943-8860
Prevention	Robert Byrd, Psy.D.	Deputy Director	Nicole Robinson	(213) 943-9426
Prevention and Child Wellbeing Services	Mary Barraza, LCSW	Senior Deputy Director	Cherilyn Cody	(213) 947-6680
Public Guardian	James Kwon	Deputy Director	Camille Mihaffie	(213) 947-6627
Public Information Office	Karen Zarsadias-Ige	Communications Manager	Ebony Campbell	(213) 947-6594
Re-Entry Division	Connie D. Draxler, M.P.A.	Senior Deputy Director	Laura Mendoza	(213) 947-6885
Risk Management and Compliance	Venezia Mojarro	Chief, MH Programs Evaluation	Alma Jimenez	(213) 943-9515

LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
GUIDELINES FOR CORRESPONDENCE PREPARATION

The following basic guidelines apply to all correspondence prepared (written and edited) in the Department of Mental Health (DMH) -- whether regular letters, Board letters, memoranda (memos), etc.

GENERAL

Paper

All correspondence addressed to someone outside the department should be on DMH letterhead stationery for the first page and plain white paper of similar quality for the second and succeeding pages. This includes memos and letters to other County departments, other governmental agencies, private companies, and members of the general public, as well as formal letters to departmental employees (e.g., disciplinary or commendation letters). For County departments, a memorandum format on DMH letterhead is appropriate.

Use plain white paper for all internal DMH memos. Include the name of the section on the top of the page and centered. (Sample A)

Type Style

Block Style – All lines begin at the left margin. Nothing is indented except for displayed quotations, tables, and similar material.

Font Style

All memos/letters should be in Arial Font, 12-point type, except for the filename, which should be in 8-point type.

Margins

Correspondence should have a well-balanced appearance, much like a picture in a frame. Left and right margins should be of near equal width, not less than the standard one-inch wide. All correspondence should be right margin justified. If a letter turns out noticeably off-balance, please correct it.

Guidelines For Correspondence Preparation (cont'd)

Leave a bottom margin of at least 6 lines (one inch). If the letter requires more than one page, the bottom margin on the first page can be increased up to 12 lines (2 inches).

Spacing

All DMH correspondence is to be single spaced, with double spacing between paragraphs unless a format indicates otherwise. A minimum of two lines is required before continuing a paragraph to a succeeding page. A continued paragraph on a succeeding page also requires a minimum of two lines; therefore, a four-line paragraph is the shortest paragraph that may be divided between two pages.

Date

The date consists of the name of the month (written in full—never abbreviated or represented by figures), the day (written in figures and followed by a comma), and the complete year. For example: January 1, 2024, not 1/1/24.

Place the date at the left margin, on the third line below the letterhead, or position it approximately two inches from the top of the page.

Inside Address

Block style, flush with the left margin. Make the lines of the address as nearly equal as possible. Try to keep the address to a maximum of five lines, preferably four. Punctuation should not be used at the end of any line in the address block except after permissible abbreviations (i.e., Inc., Co., or Corp.). The symbol on ampersand (&) is permissible only when the department/firm itself uses it.

Always use “Mr.” or “Ms.” before a personal name unless another title is applicable, i.e., “Reverend” or “Honorable.”

Spell out such words as Street, Avenue, and Boulevard. When using two-letter state abbreviations, type them in capital letters (i.e., CA) with no periods after or space between the letters.

If letter will be sent via email, indicate the recipient’s email address on the left side of the letter. (Sample E-1)

Attention Line

We are eliminating the use of “Attention” lines whenever possible. It is simpler to type the name of the person or department above the company name and omit the attention line. However, if an “Attention” line is unavoidable, do not abbreviate the word “Attention.”

Guidelines For Correspondence Preparation (cont'd)

Type it two lines below the address line, even with the left margin (example: Attention: Mr. John Doe). The "Attention" line may be typed in capital and small letters or in all-capital letters.

Attention line on a memo is typed two lines underneath the name/title of the person the memo is addressed to -- not to the left of the margin. (Sample A)

Salutation

Type the salutation, beginning at the left margin, on the second line below the attention line (if used) or on the second line below the inside address. Follow the salutation with a colon unless you are typing a social letter.

Subject

The subject line briefly identifies the main idea of the text of the letter (or the message). Most letters should include a subject line. The subject line appears between the salutation and the body of the letter. It should be centered (for special emphasis), all-capital letters, and **bold printed** two lines below the salutation and should not consist of more than four lines. (Sample E)

All DMH memos must include a subject line. It should be typed two lines below the name and title of the person sending the memo and should be left justification only. (Sample A)

Body of the Letter

Begin the text on the second line below the subject line or on the second line below the salutation. Block style with single spacing and double spacing between paragraphs.

Spell out dates in the body of the letter. For example: January 1, 2025, not 1/1/25.

Body of the Memo

Begin the text on the third line below the subject line. Block style with single spacing and double spacing between paragraphs.

Headings/Subheadings

Headings/subheadings should be underlined and bold printed.

Header – Second and Succeeding Pages

Type name of addressee one inch (line 7) from top of the page, the date on the second line, and the page number on the third line. Resume the body of the letter three lines below this. (Sample D, Page 2)

Complimentary Closing

Type the complimentary closing two lines below the last line of the letter, flush with the left margin. The accepted closing for DMH letter is “Sincerely,”. Closing for Board letter only is “Respectfully submitted,”.

Note: Never carry only the signature over to the second page of a letter. There must always be two or three lines of writing on the second page to connect the signature with the letter. Attempt to carry the entire last paragraph over if it is very short. This gives a good balance and a nice finish to a letter.

Signature and Title

For correspondence signed by the Director, type his/her name (in initial caps) four lines below the complimentary closing; type his/her title on the next line. Only the Chief Deputy Director can sign correspondence for the Director.

Initials

Initials should be typed two lines below the last line of the signature block, flush with the left margin. The first set of the initials should always be the sender's and followed by the senior manager's and/or staff person's initials, in capital letters, with a colon between each set, and followed by the typist's initials in lower case. ***Do not exceed four sets of initials.***

Enclosures and Attachments

When an enclosure or attachment accompanies correspondence, the word “Enclosure” or “Attachment” is to be typed two lines below the identifying initials, flush with the left margin. If space is very limited, it is acceptable to type the “Attachment” or “Enclosure” on the following line below the identifying initials.

Note: Before sending the letter/memo, make sure that the number of Attachment(s) or Enclosure(s) cited in the body of the letter agrees with the number of items that are actually enclosed.

Copy Transmittal – c's and bc's

The initial for copies followed by a colon (“c:”) is to be typed in lower case, two lines below the initials (or following Enclosure/Attachment, if applicable) flush with the left margin. Show the names of individuals and their departments or firms who are to receive copies (as specified by the senior manager). All correspondence signed by a Senior Deputy Director or Deputy Director should show “c:” to the Director, Chief Deputy Director, and, as appropriate, other respective manager(s).

If several persons are to receive copies, list the names according to the rank of the persons or in alphabetical order.

Copies to Executive Team should be limited to Board Motions, letters to contractors, and sensitive issues. Do not copy the Executive Team on routine format letters/memos. For example, if the letter or memo has to do with Adult Services, you should “bc” the manager of the Service Area. DO NOT include “bc” on the original memo/letter; indicate on the file copy only for reference.

bc: (the name of the person who wrote memo/letter)
(any other person your supervisor wants to get a copy of the memo/letter)

Confidential Correspondence

When preparing a confidential memo or letter, please put **CONFIDENTIAL** on the first page (at the top, centered, bolded, capitalized, and underlined) (Samples B & F). Confidential information should always be placed in an envelope marked Confidential.

Confidential Patient Information

When there is written communication concerning a patient, the words **CONFIDENTIAL PATIENT INFORMATION** must be placed at the top of memo or letter. (Sample C)

Envelopes

DMH envelopes, with a printed return address on the upper left corner, are used for correspondence being sent by U.S. Mail only.

Manila (yellow) envelopes should be used for correspondence being sent to other County departments.

Always use single spacing and block each line at the left.

BOARD OF SUPERVISORS

Memos responding to a Board order should be copied as follows:

c: Chief Executive Officer
Executive Officer, Board of Supervisors
County Counsel

The Auditor-Controller should be copied on memos concerning fiscal issues only.

When information is requested by a Supervisor, the response to the Supervisor should be prepared for the Director's signature.

When addressing individual Supervisor, please use one of the following (where applicable):

TO: Supervisor Hilda L. Solis
First District

Supervisor Holly J. Mitchell
Second District

Supervisor Lindsey P. Horvath
Third District

Supervisor Janice Hahn
Fourth District

Supervisor Kathryn Barger
Fifth District

Goldenrod Memos to Board

For facility relocation (Sample H) and for new facility (Sample H-1).

Board Motion

The motion should always be double-spaced. (Sample I)

Please note the action at the lower right corner of the motion. The action block should always be on the first page. The names of the **Supervisors are listed in District order with the current Chair or Chairman of the Board listed last.**

If the Motion exceeds one page, "- MORE -" should be typed just above the action block and centered on the page. The Motion then should be continued on a second page. The symbol # # # # # should be typed at the end of the motion.

CORRESPONDENCE SUBMITTED FOR SIGNATURE

Correspondence should be assembled for signature in the following order:

- (a) Clearance Slip (Sample J)
- (b) Original
- (c) Enclosure(s) or Attachment(s)
- (d) Any pertinent background material, i.e., initiating correspondence

The senior secretary in your division/unit must review all outgoing correspondence before it is signed and/or processed.

Submission of Correspondence for Signature

1. All correspondence should be accompanied with a clearance slip or a cover letter (when appropriate)—in a folder.

The clearance slip will indicate who the originator is, who should see the correspondence before it is signed, and who should get the correspondence back once it has been signed (with a phone number included).

2. Any background material should be attached to the inside left side of the folder. Please include originating documents (if any).
3. Work should be planned so that items will rarely fall into the “Rush” category.
4. When the correspondence is signed, the original will be returned to the division/unit secretary for immediate handling (copying, distribution, mailing/ delivery).

All copies should be made from the signed original. **NO COPIES ARE TO BE STAMPED “ORIGINAL SIGNED.”**

5. Copies of the signed original and attachments, if appropriate, should be given to the appropriate persons as soon as possible.
6. If you are given an assignment by a manager but the response memo or letter is signed by you, the manager originating the assignment must receive a copy of the response memo or letter. If the response is verbally communicated, a written statement as to the action taken should accompany the back-up documentation (if applicable) and the originating document.

LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH

NAME OF DIVISION

Month #, ####

TO: Name
Title
Division (if not from the same division)

ATTENTION: Name

FROM: Name
Title

SUBJECT: **PREPARATION OF INTEROFFICE MEMO**
(USE ALIGN LEFT JUSTIFICATION ONLY—NOT FULL)

This memo serves as an example of an interoffice memo. Please note that these memos are to be done on plain white paper. (Note: You are to indicate on top and centered (in bold print) where the memo is coming from, example: **OFFICE OF THE DIRECTOR.**)

Format

- Top margin one inch or 7 lines down from the top of page.
- Minimum one inch bottom and left/right margins.
- Block format – All information flush to the left margin with the exception of indented material.
- Subject line should be capitalized and **bold** printed.
- Begin typing the message on the third line below the subject.
- The header for the second and succeeding pages is as follows:
 - Who the memo is to (not necessary to include position)
 - Current Date
 - Page Number

Your cooperation is appreciated.

XX:xx

LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH

NAME OF DIVISION

CONFIDENTIAL

Month #, ####

TO: Name
Title
Division (if not from the same division)

FROM: Name
Title

SUBJECT: **PREPARATION OF INTEROFFICE CONFIDENTIAL MEMO**
(USE ALIGN LEFT JUSTIFICATION ONLY—NOT FULL)

This memo serves as an example of an interoffice memo. Please note that these memos are to be done on plain white paper. (Note: You are to indicate on top and centered (in bold print) where the memo is coming from, example: **OFFICE OF THE DIRECTOR.**)

Format

- Top margin one inch or 7 lines down from the top of page.
- Minimum one inch bottom and left/right margins.
- Block format – All information flush to the left margin with the exception of indented material.
- Subject line should be capitalized and **bold** printed.
- Begin typing the message on the third line below the subject.
- The header for the second and succeeding pages is as follows:
 - Who the memo is to (not necessary to include position)
 - Current Date
 - Page Number

Your cooperation is appreciated.

XX:xx

LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH

NAME OF DIVISION

CONFIDENTIAL PATIENT INFORMATION

Month #, ####

TO: Name, Discipline
Title
Division

FROM: Name, Discipline
Title
Division

SUBJECT: **CONFIDENTIAL PATIENT INFORMATION MEMO**
(USE ALIGN LEFT JUSTIFICATION ONLY—NOT FULL)

This memo serves as an example of a Confidential Patient Information. Please note that these memos are to be done on plain white paper. (Note: You are to indicate on top and centered (in bold print) where the memo is coming from, example: **OFFICE OF THE DIRECTOR.**)

Format

- Top margin one inch or 7 lines down from the top of page.
- Minimum one inch bottom and left/right margins.
- Block format – All information flush to the left margin with the exception of indented material.
- Subject line should be capitalized and **bold** printed.
- Begin typing the message on the third line below the subject.
- The header for the second and succeeding pages is as follows:
 - Who the memo is to (not necessary to include position)
 - Current Date
 - Page Number

XX:xx

Attachment (if applicable)

c: Name, Discipline



DEPARTMENT OF MENTAL HEALTH

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LISA H. WONG, Psy.D.
Director

Curley L. Bonds, M.D.
Chief Medical Officer

Rimmi Hundal, M.A.
Chief Deputy Director

SAMPLE D
County Department
Memo Format

Month #, ####

TO: County Departments Other Than DMH

FROM: Name, Discipline
Title

SUBJECT: **SAMPLE MEMO TO OTHER COUNTY DEPARTMENTS**
(USE ALIGN LEFT JUSTIFICATION ONLY—NOT FULL)

This memo serves as an example of the format to be used for all memos addressed to someone outside of the Department of Mental Health, i.e., Board members, Board staff, and other County departments/agencies.

Format

- Use DMH letterhead.
- Begin date on the third line below the last line on the letterhead; one inch top margin on the second and succeeding pages.
- Minimum one inch bottom and left/right margins.
- Block format – All information flush to the left margin with the exception of indented material.
- Subject line should be capitalized and **bold** printed.
- The header for second and succeeding pages is as follows:
 - Who the memo is to
 - Current Date
 - Page Number

Name
Month #, ####
Page 2

Items to Remember

- The word “County” when referring to the County of Los Angeles or any other specific county should always be initial cap and “State” when referring to the State of California or any other specific state. The word “federal” is not capitalized.
- If a memo is of a confidential nature, type the word CONFIDENTIAL in all-capital letters (**bold** and underscoring for special emphasis) and centered. Example is as follows:

CONFIDENTIAL or **C O N F I D E N T I A L**

XX:xx

Attachment (if applicable)

c: (if applicable)



DEPARTMENT OF MENTAL HEALTH

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Director

Curley L. Bonds, M.D.
Chief Medical Officer

Rimmi Hundal, M.A.
Chief Deputy Director

Month #, ####

Ms. or Mr. (spell out person's name)
Put title here if it does not fit on first line
Name of company if applicable
Address
City, State Zip

Dear Ms. or Mr.:

SUBJECT

This is the format to be used for letters to other government agencies (other than County departments), private companies, and members of the general public, as well as formal letters to department employees (e.g., disciplinary letters).

Format

- Use DMH letterhead.
- Begin date on the third line below the last line on the letterhead; one inch top margin on the second and succeeding pages.
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- Subject line should be centered, capitalized and **bold** printed.
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Name
Date #, ####
Page 2

Items to Remember:

- Standard closing is “Sincerely,”
- For correspondence signed by the Director, his/her name (in initial caps) four lines below the complimentary close; type his/her title on the next line. Only the Chief Deputy Director can sign correspondence for the Director.

Sincerely,

Name, Discipline
Title

XX:xx

Attachments (if applicable)

c: (Specify after their name where they are from. For example: John Doe, Beaches and Harbors. Also, if your supervisor wants you to c: someone from DMH, put their name and indicate they are from DMH [if applicable]). (Sample C)



DEPARTMENT OF MENTAL HEALTH

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Director

Curley L. Bonds, M.D.
Chief Medical Officer

Rimmi Hundal, M.A.
Chief Deputy Director

Month #, ####

[Send via email](#)
abc@def.gmail.com

Ms. or Mr. (spell out person's name)
Put title here if it does not fit on first line
Name of company if applicable
Address
City, State Zip

Dear Ms. or Mr.:

SUBJECT

This is the format to be used for letters to other government agencies (other than County departments), private companies, and members of the general public, as well as formal letters to department employees (e.g., disciplinary letters).

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Month #, ####
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Sincerely,

Name, Discipline
Title

XX:xx

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c: (Specify after their name where they are from. For example: John Doe, Beaches and Harbors. Also, if your supervisor wants you to c: someone from DMH, put their name and indicate they are from DMH [if applicable]). (Sample C)



DEPARTMENT OF MENTAL HEALTH

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LISA H. WONG, Psy.D.
Director

Curley L. Bonds, M.D.
Chief Medical Officer

Rimmi Hundal, M.A.
Chief Deputy Director

CONFIDENTIAL

Month #, ####

Ms. or Mr. (spell out person's name)
Put title here if it does not fit on first line
Name of company if applicable
Address
City, State Zip

Dear Ms. or Mr.:

SUBJECT

This is the format to be used for letters to other government agencies (other than County departments), private companies, and members of the general public, as well as formal letters to department employees (e.g., disciplinary letters).

Format

- Use DMH letterhead.
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Name
Month #, ####
Page 2

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- For correspondence signed by the Director, his/her name (in initial caps) four lines below the complimentary close; type his/her title on the next line. Only the Chief Deputy Directors can sign correspondence for the Director.

Sincerely,

Name, Discipline
Title

XX:xx

Attachments (if applicable)

c: (Specify after their name where they are from. For example: John Doe, Beaches and Harbors. Also, if your supervisor wants you to c: someone from DMH, put their name and indicate they are from DMH [if applicable]. [Sample C])



DEPARTMENT OF MENTAL HEALTH

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LISA H. WONG, Psy.D.
Director

SAMPLE G
Memo to
Board of Supervisors

Curley L. Bonds, M.D.
Chief Medical Officer

Rimmi Hundal, M.A.
Chief Deputy Director

Month #, ####

TO: Supervisor Lindsey P. Horvath, Chair
Supervisor Hilda L. Solis
Supervisor Holly J. Mitchell
Supervisor Janice Hahn
Supervisor Kathryn Barger

FROM: Lisa H. Wong, Psy.D.
Director

SUBJECT: **SAMPLE MEMO TO THE BOARD OF SUPERVISORS**
(USE ALIGN LEFT JUSTIFICATION ONLY—NOT FULL)

This memo serves as an example of a memo to the Board of Supervisors. Please note that these memos are to be done on plain white paper.

Format

- Use DMH letterhead.
- Begin date on the third line below the last line on the letterhead; one inch top margin on the second and succeeding pages.
- Minimum one inch bottom and left/right margins.
- Block format – All information to the left margin with the exception of indented material.
- Subject line should be capitalized and **bold** printed.
- The header for second and succeeding pages is:
 - Each Supervisor
 - Current Date
 - Page Number

Each Supervisor
Month #, ####
Page 2

Never carry only the signature over to the second page of a letter. There must be two or more lines of writing on the second page to connect the signature with the letter. Attempt to carry the entire last paragraph over if it is very short. This gives a good balance and a nice finish to a letter.

LHW:XX:xx

c: Executive Office, Board of Supervisors
Chief Executive Office
County Counsel



DEPARTMENT OF MENTAL HEALTH

hope. recovery. wellbeing.

LISA H. WONG, Psy.D.
Director

Curley L. Bonds, M.D.
Chief Medical Officer

Rimmi Hundal, M.A.
Chief Deputy Director

SAMPLE H
Goldenrod Memo
Facility Relocation

Month #, ####

TO: Supervisor [Name]
XXX District

FROM: Lisa H. Wong, Psy.D.
Director

**SUBJECT: NOTICE OF DEPARTMENT CLIENT ORIENTED FACILITY RELOCATION
WITH POTENTIAL CITY IMPACT**

The following department facility relocation is proposed to be initiated, or will undergo change, and may impact one or more cities within your District:

Name of Agency / Department:			
Department Contact:		Contact's phone #	
Headquarters office address:			
Current program address:			
Address program moved from:			
Address program is considering moving to:			
Timeframe or date of move:		Distance from old address:	
Max. contract amount (MCA) (for contract agencies only)		Contract allocation for facility:	
Name of program to be moved:			
Population to be served: (Specify age group / spec. populations)			
List services that will be provided:			

Supervisor [Name]
 Month #, ####
 Page 2

List services that were already being provided at this location:			
Number of staff:		Number of clients to be served:	
Zoned for:		Office hours:	

Summary of site improvements, i.e., renovation, new construction (include start and finish dates):		
Type of improvement:	Start date:	Finish date:
Type of improvement:	Start date:	Finish date:
Type of improvement:	Start date:	Finish date:
Type of improvement:	Start date:	Finish date:
Type of improvement:	Start date:	Finish date:

Description of surrounding 100-yard area (including specific neighborhood information):

Parking available:	Y <input type="checkbox"/> N <input type="checkbox"/>	Special Permits/Licensing:	
Number of spaces			
Secured parking:	Y <input type="checkbox"/> N <input type="checkbox"/>		

Assessment of potential impact:

Description of any contact, support or input from local community leaders, local governments or elected officials including any departmental community outreach/assessment or buy in (if applicable):

Supervisor [Name]
Month #, ####
Page 2

Distance to public transportation and accessibility:

ADDITIONAL/SUPPLEMENTAL INFORMATION
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Description of land use review, e.g., specific zoning information and restrictions:

Description of previous use of the facility and proposed changes to the previous use:

Description of anticipated program volume and frequency of client visitation:

LHW:XX:xx

c: Mental Health Deputy
Service Area Chief



DEPARTMENT OF MENTAL HEALTH

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LISA H. WONG, Psy.D.
Director

Curley L. Bonds, M.D.
Chief Medical Officer

Rimmi Hundal, M.A.
Chief Deputy Director

Month #, ####

TO: Supervisor [Name]
XXX District

FROM: Lisa H. Wong, Psy.D.
Director

SUBJECT: NOTICE OF DEPARTMENT ACTIVITY WITH POTENTIAL CITY IMPACT

The following Department project is proposed to be initiated, or will undergo change, and may impact one or more cities within your District:

Department Contact Information	Name	Name of Manager, etc.	Telephone	
	Email	XXX@dmh.lacounty.gov	Fax	
Impacted City or Cities		(List of cities)		
Description of Project Additional Information Attached? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
Description of Potential Impact Additional Information Attached? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
Exact Location(s) (if applicable)				

Supervisor [Name]
Month #, ####
Page 2

Description of Prior Contact(s) with City or Cities	
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LHW:XX:xx

c: Mental Health Deputy
Service Area Chief

MOTION FOR SUPERVISOR_____

Specified health care providers are mandated to report suspected child abuse. This includes circumstances where the provider has reason to believe that unlawful sexual intercourse occurred between a minor female and an adult male. Very few reports of suspected child abuse are made, based on this provision, despite continued sexually transmitted diseases and pregnancies among young teenage girls.

In order to reduce the incidents of underage females having sex with adult males and to increase the number of adult males arrested for such statutory rape, we must seek to strengthen the suspected child abuse reporting mechanisms.

Two bills in the California legislature seek to address this issue, Assembly Bill (AB) 390 (Mountjoy) and Senate Bill (SB) 250 (Battin).

- MORE -

Solis	_____
Mitchell	_____
Horvath	_____
Hahn	_____
Barger	_____

(NOTE: Chair(man) of the Board is listed last)

THEREFORE, I MOVE THAT THIS BOARD:

1. Instruct the Director of Health Services to report back in 30 days on ways to improve training of providers, including providers under contract with the County, on existing statutory requirements for reporting suspected child abuse, and
2. Instruct the Director of Health Services, Chief Executive Officer, and County Counsel to review proposed legislation on this issue, including AB 930 and SB 250, and report back to the Board in 30 days with recommended positions on these bills, including recommended amendments, and to recommend legislative ways to strengthen child abuse reporting for illegal sexual acts between adult men and teenage girls.

#####

XXX:XXX:XXX:xx
(date)

CLEARANCE SLIP

Division/Program Name

Date: Monday, September 16, 2024

SIGNATURE REQUIRED <small>(Please check one)</small>
<input type="checkbox"/> <u>Lisa H. Wong, Psy.D.</u>
<input type="checkbox"/> <u>Rimmi Hundal, M.A.</u>
<input type="checkbox"/> <u>Curley L. Bonds, M.D.</u>

DISTRIBUTION <small>(Please process and provide)</small>
<u>Aracely Kubota</u> <u>Hard copy + PDF file</u>
<u>Thao Do</u> <u>Hard copy + PDF file</u>
<u>Judith Leal</u> <u>Hard copy + PDF file</u>

URGENT

Requested return date: _____

Contact: 1st _____ 2nd _____
Full Name Full Name

From: _____

<small>Title</small>	<small>Name</small>	<small>Initials</small>
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Subject

Executive Team Secretaries Only

DATE RECEIVED: _____

DATE SIGNED: VERIFIED BY RIMMI: _____

DATE SENT TO DR. WONG FOR SIGNATURE: _____

DATE PLACED IN OUT-BOX: _____



LOS ANGELES COUNTY
**DEPARTMENT OF
MENTAL HEALTH**
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