Approved Strategies to Combat Homelessness

Los Angeles County
Homeless Initiative

February 2016

Los Angeles County
Chief Executive Office

Los Angeles County Strategies to Combat Homelessness

E. CREATE A COORDINATED SYSTEM

- **E1** Advocate with Relevant Federal and State Agencies to Streamline Applicable Administrative Processes for SSI and Veterans Benefits
- **E2** Drug Medi-Cal Organized Delivery System for Substance Use Disorder Treatment Services
- **E3** Creating Partnerships for Effective Access and Utilization of ACA Services by Persons Experiencing Homelessness
- **E4** First Responders Training
- **E5** Decriminalization Policy
- **E6** Countywide Outreach System
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INTRODUCTION

On August 17, 2015, the Los Angeles County Board of Supervisors launched the Homeless Initiative to combat the homeless crisis that pervades our communities. The initial objective of the Homeless Initiative has been to develop and present to the Board of Supervisors these recommended County strategies to effectively combat homelessness.

SCOPE OF HOMELESS CRISIS

The homeless crisis in Los Angeles County has been increasing and demands an urgent, coordinated response from the County, cities, and community partners throughout the region. According to the Los Angeles Homeless Services Authority (LAHSA), the total point-in-time homeless population in Los Angeles County was 39,461 in 2013 and 44,359 in 2015, which equals a 12.4 percent increase. The homeless population in tents, makeshift shelters, and vehicles saw an enormous increase of 85 percent from 2013 (5,335) to 2015 (9,335).

DEVELOPMENT AND SUMMARY OF RECOMMENDED COUNTY STRATEGIES

To develop the recommended strategies, the Homeless Initiative conducted 18 policy summits on nine topics from October 1 to December 3, 2015, which brought together 25 County departments, 30 cities and other public agencies, and over 100 community partners and stakeholders. To support the discussions in the policy summits, detailed policy and strategy briefs were developed for each summit, all of which are available at priorities.lacounty.gov/homeless.

These policy summits resulted in 48 recommended strategies divided into six areas which are each key to combating homelessness:

- Prevent Homelessness
- Subsidize Housing
- Increase Income
- Provide Case Management and Services
- Create a Coordinated System
- Increase Affordable/Homeless Housing

The applicable strategy brief(s) are identified in each recommended strategy.

Overall, these recommended strategies reflect the following key principles:

- Homelessness is an extraordinarily complex problem which necessitates active, sustained collaboration amongst the County, cities and other public agencies, and a wide array of community partners.
- The web of established collaborative relationships in Los Angeles County provides a very strong foundation for the implementation of these strategies.
- These recommended strategies must strengthen and build upon current County efforts by:
  - > Directing more resources to proven strategies;
  - > Integrating existing programs and services more effectively;
  - > Enabling cities to join the County in combating homelessness; and
  - > Identifying opportunities to leverage mainstream criminal justice, health, and social services.

PHASE 1 STRATEGIES AND IMPLEMENTATION TIMEFRAMES

Within the set of recommended strategies, the following have been identified as having the greatest impact within the short- and medium-term, with implementation scheduled to commence by June 30, 2016:

Strategy A1 - Homeless Prevention Program for Families

Strategy B1 - Provide Subsidized Housing to Homeless Disabled Individuals Pursuing SSI

Strategy B3 – Partner with Cities to Expand Rapid Re-housing

Strategy B4 – Facilitate Utilization of Federal Housing Subsidies

Strategy B7 – Interim/Bridge Housing for Those Exiting Institutions

Strategy B8 – Housing Choice Vouchers for Permanent Supportive Housing

Strategy C2 – Increase Employment for Homeless Adults by Supporting Social Enterprise

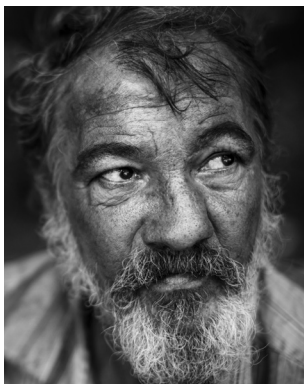
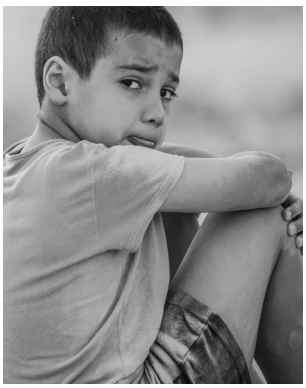
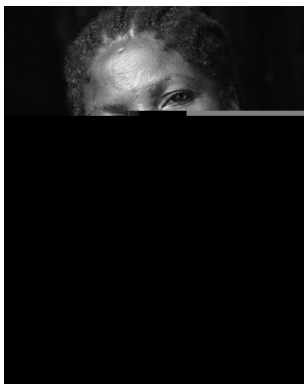
Strategy D2 – Expand Jail In-Reach

Strategies E4/E5 – First Responders Training and Decriminalization Policy

Strategy E6 – Countywide Outreach System

Strategy E8 – Enhance the Emergency Shelter System

The remaining strategies will be divided between Phase 2 (implementation in the second half of 2016) and Phase 3 (implementation in 2017).

ROLE OF CITIES

Implementation of these strategies will create unprecedented opportunities for cities across the County to partner in combating homelessness, particularly by:

- Contributing city funding toward the cost of rapid re-housing for homeless city residents (Strategy B3);
- Dedicating federal housing subsidies to permanent supportive housing for chronically homeless individuals (Strategy B8);
- Ensuring that law enforcement and other first responders effectively engage homeless families and individuals (Strategies E4 and E5); and
- Using land use policy to maximize the availability of homeless and affordable housing (Strategies F1, F2, F4, and F5).

All cities in the County were invited to participate in the Homeless Initiative planning process, and the Homeless Initiative will reach out to cities across the County to join in the implementation of the strategies approved by the Board of Supervisors.

CONCLUSION

Taken as a whole, these recommended strategies are designed to maximize the effectiveness of current efforts to combat homelessness, expand certain key efforts, and implement new actions where appropriate. Though the current level of available funding is far less than the funding needed to eliminate homelessness in Los Angeles County, these strategies are designed to reduce the current number of homeless families and individuals, maximize the alignment and effectiveness of current and future efforts, and lay the foundation for additional effective investments in the future.

Strategy A4 | PREVENT HOMELESSNESS

Related to Strategy Brief 8.5

Discharges From Foster Care & Juvenile Probation

POPULATION IMPACT

ALL FAMILIES ✓ **TAY** SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Departments of Children and Family Services and Probation, in conjunction with the the LA Homeless Services Authority (LAHSA), to develop a plan to strengthen the County's Foster Care and Juvenile Probation System Discharge Policies. The strengthened policy should include at least the nine items set forth in the Description of this strategy.

LEAD AGENCIES

Children and Family Services
Probation

COLLABORATING DEPARTMENTS/AGENCIES

Community and Senior Services
Community Development Commission
Housing Authority of the County of Los Angeles
Los Angeles County Office of Education
Los Angeles Homeless Services Authority
Mental Health
Public Library
Public Social Services

DESCRIPTION

In addition to the plan strengthening the County's current discharge policies for foster care and juvenile probation clients, it will serve to address gaps identified through the implementation of AB12, CA Fostering Connections to Success Act, particularly as AB 12 outcome data becomes available. One of the key changes made by AB 12 was extending the age that youth can remain in foster care to age 21. Youth are eligible for extended foster care if they are in out-of-home placement in the child welfare or juvenile probation system on their 18th birthday. The intent of extended foster care is to provide additional time that youth can utilize resources in order to increase positive outcomes that support long-term self-sufficiency and prevent homelessness.

Depending on the age of the youth, Probation takes specific steps to connect youth with resources that support long term self-sufficiency and prevent homelessness by using the appropriate housing and services available.

At a minimum, the "strengthened" policy should incorporate the following components:

- Convene transition planning meetings six months before discharge as opposed to the current 90 days before discharge, which does not allow sufficient time to identify and prepare the TAY for housing.
- Offer wrap-around support services to families when youth exit back to a family member's home. Families need support when youth are coming from out-of-home placement.
- Ensure that community college or vocational training, at minimum, is part of the education component of the transition plan.

DESCRIPTION *continued*

- Link youth to supports that promote career pathways, e.g., the YouthSource system or programs funded through the Workforce Innovation and Opportunities Act (WIOA).
- Improve utilization of assessments for determining placement into the Supervised Independent Living Program (SILP) in order to determine if the SILP is an appropriate placement for the TAY and to provide broader access to the SILP. SILP placements can consist of shared housing with a friend or roommate in an apartment or other suitable setting, separate apartment rental, college dorm settings, or single room occupancy hotels.
- Systematically collect data regarding youth exit destinations.
- Increase housing capacity and housing/services options for non-minor dependents, including HUD's Family Unification Program (FUP) for youth at least 18 years old and under 22 years old who left foster care at age 16 or older and lack adequate housing. FUP vouchers can provide a youth up to 18 months of housing assistance, subject to program eligibility criteria established by HUD.
- As needed, ensure access to public benefits.
- Seek to extend data tracking of youth beyond discharge from the foster care or juvenile probation system (as part of the implementation of Strategy E9).

CONNECTION TO CITIES

SAME

✓ **COMPLEMENTARY**

NO CITY ROLE

Cities that operate WIOA programs could contribute to the implementation of this strategy.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

TAY and non-minor dependents

POTENTIAL PERFORMANCE METRICS

- Number of transition plans completed six months before discharge
- Increased enrollment into community college and vocational training
- Increased number of TAY being connected to YouthSource and WIOA
- Increased use of assessments for the purpose of proper placement
- Increase data entry on youth exit destinations
- Decrease in the number of TAY who leave a family placement without going to appropriate alternative housing
- Decrease in the number of homeless foster and Probation youth
- Increase in the number of former foster and probation youth in subsidized housing or transitional housing

FUNDING

Much of the plan could be accomplished at no additional cost; however, County General Funds and Title IV-E waiver funds could be considered to the extent that additional funding proves necessary.

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Strategy B
Subsidize Housing

Almost all homeless families and individuals lack sufficient income to pay rent on an ongoing basis, particularly given the extremely high cost of market-rate housing in Los Angeles County. In this context, subsidizing rent and related housing costs is key to enabling homeless families and individuals to secure and retain permanent housing and to preventing families and individuals from becoming homeless. Given the scarcity of both federal and local funding for housing subsidies, it is critical that available subsidies be matched effectively to the needs of a particular family or individual.

Los Angeles County
Homeless Initiative

Strategy B1 | SUBSIDIZE HOUSING **PHASE 1**

Related to Strategy Brief 3.2

Provide Subsidized Housing to Homeless Disabled Individuals Pursuing SSI

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Departments of Public Social Services and Health Services to work together to maximize both the number of disabled homeless individuals applying for SSI who are placed in subsidized housing and the recovery of those rental subsidy costs through Interim Assistance Reimbursement for individuals approved for SSI.

LEAD AGENCIES

Health Services
Public Social Services

COLLABORATING DEPARTMENTS/AGENCIES

Los Angeles Homeless Services Authority
Mental Health
Military and Veterans Affairs
Probation

DESCRIPTION

Research has demonstrated that providing housing for homeless disabled individuals greatly increases the likelihood that they will qualify for SSI. For individuals approved for SSI, housing subsidies are recouped through Interim Assistance Reimbursement (IAR), and the recouped funding can be used to provide a housing subsidy for an additional homeless disabled individual pursuing SSI.

Housing could be provided in three ways:

A. Target current housing resources to individuals served through the proposed Countywide SSI Advocacy Program.
B. Expand the number of GR Housing subsidies in the General Relief Housing Subsidy and Case Management Program (HSCMP) - Many of the individuals who will be helped by the proposed Countywide SSI Advocacy Program will be on GR.
C. Expand the populations served through existing homeless housing programs such as the Single Adult Model (SAM) or Housing for Health programs to include as a targeted population disabled homeless individuals applying for SSI.

The goal would be to place individuals pursuing SSI in housing which they could sustain without a subsidy upon approval for SSI. For individuals not approved for SSI, case management staff would assist in developing a transition plan for housing support through other available resources.

CONNECTION TO CITIES

SAME

✓ **COMPLEMENTARY**

NO CITY ROLE

Cities could implement this strategy in a complementary manner by providing funding to support subsidies for homeless disabled individuals pursuing SSI in their jurisdiction. For individuals approved for SSI, cities could recover the cost of the rental subsidies through Interim Assistance Reimbursement.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

Housing subsidies could be provided to some or all of the individuals who are served by the proposed Countywide SSI Advocacy Program, including older adults. These individuals will likely have severe chronic health and mental health conditions, such that they may be among the most vulnerable and persistently homeless.

POTENTIAL PERFORMANCE METRICS

- Number of disabled individuals pursuing SSI who are placed in housing
- Number of individuals who maintain housing during the SSI application period
- Percent of individuals approved for SSI who retain permanent housing 6, 12, and 24 months after SSI approval
- Number of SSI applications filed
- Number of successful SSI applications at each stage (initial, reconsideration, appeal)
- Amount and percentage of rental subsidy costs recovered through IAR for individuals approved for SSI

FUNDING

- $3.75 million in one-time HPI funding
- $4 million in one-time AB 109 funding
- $1 million in one-time SB 678 funding
- Interim Assistance Reimbursement (IAR) from the Social Security Administration (SSA) for housing subsidies provided to individuals who are subsequently approved for SSI. The amount reimbursed by SSA would be reinvested in housing subsidies for additional homeless disabled individuals pursuing SSI.

Strategy B2 | SUBSIDIZE HOUSING

Related to Strategy Brief 3.4

Expand Interim Assistance Reimbursement (IAR) to additional County Departments and the Los Angeles Homeless Services Authority

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Chief Executive Office to work with the California Department of Social Services to amend the existing Memorandum of Understanding with the California Department of Social Services to expand the ability to collect Interim Assistance Reimbursement (IAR) to additional County Departments and the Los Angeles Homeless Services Authority.

LEAD AGENCY

Chief Executive Office

COLLABORATING DEPARTMENTS/AGENCIES

Children and Family Services
Community and Senior Services
Health Services
Los Angeles Homeless Services Authority
Mental Health
Probation
Public Health
Public Social Services

DESCRIPTION

IAR can be collected on behalf of homeless individuals and families who receive assistance in meeting their basic needs during the months their Supplemental Security Income (SSI) application is pending or during the months SSI is suspended. Agencies that provide basic needs for eligible participants using non-federal dollars are eligible to collect IAR if the individual is subsequently approved for SSI. Basic needs include shelter, interim housing, recuperative care, and rental subsidies.

Los Angeles County already has a Memorandum of Understanding in place with the California Department of Social Services (CDSS) which allows for the collection of IAR by County Departments. The agreement signed by the County of Los Angeles and CDSS may be modified in writing at any time by mutual consent and will not require any further action. The current Board letter and agreement allows for DPSS and DMH to collect IAR. The collection of IAR by additional County Departments and the Los Angeles Homeless Services Authority (LAHSA) will support the provision of assistance to additional homeless families/individuals as IAR collected could be reinvested.

The current monthly SSI grant is $889. For individuals who receive GR while their SSI application is pending, the County already recovers IAR for the $221 monthly GR grant. Additionally, for GR participants receiving a GR rental subsidy, the County recovers $400 per month for that subsidy. Therefore, for individuals receiving GR, with no GR rental subsidy, the monthly maximum additional IAR is $661, while it is $889 for individuals not receiving GR. For GR participants receiving a GR rental subsidy, the additional available IAR is $261 per month.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

The collection of IAR should be expanded to the Departments of Health Services, Public Health, and Children and Family Services, the Probation Department and LAHSA.

POTENTIAL PERFORMANCE METRICS

- The amount of funding recouped through the IAR Program each year, by department

FUNDING

There is no cost to the County to implement this strategy.

CONNECTION TO CITIES

SAME

✓ **COMPLEMENTARY**

NO CITY ROLE

Cities who fund rental subsidies for disabled homeless individuals pursuing SSI could also recover the cost of the rental subsidies through Interim Assistance Reimbursement.

Strategy B3 | SUBSIDIZE HOUSING **PHASE 1**

Related to Strategy Briefs 7.3 and 9.5

Partner with Cities to Expand Rapid Re-Housing

POPULATION IMPACT

ALL ✓ FAMILIES ✓ TAY ✓ SINGLE ADULT ✓ VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Department of Health Services and the Los Angeles Homeless Services Authority to partner with cities and expand the availability of rapid re-housing, as described per the description.

LEAD AGENCIES

Health Services
Los Angeles Homeless Services Authority

COLLABORATING DEPARTMENTS/AGENCIES

Children and Family Services
Community Development Commission
Community and Senior Services
Community-based organizations and housing providers
Housing Authority of the City of Los Angeles
Housing and Community Investment Department
Mental Health
Probation
Public Health
Public Social Services
Sheriff

DESCRIPTION

The purpose of rapid re-housing is to help homeless families/individuals/youth with low-to-moderate housing barriers to be quickly re-housed and stabilized in permanent housing. Rapid re-housing connects homeless individuals and families, as well as vulnerable sub-populations such as older adults, to permanent housing through the provision of time-limited financial assistance, case management and targeted supportive services, and housing identification/navigation supports:

- Financial assistance includes short-term and medium-term rental assistance and move-in assistance, such as payment for rental application fees, security deposits, and utility deposits. Financial assistance can come in the form of a full subsidy, covering the full rent for a period of time, or a shallow subsidy, covering a portion of the rent with gradual decreases in the subsidy over time.
- Case management and targeted supportive services can include, but are not limited to: money management; life skills; job training; education; assistance securing/retaining employment; child care and early education; benefits advocacy; legal advice; health; mental health; substance use disorder treatment; community integration; and recreation.
- Housing Identification/navigation supports address barriers for individuals and families to return to housing, which includes identifying a range of safe and affordable rental units, as well as recruiting landlords willing to rent to homeless individuals and families. Landlord incentives can include items such as a repair fund and/or recognition at relevant landlord events. Housing navigation staff should assist

DESCRIPTION *continued*

clients in housing search, assistance with completing and submitting rental applications, and understanding the terms of the lease.

Rapid re-housing is the most effective and efficient intervention for more than 50 percent of homeless individuals and families based on available data. The success rate for permanent placement is higher and recidivism rates are lower than other forms of housing interventions. However, it is not the best intervention for those who have been chronically homeless and/or face high barriers that impact housing placement, and is not the most effective intervention for all victims of domestic violence, human trafficking victims, and youth.

Rapid re-housing is generally categorized as a short-term housing resource lasting 6-12 months, but in some cases up to 24 months, if steady, but slow improvements are made by recipients in making the transition to self-sufficiency.

CONNECTION TO CITIES

SAME

✓ **COMPLEMENTARY**

NO CITY ROLE

Cities could contribute funding for homeless families, single adults, and youth within each city who are likely to succeed through rapid re-housing. Cities that receive Housing and Urban Development Emergency Solutions Grant funds could potentially utilize that funding source, among others.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

Homeless families, single adults and youth who are not chronically homeless and would benefit from a short to intermediate housing intervention and supportive services to regain housing stability.

POTENTIAL PERFORMANCE METRICS

- Number/percent of families/individuals/TAY who can sustain unsubsidized housing upon program exit
- Number/percent of individuals, families, and TAY with permanent housing placement within 90 days
- Number/percent of returns to homelessness within 24 months of placement in permanent housing
- Number/percent with increased income from all potential sources at program exit

FUNDING

- $8 million in one-time HPI funds, in addition to the $10 million for rapid re-housing for single adults approved by the Board of Supervisors on October 13, 2015. Of this $8 million, $5 million is earmarked to serve families through the Homeless Families Solutions System and $2 million is earmarked for TAY.
- $11 million in one-time SB 678 funding.
- $7 million in one-time AB 109 funding.
- Cities who want their homeless residents to access this program will be asked to contribute $500/month per family/individual, which is approximately 50 percent of the actual rent subsidy cost. The County will fund the remainder of the rental subsidy and the full cost of the associated services, up to each city's share of the countywide homeless population based on the most recent homeless count. The average duration of rapid re-housing is 6-12 months per family/individual, so the total city cost would be $3,000-

Partner with Cities to Expand Rapid Re-Housing *continued*

FUNDING *continued*

$6,000 per family/individual who is permanently housed. Cities that choose to partner with the County would have the opportunity to collaborate with the County in identifying the families/individuals/youth who should have the highest priority for a slot in the program.

- Additional funding may be available from certain County departments on a per slot basis for specific populations, including the Department of Public Social Services, Department of Children and Family Services, Department of Health Services, and the Department of Mental Health.

Strategy B4 | SUBSIDIZE HOUSING **PHASE 1**

Related to Strategy Brief 9.3b

Facilitate Utilization of Federal Housing Subsidies

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Housing Authority of the County of Los Angeles (HACoLA) to develop the following temporary, two-year programs to encourage landlord acceptance of subsidized tenants with a Housing and Urban Development voucher issued by HACoLA:

1. Damage Mitigation/Property Compliance Fund;
2. Vacancy payments to hold units; and
3. Security Deposit Assistance.

LEAD AGENCY

Housing Authority of the County of Los Angeles

COLLABORATING DEPARTMENTS/AGENCIES

Health Services
Housing Authority of the City of Los Angeles
Los Angeles Homeless Services Authority
Other Public Housing Authorities

DESCRIPTION

Federal housing subsidies play a critical role in combatting homelessness; however, the current very low vacancy rate in the rental housing market makes it very difficult for families and individuals with a federal subsidy to secure housing. To mitigate this problem, for two years, the County could provide the following incentives for landlords to accept subsidized tenants:

- Damage Mitigation/Property Compliance Fund. This program should be similar to Oregon's Housing Choice Landlord Guarantee Program, which provides financial assistance to landlords to mitigate damage caused by tenants during their occupancy under the HUD Housing Choice Voucher Program, Family Unification Program, and Shelter Plus Care/Continuum. In addition, the program should provide landlords with modest financial assistance to repair and/or modify their property to comply with HUD Quality Housing Standards, if property non-compliance is the only barrier to accepting a subsidized tenant.
- Vacancy payments to hold units. Develop a program to provide landlords vacancy payments to hold a rental unit for 1-2 months once a tenant with a subsidy has been accepted by the landlord, while the landlord is going through the HUD approval process. This program is needed on a temporary basis, due to the current, exceptionally low rental housing vacancy rate in Los Angeles County. The County is already implementing such a program under the Department of Health Service's Housing for Health Program and the Veterans Administration Supportive Housing Program.
- Security Deposit Assistance. Develop a

DESCRIPTION *continued*

program to provide security deposit assistance to homeless individuals and families by either covering the amount of the security deposit or having the County guarantee the deposit. The latter could be modeled after Monterey County's Security Deposit Guarantee Program which allows low-income households to spread out the security deposit over a period of time. The County would sign an agreement with the landlord that guarantees them the full amount of the deposit while allowing the tenant to make monthly payments with no interest. If tenant defaults, the County would be responsible for paying the difference owed to the landlord.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

All homeless populations.

POTENTIAL PERFORMANCE METRICS

- Increased number of landlords willing to accept homeless households with housing subsidies

FUNDING

- $2 million in one-time HPI funds for the three recommended programs, with no more than $750,000 for the Security Deposit Assistance Program.

CONNECTION TO CITIES

✓ **SAME**

COMPLEMENTARY

NO CITY ROLE

Cities which have their own Public Housing Authorities could implement the same or similar programs to facilitate utilization of the housing subsidies which they issue. All cities could fund vacancy payments to facilitate rapid re-housing for their homeless residents.

Strategy B5 | SUBSIDIZE HOUSING

Related to Strategy Brief 9.6

Expand General Relief Housing Subsidies

POPULATION IMPACT

ALL FAMILIES ✓ TAY ✓ SINGLE ADULT ✓ VETERAN ✓ CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Department of Public Social Services to enhance and expand the General Relief Housing Subsidy and Case Management Program (GRHSCMP) by:

- Increasing the maximum rent subsidy from $400 to $475 per month;
- Incorporating a Rapid Re-housing model which includes housing location assistance and housing-related case management; and
- Increasing the number of available subsidies for disabled homeless GR participants pursuing Supplemental Security Insurance (SSI), through the utilization of the additional recommended funding described herein.

LEAD AGENCY

Public Social Services

COLLABORATING DEPARTMENTS/AGENCIES

Community and Senior Services
Health Services
Los Angeles Homeless Services Authority
Mental Health
Public Health

DESCRIPTION

The County could allocate additional funding to expand the General Relief Housing Subsidy and Case Management Project (GRHSCMP). Additionally, the GRHSCMP could be enhanced to align with a Rapid Re-housing model, which includes housing location assistance and housing-related case management, in addition to the housing subsidy. It is also recommended that the subsidy under the enhanced GRHSCMP be increased from the current $400/month to $475 per month.

The County will provide $475, which supplements $100 provided by the GR recipient for a total of $575/month available for housing. Modestly increasing the subsidy amount by $75/month will enhance both the homeless individual's ability to locate housing and the likelihood that the housing located will be permanent housing in which the individual can remain without a subsidy, upon SSI approval or employment.

Currently, approximately 75% of GRHSCMP subsidies are allocated to disabled GR participants pursuing SSI, while the remaining 25% are allocated to employable GR participants. It is recommended that 100% of any increased funding for this program be utilized for disabled GR participants pursuing SSI.

For GRHSCMP participants who secure SSI, the County recovers the full amount of the rental subsidy from the participant's retroactive SSI benefit, though the Interim Assistance Reimbursement process. Implementation of a Countywide SSI Advocacy Program, as recommended in Strategy C6, should increase the number of GRHSCMP participants who qualify for SSI and thereby increase the share of GRHSCMP expenditures which are recovered and available to provide a subsidy to an additional homeless, disabled GR participant pursuing SSI.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

The target population for the program is homeless GR participants, including older adults, who are living on the streets or in shelters, and are either employable or potentially eligible to SSI. The expansion population will be limited to homeless disabled GR participants who are potentially eligible to SSI; however, a small percentage of homeless employable GR participants will continue to be served by the base funding for this program.

POTENTIAL PERFORMANCE METRICS

- Percent of program participants who secure SSI
- Amount and percentage of housing subsidy payments recovered through Interim Assistance Reimbursement following SSI approval
- Percent of employable recipients who exit GR with employment (This metric only applies to employable recipients served through the base funding for this program; however, those employable recipients will be impacted by the recommended changes to the program, including the increase in the rental subsidy from $400 to $475/month.)
- Percent of program participants who retain employment 6,12, and 24 months after exiting this program

FUNDING

- Redirection of whatever portion of the $5.8 million in ongoing annual NCC currently allocated for the General Relief Mandatory Substance Use Disorder Recovery Program (MSUDRP becomes available, as MSUDRP services become billable to Medi-Cal through implementation of the Drug Medi-Cal-Organized Delivery System waiver.
- Interim Assistance Reimbursement of GR rental subsidy payments for individuals who are approved for SSI.

CONNECTION TO CITIES

SAME

✓ **COMPLEMENTARY**

NO CITY ROLE

Cities could implement this strategy in a complementary manner by providing funding to support subsidies for homeless, disabled GR participants in their jurisdiction. For individuals approved for SSI, cities could recover the cost of the rental subsidies through Interim Assistance Reimbursement.

Strategy B6 | SUBSIDIZE HOUSING

Related to Strategy Brief 9.7

Family Reunification Housing Subsidy

POPULATION IMPACT

ALL ✓ **FAMILIES** TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Department of Children and Family Services and Los Angeles Homeless Services Authority to provide rapid re-housing and case management services to families in the child welfare system where the parent(s)' homelessness is the sole barrier to the return of the child(ren), and the family meets the following criteria:

1. The child(ren) are currently placed in out-of-home care (including relative caregivers);
2. The parent(s) have complied with or are in substantial compliance with all court orders for the return of their children;
3. Homelessness is the sole barrier to the return of the child(ren) to their care; and
4. The family is a good candidate for rapid re-housing, rather than a longer-term housing subsidy.

LEAD AGENCIES

Children and Family Services (DCFS)
Los Angeles Homeless Services Authority (LAHSA)

COLLABORATING DEPARTMENTS/AGENCIES

Community Development Commission
Housing Authority of the City of Los Angeles
Housing Authority of the County of Los Angeles
Probation
Public Social Services

DESCRIPTION

DCFS has oversight of thousands of children in out-of-home care throughout Los Angeles County. Families on CalWORKs whose child(ren) are removed lose eligibility to their CalWORKs cash grant, if there is no minor child remaining the home; therefore, the removal of the child(ren) can itself result in the family becoming homeless. Moreover, since homeless parent(s) without physical custody of a child are not eligible to receive a CalWORKs grant which could be used to pay for housing, children can remain in foster care for extended periods of time. A significant number of children in out-of-home placement could be reunited with their parents, if their parents were able to obtain and sustain suitable housing.

Rapid re-housing is the most effective and efficient intervention for more than 50 percent of homeless individuals and families based on available data. The success rate for permanent placement is higher and recidivism rates are lower than for other forms of housing intervention. However, notwithstanding the value of rapid re-housing, some families who initially appear to be well-suited to rapid re-housing may ultimately need a permanent housing subsidy. Such families should be granted priority access to a permanent, federally-funded housing subsidy. This is consistent with the current approach in the Homeless Families Solutions System administered by the LAHSA.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

Homeless families with DCFS involvement, where the family's homelessness is the sole barrier to the return of the child(ren) from out-of-home placement.

POTENTIAL PERFORMANCE METRICS

- Number of families placed in housing
- Number and percentage of families who have retained housing after 12 months by service planning area
- Number and percent with increased income from all potential sources at program exit
- Number of families with no DCFS jurisdiction at program exit
- Number and percent of families who successfully transition to unsubsidized housing

CONNECTION TO CITIES

SAME

✓ **COMPLEMENTARY**

NO CITY ROLE

Cities which operate public housing authorities could commit Housing Choice Vouchers for families who participate in this program, but ultimately need an ongoing housing subsidy.

FUNDING

- DCFS funding that would otherwise be used for out-of-home placement, absent reunification, will be used to fund participation in this program by families which include an adult who is eligible to participate in the CalWORKs welfare-to-work program, including subsidized employment. An initial commitment of $2 million from DCFS will enable the program to be implemented. Out-of-home placement cost savings will be tracked, based on an assumption that the child(ren) would have otherwise remained in placement for 12 additional months, and the savings will be reinvested to sustain the program on an ongoing basis. If savings exceed the cost of sustaining the program for families which include a CalWORKs parent who is welfare-to-work eligible, the "surplus savings" could be used for rapid re-housing for other families who meet the eligibility criteria for this program.
- $1 million in one-time HPI funding for families who meet the eligibility criteria for this program, but do not include a parent who is eligible to participate in the CalWORKs welfare-to-work program.
- CalWORKs Single Allocation funding, including family reunification services for families who were receiving CalWORKs at the time that the child(ren) were removed.
- Housing Choice Vouchers, particularly from the Housing Authority of the City of Los Angeles (HACLA) and the Housing Authority of the County of Los Angeles (HACoLA), for families who ultimately need an ongoing housing subsidy at the end of the rapid re-housing program.
- Family Unification Program (FUP) vouchers from HACLA and HACoLA.

Strategy B7 | SUBSIDIZE HOUSING **PHASE 1**

Related to Strategy Brief 8.2

Interim/Bridge Housing for those Exiting Institutions

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Los Angeles Homeless Services Authority, in collaboration with the Department of Health Services (DHS), Department of Mental Health (DMH), Probation Department, Department of Children and Family Services (DCFS), and Sheriff (LASD) to develop and implement a plan to increase the interim/bridge housing stock across the County, including identification of funding that can be used to support the increase.

LEAD AGENCY

Los Angeles Homeless Services Authority

COLLABORATING DEPARTMENTS/AGENCIES

Children and Family Services
Community and Senior Services
Health Services
Mental Health
Probation
Public Health
Sheriff
Cities
LA Care
Health Net
Hospital Association of Southern California

DESCRIPTION

The following housing types should be available for individuals exiting institutions:

- Shelter beds
- Stabilization beds
- Shared recovery housing (can be used for interim or permanent housing)
- Recuperative care beds
- Board and care (can be used for interim or permanent housing)

All of the above housing types are available in most jurisdictions throughout the United States. They are viewed as standards of care for most HUD Continua of Care. Many shelter models are funded by HUD under the McKinney Vento Homeless Assistance Act. Recuperative care is less prevalent; however, in some jurisdictions, health plans and/or hospitals pay for these services privately. Shared Recovery Housing is a SAMHSA evidence-based best practice. None of these programs are billable to regular Medi-Cal, though health plans/providers may be able to use the capitated Medi-Cal funding they receive to pay for bridge housing for their Medi-Cal patients.

There will be a historic opportunity to increase the supply of bridge housing in 2016, when LAHSA will stop funding approximately 2000 transitional housing beds, per direction from the U.S. Department of Housing and Urban Development to shift funding away from transitional housing. LAHSA is currently in discussions with all impacted transitional housing providers regarding potential ways in which their facilities could be re-purposed, which includes the potential utilization of those facilities for bridge housing.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

All homeless populations

POTENTIAL PERFORMANCE METRICS

- Number of individuals being discharged from institutions needing interim/bridge housing
- Number of individuals who are discharged from institutions to interim/bridge housing
- Number of individuals who are discharged from institutions to interim/bridge housing who are connected to physical health, mental health, substance use disorder treatment and sources of income
- Number of individuals who are discharged from institutions to interim/bridge housing who leave interim/bridge housing for permanent housing
- Number of individuals who are discharged from institutions to interim/bridge housing who leave prior to being able to transition to permanent housing

FUNDING

- $3,250,000 in one-time HPI funding
- $4,600,000 in one-time AB 109 funding
- $3,400,000 in one-time SB 678 funding
- Additional funding could potentially come from DHS, DMH, LASD, DCFS, LAHSA, cities, managed care organizations (such as LA Care), and private hospitals.

CONNECTION TO CITIES

SAME

✓ **COMPLEMENTARY**

NO CITY ROLE

Cities could contribute funding for bridge housing and/or facilitate the siting of bridge housing within their jurisdictions.

Strategy B8 | SUBSIDIZE HOUSING **PHASE 1**

Housing Choice Vouchers for Permanent Supportive Housing

POPULATION IMPACT

ALL FAMILIES TAY SINGLE ADULT VETERAN ✓ **CHRONICALLY HOMELESS ADULT**

RECOMMENDATION

Direct the Housing Authority of the County of Los Angeles (HACoLA) to dedicate Housing Choice Vouchers (HCV) which become available through routine turnover to permanent supportive housing for chronically homeless individuals through the following tiered approach:

- Tier 1: HCV waiting list preference for chronically homeless individuals referred by a Community Based Organization – HACoLA will commit 35% of turnover vouchers for FY 2016-17 to chronically homeless individuals. HACoLA will increase this commitment to 50% for FY 2017-18 and each subsequent fiscal year, subject to acceptable success rates in securing permanent housing for chronically homeless individuals issued a voucher under this preference.
- Tier 2: HCV waiting list preference for homeless already registered on HACoLA's waiting lists – There are currently 1,100 applicants identified as homeless on a waiting list, and the remainder of available turnover units will be dedicated to this population.
- Tier 3: Project-Based Vouchers – Turnover vouchers are dedicated to the annual Project-Based Vouchers Notice of Funding Availability, administered by the Community Development Commission, which offers bonus points for projects that assist the chronically homeless. Mandated coordination using the Coordinated Entry System ensures that chronically homeless individuals will be assisted.

DESCRIPTION

Chronically homeless adults are the homeless population most in need of permanent supportive housing, which combines a permanent housing subsidy with case management, health, mental health, substance use disorder treatment and other services. The primary source of permanent housing subsidies is HCV (commonly known as Section 8), which are provided by the U.S. Department of Housing and Urban Development (HUD).

Though the number of Housing Choice Vouchers (HCV) has not grown in recent years, some vouchers become available each month through routine turnover, as current Housing Choice Voucher holders relinquish their vouchers. For the Housing Authority of the County of Los Angeles (HACoLA), approximately 700-800 Housing Choice Vouchers turnover each year. As part of their efforts to combat homelessness, various other jurisdictions across the country have dedicated 100% of their turnover HCV vouchers to homeless people or to one or more homeless sub-populations.

LEAD AGENCY

Housing Authority of the County of Los Angeles

COLLABORATING DEPARTMENTS/AGENCIES

Community Development Commission
Housing Authority of the City of Los Angeles
Los Angeles Homeless Services Authority
Other Public Housing Authorities

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

Chronically Homeless Adults

POTENTIAL PERFORMANCE METRICS

- Significant reduction in the number of chronically homeless individuals

FUNDING

No local funding would be required for housing subsidies from HUD. The cost of services would be funded through a combination of Medi-Cal dollars, County General Fund, funding from other departments, and philanthropy.

CONNECTION TO CITIES

✓ **SAME**

COMPLEMENTARY

NO CITY ROLE

Cities which have their own Public Housing Authorities could dedicate a substantial percentage of available Housing Choice Vouchers for permanent supportive housing for chronically homeless individuals.

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Strategy C
Increase Income

Most currently homeless families and individuals have the ability to increase their income to the point where they will be able to pay for their own housing in the future, if they secure the assistance they need to increase their income. A high percentage of homeless adults can increase their income through employment; severely disabled homeless individuals can increase their income through federal disability benefits. Enabling a high percentage of homeless adults to pay for their own housing is key to combating homelessness.

Los Angeles County
Homeless Initiative

Strategy C1 | INCREASE INCOME

Related to Strategy Brief 1.1

Enhance the CalWORKs Subsidized Employment Program for Homeless Families

POPULATION IMPACT

ALL ✓ **FAMILIES** TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Department of Public Social Services (DPSS) to enhance the existing DPSS CalWORKs Subsidized Employment Program for homeless CalWORKs Families and those CalWORKs families housed through a Department of Children and Family Services Housing Subsidy.

LEAD AGENCY

Public Social Services

COLLABORATING DEPARTMENTS/AGENCIES

Children and Family Services
Community and Senior Services
Los Angeles Homeless Services Authority
Mental Health

DESCRIPTION

This would be an enhancement of the existing DPSS CalWORKs Subsidized Employment Program that would be targeted to CalWORKs families who are homeless/recently homeless/at risk of homelessness. It is recommended that the program be modeled after the Los Angeles Regional Initiative for Social Enterprise (LA: RISE) implemented by LA City in collaboration with the non-profit Roberts Enterprise Development Fund (REDF). The LA: RISE model takes an integrated wraparound approach to job creation and provides hard-to-serve individuals, specifically those with a history of homelessness and/or incarceration, and disconnected youth, with employment, counseling support and training.

This enhancement could be implemented by DPSS as an enhancement of the existing CalWORKs subsidized employment program with the South Bay Workforce Development Board or through an agreement with the Department of Community and Senior Services (CSS) in partnership with the LA City Workforce Development Board (WDB), which has an existing relationship with REDF. In either scenario, the LA: RISE program design and infrastructure could be leveraged and expanded to provide services countywide. The services will be specifically targeted to meet the needs of homeless families. Examples of services include:

- Subsidized employment/bridge jobs provided in a Social Enterprise supportive employment work environment that includes personal supports, case management and job readiness preparation.
- Recruiting and working with employers willing to hire hard-to-serve individuals with non-traditional backgrounds. This will include recruiting and working with small localized (mom and pop) employers.

DESCRIPTION *continued*

- Coordinated training provided through DPSS Greater Avenues to Independence (GAIN) Program and Workforce Investment Boards and Social Enterprise Employers on developing skills needed to obtain self-sufficiency.

Additional supports would be provided as needed to help homeless families maintain their subsidized employment, progress into unsubsidized employment, and retain their employment. This includes linkages to the existing Homeless Families Solution System (HFSS). Currently, CalWORKs homeless families are served through the mainstream CalWORKs Transitional Subsidized Employment Program; however, under this proposal, homeless families would instead be served through this specialized program design to meet their unique needs.

CONNECTION TO CITIES

SAME

✓ **COMPLEMENTARY**

NO CITY ROLE

Cities could implement this strategy in a complementary manner to the County. They could do this by participating as employers providing placement opportunities for program participants and by actively engaging their Chambers of Commerce to encourage local business participation as both placement sites and in hiring of program participants for unsubsidized employment.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

Homeless CalWORKs families with an aided parent who is eligible to participate in the CalWORKs welfare-to-work program would be eligible to participate. The definition of "homeless" within the CalWORKs program includes families who lack a permanent fixed residence. This means that the definition includes families that range from literally homeless (e.g., sleeping in car) to those who are "couch surfing." Additionally, victims of domestic violence and CalWORKs families recently housed through a housing subsidy from the Department of Children and Family Services would be served through this specialized Subsidized Employment program.

POTENTIAL PERFORMANCE METRICS

For Homeless CalWORKs Population

- Percentage of participants who are placed into subsidized employment and obtain unsubsidized employment.
- Percentage of participants placed into unsubsidized employment who retain employment for a period of time

For DCFS Population

- Percentage of families who remain stable and without DCFS involvement
- Percentage of participants with increased income over a period of time

FUNDING

The estimated cost per person is approximately $10,500 - $ 11,500 for a six-month assignment. Ongoing CalWORKs Expanded Subsidized Employment funding will be utilized for all homeless/at-risk CalWORKs families who qualify for this specialized program.

Strategy C2 | INCREASE INCOME **PHASE 1**

Related to Strategy Briefs 1.3 and 1.4

Increase Employment for Homeless Adults by Supporting Social Enterprise

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Chief Executive Office to support Social Enterprises/Alternate Staffing Organizations to increase employment opportunities for Homeless Adults as described herein.

LEAD AGENCY

Chief Executive Office

COLLABORATING DEPARTMENTS/AGENCIES

All County Departments which contract for goods and/or services

Community and Senior Services

County Counsel

Internal Services Department

Human Resources

DESCRIPTION

Social Enterprises are mission-driven businesses focused on hiring and assisting people who face the greatest barriers to work. They earn and reinvest their revenue to provide more people with transitional jobs to become job ready with the basic skills necessary to compete and succeed in the mainstream workforce. They help people who are willing and able to work, but have the hardest time getting jobs, including individuals with a history of homelessness and/or incarceration, and youth who are out of school and out of work. Obtaining employment increases income and improves the individual's overall well-being.

Alternate Staffing Organizations (ASOs) operated by Social Enterprises provide temporary workers and act as intermediaries between employers and job seekers, helping employers attract and retain reliable, motivated workers and linking job seekers to competitive employment, opportunities for skills development and pathways to hire by employer customers. Unlike conventional temporary staffing companies, ASOs operated by Social Enterprises have a dual mission to satisfy their customers and promote workplace success for people with obstacles to employment, such as those with unstable housing history, criminal backgrounds, or those participating in recovery programs.

Many services procured by local government could be provided, in whole or in part, by Social Enterprises/ASOs.

DESCRIPTION *continued*

The County could utilize Social Enterprises/ASOs to help homeless/formerly homeless adults to increase their income through increasing employment opportunities by taking the following actions:

1. Enhance the procurement process to provide preferential treatment of Social Enterprises by awarding extra points during the scoring process and by expanding the County's existing Transitional Job Opportunities Preference Program to provide preferential treatment to bidders that commit to subcontract with Social Enterprises;
2. Support the creation of Alternative Staffing Organizations (ASOs) operated by Social Enterprise entities and designate them as the preferred staffing agency for County Departments, contractors and sub-contractors to use for their temporary staffing needs;
3. Provide a Social Enterprise entity operating an ASO with a subsidy of $2 per hour worked to reduce the markup passed on to the customer, thus making the ASO a more attractive option. ASOs are able to be self-sustaining by marking up wage rates. For example, a worker that is paid $10 per hour may be billed to the customer at $17. This "mark-up" covers employment taxes, workers compensation, mandated benefits, and any other margin needed to maintain the business. At the same time, the subsidies could help ASOs fund the critical support services needed to ensure the employees' success;
4. Leverage the Department of Public Social Services (DPSS) transitional subsidized employment program for CalWORKs parents/relative caregivers, by placing some program participants in an ASO for temporary employment as a step toward long-term employment;
5. Develop and distribute a comprehensive inventory of the services currently being provided in Los Angeles County by Social Enterprises and ASOs to County contractors/sub-contractors and County Departments. The enhanced Transitional Job Opportunity Preference Program/ASO Ordinance would encourage every contractor providing services to the County to work with Social Enterprises/ASOs to perform functions consistent with its business needs, as part of its County contract; and
6. Encourage cities to adopt a Social Enterprise Agency Utilization Ordinance and provide a sample ordinance for cities to use, modeled on the County's current Expanded Preference Program.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

All homeless populations, including homeless older adults.

Increase Employment for Homeless Adults by Supporting Social Enterprise *continued*

POTENTIAL PERFORMANCE METRICS

- Increase in the number of employment opportunities available for homeless people, recently homeless, or those at risk of homelessness resulting from increased utilization of social enterprises/ASOs
- Percentage of social enterprise employees who are able to move on to non-supported employment
- Number of workers engaged in ASO assignments
- Reduction in dependence on public benefits due to ASO assignment

FUNDING

- No associated funding is required for enhancing the procurement process.
- DPSS – CalWORKs Single Allocation and Enhanced Subsidized Employment funding already allocated for the CalWORKs Transitional Subsidized Employment Program could be used to support the use of ASOs for Paid Work Experience and On-the–Job training for CalWORKs parents/relative caregivers.
- $2 million in one-time HPI funding to provide a subsidy of $2 per hour worked to ASOs to reduce the markup passed on by ASOs to employers.

CONNECTION TO CITIES

SAME

✓ **COMPLEMENTARY**

NO CITY ROLE

Cities could adopt a a Social Enterprise Agency Utilization Ordinance modeled on the County's current Expanded Preference Program.

Strategy C3 | INCREASE INCOME

Related to Strategy Brief 1.8

Expand Targeted Recruitment and Hiring Process to Homeless/ Recently Homeless People to Increase Access to County Jobs

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Department of Human Resources to expand outreach and targeted recruitment strategies to include those who are homeless or recently homeless.

LEAD AGENCY

Human Resources

COLLABORATING DEPARTMENTS/AGENCIES

All County Departments

DESCRIPTION

There are three fundamental design features of Civil Service Employment:

1. examination for civil service positions are public, competitive and open to all;
2. they rely upon a testing methodology to establish rank-ordered lists for hiring opportunities; and
3. there are often stringent background standards, including a job nexus assessment of an applicant's criminal record.

Given the requirements of the civil service process, a targeted recruitment and flexible job requirements would acknowledge both the institutional barriers and the individual barriers often experienced by those who are homeless or recently homeless. The targeted outreach, recruitment and flexible job requirements would expand hiring opportunities for entry level positions of those who are homeless or recently homeless. This is an expansion of what the County currently does for GAIN/GROW participants and veterans.

Expand Targeted Recruitment and Hiring Process to Homeless/ Recently Homeless People to Increase Access to County Jobs *continued*

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

Individuals, including older adults, who are homeless or formerly homeless would be eligible to participate in the targeted recruitment and hiring process upon being stabilized and assessed by a County department or designated homeless service provider as employment-ready.

POTENTIAL PERFORMANCE METRICS

- Percent of homeless or recently homeless applicants in targeted recruitments
- Percent of homeless or recently homeless applicants participating in targeted recruitment who secure civil service employment
- Percent of homeless or recently homeless applicants hired through targeted recruitment who successfully pass their initial probationary period

FUNDING

Existing Departmental funding to hire allocated staff

CONNECTION TO CITIES

✓ **SAME**

COMPLEMENTARY

NO CITY ROLE

Cities could implement a similar recruitment and hiring practice for positions within their jurisdiction.

Strategy C4 | INCREASE INCOME

Related to Strategy Brief 3.1

Establish a Countywide SSI Advocacy Program for People Experiencing Homelessness or At Risk of Homelessness

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Department of Health Services to collaborate with the Department of Public Social Services and other relevant County Departments to establish a Countywide Supplemental Security Income Advocacy Program as described herein.

LEAD AGENCY

Health Services

COLLABORATING DEPARTMENTS/AGENCIES

Children and Family Services
Los Angeles Homeless Services Authority
Mental Health
Military and Veterans Affairs
Probation
Public Health
Public Library
Public Social Services
Sheriff

DESCRIPTION

The recommended countywide Supplemental Security Income (SSI) Advocacy Program would provide assistance to eligible homeless individuals and those at risk of homelessness (including all disabled GR participants) in applying for and obtaining SSI or other related benefits Social Security Disability Insurance (SSDI) and Cash Assistance Program for Immigrants. The Program, modeled after DHS' former Benefits Entitlement Services Team (B.E.S.T), should be overseen by the Los Angeles County Department of Health Services because of its successful management of B.E.S.T. and its achievement of high outcomes and experience with large-scale contracting with homeless services agencies across the county. A Request for Proposals is targeted for release by the end of June, 2016, to secure two or more contractors, who could use subcontractors, as needed, to meet the geographic needs of the County.

Referrals to the Countywide SSI Advocacy Program should be received via a warm hand-off from: (1) existing homeless entry points and systems of care, such as Housing for Health, the Coordinated Entry System (CES), Homeless Families Solutions System (HFSS), and the Single Adult Model (SAM); (2) the County Departments of Public Social Services, Mental Health, Public Health, Military and Veterans Affairs, and Children and Family Services, the Probation Department, and the Sheriff's Department; and (3) community-based organizations serving individuals who are homeless or at risk of homelessness.

Establish a Countywide SSI Advocacy Program for People Experiencing Homelessness or At Risk of Homelessness *continued*

DESCRIPTION *continued*

The necessary components of a successful SSI Advocacy Program include:

A. Benefits Specialist Resource Team(s) for each Service Planning Area (SPA) who will be responsible for:

- Receiving referrals from the various above-identified points of entry;
- Full-time co-location at DPSS' 14 General Relief offices;
- Conducting and/or leveraging outreach and engagement activities to identify eligible homeless individuals;
- Providing assessment and screening to ensure candidates meet both non-medical and medical requirements for SSI/SSDI or CAPI;
- Coordinating subsidized housing for those individuals enrolling in the program with existing homeless entry points, housing programs and housing subsidies;
- Coordinating record retrieval services with DMH/DHS/LASD based on client's medical/treatment history;
- Coordinating and leveraging Department of Mental Health, Department of Health Services and managed care systems to secure health care, mental health care and documentation of disability for clients completing a SSI/SSDI claim;
- Developing and filing high quality benefit applications;
- Coordinating and advocating with the Social Security Administration (SSA) and California Department of Social Services Disability Determination Services (DDS) regarding the status of pending benefit applications;
- Coordinating legal consultation for clients who have complex SSI/SSDI applications;
- Providing assistance for those at risk of losing, or requiring re-certification of their SSI benefits;
- Coordinating Interim Assistance Reimbursement (IAR) with relevant County Departments; and
- Coordinating benefits advocacy with the Veteran's Benefits Advocacy Team for eligible veterans.

B. Ongoing training & technical assistance for Homeless Services Agencies, Federally Qualified Health Centers, and County and other public agencies - Training and technical assistance could be from the Benefits Specialist Team or through a subcontract to maximize the reach to community organizations and clinicians. Training and technical assistance builds the capacity of the system to access SSI/SSDI and CAPI benefits at a faster and greater rate countywide and facilitates the movement of Los Angeles County's homeless disabled population onto federal/state benefits and off County general funds. Training and technical assistance should incorporate the following:

- Leverage training resources provided by the National SOAR Team;
- Provide training regarding specific requirements for SSI/SSDI and CAPI applications in the State of California;
- Incorporate the lessons learned from the B.E.S.T. project and other best practices;
- Develop and train homeless service providers and public agencies on the process for assessment and screening to ensure candidates meet both non-medical and medical requirements for SSI/SSDI or CAPI;
- Provide ongoing training and support to physicians and clinicians on identifying potential applicants and completing SSI/SSDI or CAPI documentation;

DESCRIPTION *continued*

- Develop a plan for internal quality assurance reviews to ensure the submission of high quality SSI/SSDI applications;
- Provide coordination with the SOAR program;
- Work with community stakeholders to develop a system of data collection for SSI//SSDI applications in Los Angeles County;
- Aggregate and analyze data regarding benefit applications for Los Angeles County;
- Track and report Los Angeles County SSI/SSDI outcomes to the national SOAR program; and
- Pursue continuous improvement of training and coordination to assure high quality benefits support for homeless residents.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

Disabled homeless individuals, including older adults, and those at risk of homelessness in need of applying for and obtaining SSI, SSDI, or CAPI benefits.

POTENTIAL PERFORMANCE METRICS

- The number/percentage of individuals who initiate SSI/SSDI/CAPI applications
- The number/percentage of applications that are completed and submitted to SSA or DPSS
- The number/percentage of applications approved at each level of the application process
- The time to benefits establishment

FUNDING

$6.8 million in ongoing annual DPSS funding from the General Relief SSI and Medi-Cal Advocacy Program which would be replaced by this recommended program

CONNECTION TO CITIES

SAME

✓ **COMPLEMENTARY**

NO CITY ROLE

Cities could support the County's efforts by encouraging local community medical facilities to expedite requests for documentation from the Countywide Advocacy Program staff and/or provide funding for housing subsidies for their disabled, homeless city residents who are pursuing SSI. Cities could recover the subsidy amount through Interim Assistance Reimbursement and use the IAR to support a subsidy for another person.

Strategy C5 | INCREASE INCOME

Related to Strategy Brief 3.5

Establish a Countywide Veterans Benefits Advocacy Program for Veterans Experiencing Homelessness or At Risk of Homelessness

POPULATION IMPACT

ALL FAMILIES TAY SINGLE ADULT ✓ **VETERAN** CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Department of Military and Veterans Affairs to contract for one or more Homeless Veterans Benefits Specialist Resource Teams as described herein.

LEAD AGENCY

Military and Veterans Affairs

COLLABORATING DEPARTMENTS/AGENCIES

Community-Based Organizations
Community and Senior Services
Health Services
Los Angeles Homeless Services Authority
Mental Health
Probation
Public Library
Veteran Service Organizations

DESCRIPTION

The Department of Military and Veterans Affairs will contract for one or more Homeless Veterans Benefits Specialist Resource Teams to provide assistance to eligible homeless veterans in applying for and obtaining income and/or health benefits from the Department of Veterans Affairs. The program will be operated in partnership with community-based organizations to: (1) provide wraparound case management, health, and mental health supports to house enrolled veterans; and (2) acquire VA Service-Connected Compensation or VA Non-Service-Connected Pension benefits. The components of the proposed Veterans Advocacy Program include:

A. VA Benefits Specialist Resource Teams serving all Service Planning Area (SPA) of the County, including VA will be responsible for the providing services including, but not limited to the following:

- Conduct and/or leverage outreach and engagement activities to identify eligible homeless veterans;
- Receive referrals from DPSS, DHS, DMH and other County departments of veterans who need assistance with veteran's benefits;
- Provide assessment and screening to determine whether veterans meet requirements for VA Service-Connected and Non-Service-Connected benefits;
- Coordinate with existing homeless entry points and housing programs to arrange subsidized housing or VASH Vouchers for those individuals enrolling in the program;
- Access relevant medical records from medical providers based on the veteran's medical treatment, military service, and VA claims history;

DESCRIPTION *continued*

- Coordinate and leverage Veterans Health Administration, Los Angeles County Department of Military and Veterans Affairs "Navigator" program, Department of Mental Health, Department of Health Services, and managed care systems to assist the veteran to access health care, mental health care, and documentation of disability and, when applicable, its relationship to military service for veterans completing a VA Service-Connected and/or Non-Service-Connected claim(s);
- Develop and file high-quality benefits applications, including new and original, reopened, and increased rating claims;
- Coordinate and advocate with the Veterans Benefits Administration regarding status of pending benefits applications and appeals, as well as scheduling of compensation and pension examinations;
- Coordinate legal assistance to assist veterans who have complex Service-Connected/ Non-Service-Connected claims, including claims that require a character of discharge determination, claims that have been denied and are eligible to enter the appellate phase, and "clear and unmistakable error" claims; and
- Coordinate benefits advocacy with the proposed Countywide SSI Benefits Advocacy team, as needed.

B. Ongoing training and technical assistance for veterans and homeless service agencies, Federally Qualified Health Centers, and County and other public agencies – training and technical assistance will be conducted by a VA Accredited Agent and/or Attorney, and could be from the VA Benefits Specialist Team or through a subcontract to reach government and community organizations and clinicians that serve veterans. Training and technical assistance should incorporate the following:

- Leverage training resources provided by the Supportive Services for Veterans Families program;
- Train homeless service providers and public agencies on the identification of eligible homeless veterans and the various veteran military discharge statuses;
- Train homeless service providers and public agencies on the process for assessment and screening to ensure veterans meet the requirements for VA Service-Connected compensation and Non-Service-Connected pension; and
- Provide ongoing training and support to physicians and clinicians on identifying potential applicants and completing Service-Connected and Non-Service-Connected documentation.

C. Provide quality assurance to ensure the submission of high quality Service-Connected/Non-Service-Connected applications:

- Access and monitor submitted veterans claims in VA database systems;
- Track and report programmatic outcomes; and
- Pursue continuous improvement of training and coordination to assure high quality benefits support for homeless veterans.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

Homeless veterans, including veterans who are older adults, and those veterans at risk of homelessness in need of applying for and obtaining VA benefits or related services.

Establish a Countywide Veterans Benefits Advocacy Program for Veterans Experiencing Homelessness or At Risk of Homelessness

continued

POTENTIAL PERFORMANCE METRICS

- The number of veterans who initiate applications for VA Benefits
- The number of veterans transitioned to the SSI Benefits Specialist Resource Team when expected VA Benefits receipt would be less than the SSI/SSP rate
- The number of VA/SSI/SSP claims that are approved

FUNDING

$1.2 million in Homeless Prevention Initiative funds out of the $5 million approved for implementation of the Homes for Heroes report. Utilization of this funding for this strategy was already identified in the November 19, 2015 memorandum which provided the Board of Supervisors with the Homes for Heroes implementation plan.

CONNECTION TO CITIES

SAME

✓ **COMPLEMENTARY**

NO CITY ROLE

Cities could support the County's efforts by encouraging local community medical facilities to expedite requests for medical records from the Countywide Veteran's Benefits Advocacy Program staff and/or provide funding to support advocacy efforts for their city's homeless veterans.

Strategy C6 | INCREASE INCOME

Related to Strategy Brief 8.3a

Targeted SSI Advocacy for Inmates

POPULATION IMPACT

ALL FAMILIES TAY ✓ **SINGLE ADULT** ✓ **VETERAN** ✓ **CHRONICALLY HOMELESS ADULT**

RECOMMENDATION

Direct the Sheriff's Department and the Department of Health Services, in collaboration with the Department of Mental Health, to develop an Supplemental Security Income (SSI) Advocacy Program for Inmates.

LEAD AGENCY

Health Services
Sheriff (Care Transition Director)

COLLABORATING DEPARTMENTS/AGENCIES

Mental Health
Social Security Administration

DESCRIPTION

The goal of the program would be to assist disabled, incarcerated individuals in completing and submitting their SSI application prior to discharge or in securing reinstatement of their SSI benefits, if the individual was receiving SSI prior to being incarcerated. This program should be a collaborative with the Countywide SSI Advocacy Program, as described in Recommended Strategy C4.

The following would be components of the program:

Pre-Release

A. Facility gathers list of release-eligible inmates at least three months prior to discharge, six months is preferable.

B. Benefits eligibility specialists are assigned to screen for SSI and SSDI eligibility. Screening encompasses:

- Checking each inmate's social security number, citizenship or eligible immigration status and current benefit status;
- Meeting with inmate to complete a questionnaire to determine whether individual has a severe mental or physical impairment or is aged (age 65) for potential eligibility for SSI. Also review work history and get earnings record to determine potential eligibility for SSDI.

C. Inmates who are potentially eligible for SSI or SSDI will be invited to participate in the advocacy program. Once the inmate decides to participate, he/she will be connected to the countywide SSI advocacy contractor (as described in Strategy C6) who will meet with the inmate in the jail to initiate a SSI/SSDI application and the inmate will sign

Targeted SSI Advocacy for Inmates *continued*

DESCRIPTION *continued*

release of information documents. Medical and mental health records are obtained from private providers, public providers, incarceration facility providers and other identified providers:

- An assessment is made by the contractor to determine if medical evidence is likely to be sufficient to prove disability according to SSA standards.
- If assessment determines that available records may not be sufficient to show disability, refer individual to in-house or County medical and mental health providers for assessments and reports.

D. Once sufficient medical evidence is gathered, forward eligible claims for disability to the Disability Determination Services (DDS) office. The contractor maintains contact with DDS and SSA to check on progress of the application.

E. DDS/SSA makes the initial determination regarding disability while individual is still incarcerated.

F. The contractor collaborates with Jail In Reach staff (as described in Recommended Strategy D2), who will work to locate interim or permanent housing to ensure an appropriate housing placement upon the inmate's discharge. The cost of housing from the release date to the SSI approval date can be recovered from the inmate's initial retroactive SSI benefit, through the Interim Assistance Reimbursement process.

Post-Release

G. If medical eligibility is approved, upon discharge the same contractor will work with the individual to complete the application process. If medical eligibility is denied, the contractor will pursue an appeal.

H. Once a formerly incarcerated individual begins receiving SSI or SSDI, an appropriate agency will assist the individual in transitioning to appropriate permanent housing, if the individual was placed in interim housing upon discharge.

Disabled inmates with a jail stay shorter than three months will be connected to the Countywide SSI Advocacy Program (Strategy C4) upon discharge.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

Homeless individuals scheduled for release from an LA County jail within three to six months who have been assessed to have a severe mental or physical disability (Single adults, older adults, veterans, and chronically homeless).

POTENTIAL PERFORMANCE METRICS

- Number of incarcerated individuals assessed for potential SSI eligibility
- Number of individuals with sufficient medical evidence of disability to warrant an SSI application
- Number of SSI applications made prior to release
- Number of SSI applications medically approved prior to release
- Number of SSI applications medically approved post release
- Number of formerly incarcerated individuals who obtained SSI benefits
- Number of formerly incarcerated individuals who obtained housing paid for with SSI benefits.

FUNDING

$1 million one-time funds from AB 109

CONNECTION TO CITIES

SAME

COMPLEMENTARY

✓ **NO CITY ROLE**

Strategy D
Provide Case Management and Services

Most homeless families and individuals need some level of case management and supportive services to secure and maintain permanent housing, though the specific need varies greatly, depending on the individual circumstances. The availability of appropriate case management and supportive services is key to enabling homeless families and individuals to take advantage of an available rental subsidy, increase their income, and access/utilize available public services and benefits.

Los Angeles County Homeless Initiative

Strategy D1 | PROVIDE CASE MANAGEMENT AND SERVICES

Related to Strategy Brief 1.6

Model Employment Retention Support Program

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Department of Public Social Services and Community and Senior Services to identify the key components of a Model Employment Retention Support Program and work with relevant Departments to incorporate identified services into existing programs, as feasible.

LEAD AGENCIES

Community and Senior Services
Public Social Services

COLLABORATING DEPARTMENTS/AGENCIES

Military and Veterans Affairs
Mental Health
Probation
Workforce Development Boards

DESCRIPTION

A model employment retention support program for newly-employed homeless/formerly homeless individuals could be incorporated into existing employment programs and homeless case management programs. Program elements of a model Employment Retention Support Program should include:

- Ongoing communication with newly-employed individuals to provide support and identify potential problems.
- Soft skills- Enhancing the newly-employed individual's ability to successfully manage relationships with co-workers and supervisors. Retention services must include connection to soft-skill development such as trainings and community supports.
- Résumé building to encourage and support promotion, including the exploration of volunteer work to supplement employment.
- Effective communication and coordination with case managers and housing specialists, including constant assessment of new referrals and/ or connections needed to support the newly-employed individual.
- Creating incentives to expand work-study opportunities to build skill sets.
- Communication and Life Skills – Modeling by case management staff of effective communication in a professional environment and appropriate dress code.
- A review of the Employer's company policies and Employee Handbook.
- Coordinated referrals to Self-Help Support groups – provide free community support and develop soft skills necessary to maintain employment.
- Online training in self-help and empowerment.

DESCRIPTION *continued*

- Possible adoption of the Offender Workforce Development Specialist model, including specialized training for case managers to assist individuals involved with the justice system.
- Mentorship opportunities within employment and housing programs that link and empower people seeking employment with those successfully maintaining employment.
- Financial literacy/budgeting – training and support to transition people to be self-sustaining through employment.

In addition to providing support to the newly-employed individual, to foster support at the employer level, coordination and communication with employers post-placement should include employer liaisons, available to the employer to identify issues/barriers as they arise in the course of employment, and identify service providers available to provide the needed support to the employee to address the issues identified by the employer.

As part of implementation of this strategy, County Departments will identify existing programs serving homeless families and individuals into which employment retention services could be incorporated.

CONNECTION TO CITIES

SAME

✓ **COMPLEMENTARY**

NO CITY ROLE

Cities which operate Workforce Development Boards could focus on employment retention services for recently-employed, formerly-homeless individuals. In addition, cities could proactively recruit volunteers/mentors to be employer liaisons or coaches for recently-employed persons.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

Individuals, including older adults, and families who have been recently housed and connected to employment will be eligible for ongoing employment retention support and referrals, as needed and available.

POTENTIAL PERFORMANCE METRICS

- Individuals who receive employment retention services
- Employment retention
- Percent of newly-employed individuals who experience income increase
- Percent of newly-employed individuals who secure promotions

FUNDING

To the extent that employment retention services can be incorporated into existing case management services, funding is not necessary to support this strategy. However, to the extent that recently-employed, formerly homeless individuals do not have access to case management services, there would be a cost associated with expanding one or more existing programs. As part of the implementation planning for this strategy, the capacity of current programs to incorporate employment retention services for the target population will be assessed.

Strategy D2 | PROVIDE CASE MANAGEMENT AND SERVICES **PHASE 1** *Related to Strategy Brief 8.3c*

Expansion of Jail In Reach

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Sheriff's Department and Health Services to work with their non-profit partner agencies and collaborating County departments to expand Jail in Reach to make it available to all homeless people incarcerated in a Los Angeles County jail, subject to available funding.

LEAD AGENCY

Health Services
Sheriff

COLLABORATING DEPARTMENTS/AGENCIES

Alternate Public Defender
Community and Senior Services
Housing Authority of the City of Los Angeles
Housing Authority of the County of Los Angeles
Mental Health
Probation
Public Defender
Public Health
Public Social Services
County SSI Advocacy Contractors
Community-based Providers

DESCRIPTION

This program expansion for homeless inmates should include the following elements:

- Offer all homeless inmates jail in reach services from the beginning of incarceration.
- Provide case management to homeless inmates tailored to their individual need(s) and connect inmates to services such as mental health and substance use disorder treatment on an as-needed basis.
- Coordination of all services provided to homeless inmates so that physical health, behavioral health, housing, education, employment, mentorship, and other needs are integrated into one case plan monitored by one assigned case manager, with the goal of ensuring strong service integration.
- Recruit and fund community-based service providers from across the County so that services continue seamlessly post-release with the same case management team, including connection to housing specialists and access to bridge housing until a permanent housing plan can be implemented, employment support, benefits support, transportation, and other ongoing supportive services such as mental health treatment to help homeless inmates reintegrate successfully back into the community with adequate supportive services.

In addition, consideration should be given to the inclusion in the program of self-help support groups in jail, e.g., Alcoholics and Narcotics Anonymous that are run by jail inmates. Such support groups are an integral element of the Community Model in Corrections, an evidence-based practice.

DESCRIPTION *continued*

The Department of Health Services' Housing for Health intensive case management program provides a model for the style of case management that will be required for many individuals.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

All homeless inmates in County jail including those being held prior to trial.

POTENTIAL PERFORMANCE METRICS

- Reduction in recidivism
- Reduction in homelessness
- Increased employment
- Improved healthcare outcomes
- Number of homeless inmates who receive Jail In Reach services

FUNDING

- $2,000,000 in one-time HPI funding
- $3,000,000 in one-time AB 109 funding

CONNECTION TO CITIES

SAME

COMPLEMENTARY

✓ **NO CITY ROLE**

Strategy D3 | PROVIDE CASE MANAGEMENT AND SERVICES

Related to Strategy Brief 9.3a

Supportive Services Standards for Subsidized Housing

POPULATION IMPACT

ALL FAMILIES ✓ TAY ✓ SINGLE ADULT ✓ VETERAN ✓ CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Instruct the Los Angeles Homeless Services Authority, in collaboration with the Departments of Mental Health, Public Health, Health Services, and Public Social Services, the Probation Department, and the Community Development Commission to draft and adopt a definition of supportive services and establish a set of standards for high-quality supportive services for persons in subsidized housing who have recently experienced homeless.

LEAD AGENCY

Los Angeles Homeless Services Authority

COLLABORATING DEPARTMENTS/AGENCIES

Community Development Commission

Health Services

Housing + Community Investement Department, City of Los Angeles

Housing Authority of the City of Los Angeles

Housing Authority of the County of Los Angeles

Mental Health

Probation

Public Health

Public Social Services

DESCRIPTION

Supportive services are critical to effectively transitioning formerly homeless persons from being on the streets to becoming a thriving tenant and member of the community. Supportive services in subsidized housing involve the development of a trusting, genuine partnership and relationship between the service provider and the formerly homeless tenant. This connection brings value and enhances participation in the supportive services, furthering the tenant's journey of recovery and housing stability. To most effectively achieve this goal, the County needs a consistent definition of supportive services that adhere to high quality standards, and are consistent with government funding requirements.

The definition of supportive services should consider existing established standards, such as those from Shelter Partnership's 2009 study commissioned by the Community Development Commission, Home for Good's Standards of Excellence, Veteran Affairs' Supportive Services for Veteran Families/Veteran Affairs Supportive Housing guidelines for homeless veterans, and Housing Opportunities for Persons with AIDS guidelines. The definition should include, but not be limited to the following activities:

- Connection to financial benefits (such as General Relief, Supplemental Security Income [SSI], CalFresh, etc.).
- Connection to health coverage, which is generally Medi-Cal.
- Linkages to and direct connection/ collaboration with treatment-related services (such as mental health, physical health, and substance use disorder treatment).
- Linkages to job development and training programs, school, peer advocacy opportunities, advocacy groups, self-help support groups, and volunteer opportunities, as needed and wanted by the tenant.

DESCRIPTION *continued*

- Money management and linkage to payee services.
- Transportation and linkage to transportation services.
- Peer support services. (Utilizing people with lived experience in outreach, engagement, and supportive services is an evidence-based best practice.)
- Community-building activities, i.e., pro-active efforts to assist tenants in engaging/participating in the community and neighborhood.
- Connection to specialized services provided to individuals who are: victims of Domestic Violence; Lesbian, Gay, Bi, or Transgender; transition age youth; or elderly.

Additionally, the standards for high-quality supportive services should specify that supportive services should be:

1. tenant-centered;
2. accessible;
3. coordinated; and
4. integrated.

CONNECTION TO CITIES

SAME

✓ **COMPLEMENTARY**

NO CITY ROLE

Cities which operate a public housing authority could adopt the County's definition of supportive services for formerly homeless adults and the County's standards for high-quality supportive services.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

Recently homeless adults in subsidized housing

POTENTIAL PERFORMANCE METRICS

- Number of agencies providing supportive services which adopt the County's definition and high-quality standards

FUNDING

No funding required

Strategy D4 | PROVIDE CASE MANAGEMENT AND SERVICES

Regional Integrated Re-entry Networks- Homeless Focus

POPULATION IMPACT

ALL FAMILIES ✓ TAY ✓ SINGLE ADULT ✓ VETERAN ✓ CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Office of Diversion and Reentry (OD&R), in collaboration with the Care Transitions Unit of the new Integrated Jail Health Services division, and the Sheriff to incorporate a focus on homeless individuals into the multi-disciplinary, clinically-focused Regional Integrated Re-entry Networks which are already being developed.

LEAD AGENCY

Department of Health Services
Sheriff

COLLABORATING DEPARTMENTS/AGENCIES

Mental Health
Community and Senior Services
Public Social Services
Public Health
LA Care (and other local health plans)
Los Angeles Homeless Services Authority
Probation

DESCRIPTION

The attributes of a Re-entry Network include:

- Consist of high quality mental health, physical health and substance use disorder providers with an interest and expertise in serving the re-entry population;
- Be geographically convenient, patient-friendly, and culturally competent;
- Include seamless sharing of patient records between jail medical and behavioral health services and network providers; and
- Provide either integrated services or robust links to mental health, substance use disorder, housing, case management and other social services in the community.

The early planning for a Re-entry Network system has involved treatment providers, County departments and health plans. Future efforts will include a broad array of other service providers and community groups with a keen interest in the stability of justice-involved populations.

It is recommended that this planning include a focus on homeless populations, so that the Re-entry Networks incorporate at least the following three elements:

a. High quality homeless service providers with expertise in engagement, housing placement and maintaining housing stability;
b. Integration of the role of probation officers and others who may be in charge of community supervision of individuals using reentry network services; and

DESCRIPTION *continued*

c. Development of the technical and cultural expertise to work with homeless justice-involved populations and support other providers in their regions who might benefit from assistance in managing homeless justice-involved individuals. This support may involve navigating services that support homeless justice-involved individuals, connections to job training or employment, connections to housing resources or move-in assistance, and/or the provision of homeless/housing case management.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

Homeless, justice-involved adults.

POTENTIAL PERFORMANCE METRICS

- Number of homeless justice-involved individuals who secure permanent housing
- Number of homeless justice-involved individuals who are linked to clinical services/care
- Number of homeless justice-involved individuals who retain permanent housing

FUNDING

- $800,000 in one-time HPI funding
- $2,000,000 in one-time AB 109 funding
- Medi-Cal for those services which are covered

CONNECTION TO CITIES

SAME

COMPLEMENTARY

✓ **NO CITY ROLE**

Strategy D5 | PROVIDE CASE MANAGEMENT AND SERVICES

No Related Strategy Brief

Support for Homeless Case Managers

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Chief Executive Officer and the Los Angeles Homeless Services Authority to work with each department identified below as a collaborating department to develop and implement a plan for each department to support community-based homeless case managers, which reflects the extent and nature of each department's interaction with homeless families/individuals.

LEAD AGENCY

Chief Executive Office
Los Angeles Homeless Services Authority

COLLABORATING DEPARTMENTS/AGENCIES

Alternate Public Defender
Animal Care and Control
Beaches and Harbors
Child Support Services Department
Community and Senior Services
Community Development Commission
Children and Family Services
Consumer and Business Affairs
District Attorney
Fire Department
Health Services
Mental Health
Military and Veterans Affairs
Parks
Public Health
Public Social Services
Probation Department
Public Defender
Public Library
Public Works
Sheriff's Department

DESCRIPTION

Homeless case managers, who generally work for community-based organizations and often participate in the single adult Coordinated Entry System (CES) or Homeless Families Solutions System, play a key role in combating homelessness, by engaging homeless families and individuals, connecting them to housing, assisting them to navigate and access various public services, and providing ongoing support.

County departments can play a key role in supporting homeless case managers by:

1. helping homeless families/individuals connect to a homeless case manager;
2. responding effectively to homeless case managers assisting homeless families/individuals to access and navigate County services; and
3. participating, where appropriate, in CES regional case conferencing and coordinated outreach meetings.

The specific role of each County department will vary depending on the extent and nature of the Department's contact with homeless families/individuals.

To assist families/individuals connect to a homeless case manager, individual County departments could:

- Provide space for homeless case managers to collocate at their facilities and conduct in-reach with homeless families/individuals who go to the Department for services. (This would only be applicable to departments which serve a very high volume of homeless families/individuals.)
- Implement a standardized protocol to contact a homeless case manager (who could be a domestic violence service provider) to come to

DESCRIPTION *continued*

the department's facility to engage a homeless family/individual who wishes to see a homeless case manager.

- Transport a homeless family/individual to a location where they could meet with a homeless case manager. (Few departments will have this capacity.)
- Provide a referral to a local homeless case manager to the homeless family/individual.

To respond effectively to homeless case managers assisting homeless families/individuals to access and navigate County services, individual County departments could:

- Establish a protocol for interacting with homeless case managers.
- Designate one or more homeless case manager liaisons at each location that provides services to a significant number of homeless families/individuals, plus a departmental liaison. (For some departments, a departmental liaison may suffice, if the frequency of contact with homeless families/individuals is low.)
- Facilitate relationships between local homeless case managers and the staff at various facilities.
- Participate, where appropriate, in CES regional case conferencing and coordinated outreach meetings.

CONNECTION TO CITIES

SAME

✓ **COMPLEMENTARY**

NO CITY ROLE

Cities could direct their departments which interact with homeless families/individuals to develop a plan to support homeless case managers.

The implementation plans which departments will develop under this strategy will complement the contribution of certain departments to the Countywide Outreach System (Strategy E6), Coordinated Entry System (Strategy E7), and County Specialist Support Team (Strategy E11).

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

All homeless populations, including victims of domestic violence and the older adult population.

POTENTIAL PERFORMANCE METRICS

More effective services for homeless families and individuals

FUNDING

None

Strategy D6 | PROVIDE CASE MANAGEMENT AND SERVICES

Related to Strategy Brief 8.6

Criminal Record Clearing Project

POPULATION IMPACT

ALL FAMILIES TAY ✓ **SINGLE ADULT** ✓ **VETERAN** ✓ **CHRONICALLY HOMELESS ADULT**

RECOMMENDATION

Direct the Public Defender (PD), in collaboration with the Office of the Alternate Public Defender (APD), Probation Department (Probation), Department of Public Social Services (DPSS), and Sheriff's Department to develop a Criminal Record Clearing Project (CRCP), as described herein.

LEAD AGENCY

Public Defender

COLLABORATING DEPARTMENTS/AGENCIES

Alternate Public Defender
Community-Based Organizations which work with the criminal justice re-entry population
Community and Senior Services
District Attorney
Public Social Services
Probation
Non-profit legal service providers

DESCRIPTION

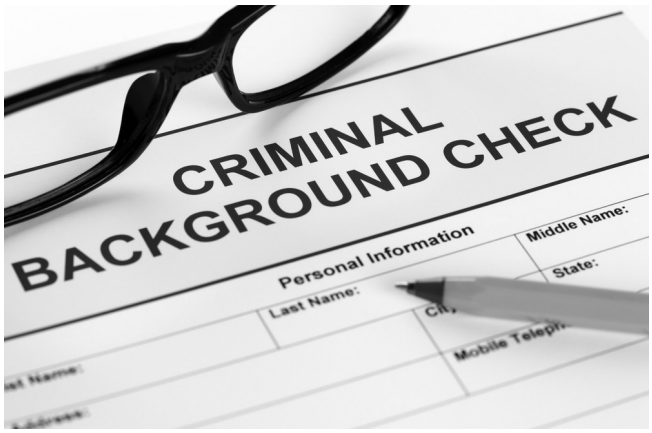
There are various barriers that homeless individuals face on a daily basis and one of hardest barriers to overcome is having a criminal record, which makes it especially difficult to obtain employment and housing, both of which are key to achieving self-sufficiency. In order to reduce this barrier, it is recommended that the PD, in collaboration with the APD, Probation, DPSS; and Sheriff:

- Develop and implement a CRCP, which could include utilization of a contract provider to coordinate the project;
- Ensure that CRCP is leveraged and coordinated with discharge planning protocols (Strategy A2), Jail in Reach (Strategy D2), regional integrated re-entry networks (Strategy D4), and bridge housing for those exiting institutions (Strategy B7) , as well as with DPSS employment programs;
- Develop a comprehensive training curriculum for participating agencies;
- Ensure clients are connected to County Alternative Courts, if eligible; and
- Create a CRCP team consisting of the aforementioned agencies and community-based partners that would be responsible for oversight and administration of the CRCP.

Through strategic partnerships and collaborative efforts, the project will aim to identify homeless and formerly homeless job-seekers who have criminal records and connect them to a legal advocate who will assist them with record clearing and other legal barriers to achieve stable housing and employment. This project

DESCRIPTION *continued*

could be implemented as a two-year pilot, after which it could be evaluated and a determination could be made as to whether to extend the project based on the results and availability of funding.



POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

Homeless individuals who have recently completed their parole or probation supervision; homeless Individuals with criminal records who are currently enrolled in DPSS' GAIN or GROW program; homeless individuals with criminal records who are seeking employment or housing; and homeless individuals being discharged from jail, hospitals or the foster care system with criminal records.

POTENTIAL PERFORMANCE METRICS

- Number of staff from CRCP agencies who complete the criminal record clearing training
- Number of individuals served through this program who complete and file a Prop 47 application or petition for criminal record dismissal (expungement)
- Number of individuals served through this program who demonstrate an increase in income within 6-12 months after a dismissal
- Number of individuals served through this program who maintain or secure housing within 6-12 months after a dismissal

FUNDING

- $200,000 in one-time HPI funding

CONNECTION TO CITIES

SAME

COMPLEMENTARY

✓ **NO CITY ROLE**

Strategy E
Create a Coordinated System

Given their complex needs, homeless individuals, families and youth often touch multiple County departments, city agencies and community-based providers. For the most part, services are not well coordinated; this fragmentation is often compounded by disparate eligibility requirements, funding streams, and bureaucratic processes. Maximizing the efficacy of current programs and expenditures necessitates a coordinated system which brings together homeless and mainstream services. The extension of Medi-Cal to single adults through the Affordable Care Act, the County's commitment to criminal justice diversion, and the focus on collaboration between the County, cities, and community partners combine to create an historic opportunity to forge a coordinated system.

Los Angeles County
Homeless Initiative

Strategy E1 | CREATE A COORDINATED SYSTEM

Related to Strategy Brief 3.3

Advocate with Relevant Federal and State Agencies to Streamline Applicable Administrative Processes for SSI and Veterans Benefits

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Chief Executive Office to advocate with relevant Federal and State agencies to streamline applicable administrative processes, in order to enhance access to SSI and Veterans benefits for applicants who are homeless or at risk of homelessness.

LEAD AGENCY

Chief Executive Office

COLLABORATING DEPARTMENTS/AGENCIES

Los Angeles Homeless Services Authority
Health Services
Mental Health
Military and Veterans Affairs
Public Social Services
United Way/Home for Good
Community-Based Organizations

DESCRIPTION

There is a significant opportunity to enhance access to SSI and Veterans benefits for applicants who are homeless or at risk of homelessness, through advocacy with the Social Security Administration, California Department of Social Services, Veterans Administration, Veterans Healthcare Administration, California Department of Corrections and Rehabilitation and any other relevant agencies to streamline applicable administrative processes. Such streamlined processes have been implemented in the past and could now be reinstated and enhanced. Specific opportunities include, but are not limited to:

1. Designating specialized local offices to handle SSI applications from County SSI Advocates;
2. Exempting cases of homeless clients applying for SSI from being transferred throughout the country; and
3. Collaboration with community- based organizations providing services to Veterans/ SSI applicants.

Advocacy is needed with the following Agencies:

- Social Security Administration- Administers Supplemental Security Income;
- California Department of Social Services Disability Determination Services – Reviews medical records as part of the SSI application process;
- Veterans Administration- Oversees the provision of veterans benefits;

DESCRIPTION *continued*

- Veterans Healthcare Administration – Oversees the provision of Veterans Healthcare services; and
- California Department of Corrections and Rehabilitation - Oversees State prison operations.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

All homeless populations

POTENTIAL PERFORMANCE METRICS

- Processing time for SSI and Veterans Benefits
- Approval rate for SSI and Veterans Benefits

FUNDING

There is no cost to the County to implement this strategy.

CONNECTION TO CITIES

SAME

✓ **COMPLEMENTARY**

NO CITY ROLE

Cities could support the County's effort through the League of Cities and/or Independent Cities Association. Individual cities could also support this effort.

Strategy E2 | CREATE A COORDINATED SYSTEM

Related to Strategy Brief 5.3

Drug Medi-Cal Organized Delivery System for Substance Use Disorder Treatment Services

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

- Direct the Department of Public Health's (DPH's) Substance Abuse Prevention and Control (SAPC) network to provide the full continuum of Drug Medi-Cal Organized Delivery System (DMC-ODS) waiver services in a culturally competent manner to people experiencing homelessness.
- Direct DPH/SAPC to leverage new flexibility through the DMC-ODS waiver to increase access to substance use disorder (SUD) services by providing field-based services in the community for people experiencing homelessness.

LEAD AGENCY

Public Health

COLLABORATING DEPARTMENTS/AGENCIES

Community-based providers
Children and Family Services
Health Services
Housing Authority of the City of Los Angeles
Housing Authority of the County of Los Angeles
Mental Health
Public Social Services
Los Angeles Homeless Services Authority
Medi-Cal Managed Care Organizations
Probation
Sheriff

DESCRIPTION

The approval of the California Department of Health Care Services (DHCS) DMC-ODS Waiver by the Federal Centers for Medicaid and Medicare Services (CMS) allows counties to voluntarily opt in to expand reimbursable services under the DMC program. This opportunity includes a fuller continuum of care and appropriate support services, standardizes level of care placements based on the American Society of Addiction Medicine (ASAM) criteria and medical necessity, ensures effective and appropriate care through quality assurance and utilization management efforts, more fully integrates physical and mental health services with the SUD service system, and transforms the overall treatment of SUD from an acute care model to a chronic care model.

The DMC levels of care (LOC) will include withdrawal management (formerly detoxification services), short-term sobering centers, residential treatment, and medication-assisted treatment, in addition to already available outpatient, intensive outpatient, and narcotic treatment programs. Additional services will also include a 24-hour toll-free access line to place individuals in the appropriate LOC, case management, recovery support, and coordination with physical and mental health. Placement at a particular LOC and service duration will be based on medical necessity, except for residential services for which the maximum service duration for adults is 90 days with a one-time 30-day extension if medically necessary, and a limit of two non-continuous 90-day episodes annually (standards vary for perinatal beneficiaries and adolescents). Criminal justice populations may be eligible for an extension of up to three months past the 90-day episode, for a total treatment length of six months if medically necessary.

DESCRIPTION *continued*

SAPC is targeting a launch date toward the end of 2016 for the new waiver services, but this timeline is dependent on County, State and Federal approvals. With the aim of expanding network adequacy, SAPC is currently reaching out to providers to encourage them to become DMC-certified. SAPC intends to provide training and technical assistance to providers seeking State DMC certification, including current DMH providers who wish to also be certified for DMC. Network adequacy is also dependent on the ability of DHCS to certify new providers and LOC, particularly residential treatment facilities.

CONNECTION TO CITIES

SAME

✓ **COMPLEMENTARY**

NO CITY ROLE

Cities could facilitate the siting of residential SUD treatment facilities within their boundaries.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

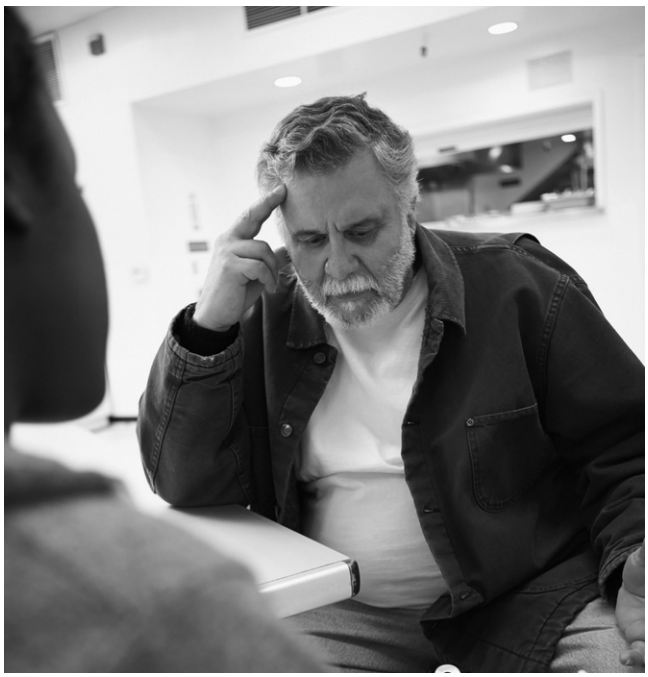
All Medi-Cal beneficiaries who qualify for SUD services.

POTENTIAL PERFORMANCE METRICS

- Number of homeless individuals who are screened and identified as needing SUD treatment services
- Number of homeless individuals admitted to SUD treatment
- Number/ percent of homeless individuals who remained in treatment for at least 30 days
- Number/percent of homeless individuals in treatment who transitioned down to the next appropriate level of care (e.g., withdrawal to residential, residential to outpatient, and outpatient to recovery services)

FUNDING

DMC-ODS will fund SUD services.



Strategy E3 | CREATE A COORDINATED SYSTEM

Related to Strategy Brief 5.4

Creating Partnerships for Effective Access and Utilization of ACA Services by Persons Experiencing Homelessness

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Health Agency to report back to the Board with recommendations to develop partnerships between health plans, health care providers, and homeless service providers to:

1. Identify and share information;
2. Emphasize case management for health care services;
3. Promote health literacy education; and
4. Connect the homeless to health care and services.

LEAD AGENCY

Health Services

COLLABORATING DEPARTMENTS/AGENCIES

Community-based providers
Children and Family Services
FEMA Emergency Food and Shelter Program
Public Health
Public Library
Mental Health
Public Social Services
Housing Authority of the City of Los Angeles
Housing Authority of the County of Los Angeles
Los Angeles Homeless Services Authority
Medi-Cal Managed Care Organizations
Probation
Sheriff
Skilled Nursing Facilities

DESCRIPTION

1. Identify and Share Information

Establish practices to enable homeless service providers to share information on homeless clients to determine enrollment status, assigned health plan and health care provider, to the extent permitted by law. Frequently, individuals experiencing homelessness who receive services from homeless service providers are asked questions about their insurance type and health plan provider. Many are uncertain of their enrollment status. Technology and consents allowing health plans to cross-reference enrollees with clients in the Homeless Management Information System (HMIS) and automatically update the client's health plan information in HMIS would be beneficial. On the health plan provider side, a report could then be generated for the health plans informing them of the homeless service program in which the client is enrolled and/or the most updated client contact information.

2. Case Management for Health Care Services

The needs of many persons experiencing homelessness are complex and, for those with the greatest vulnerabilities, pro-active health care treatment can either be difficult to access or be a lower priority for the person, thereby leading to high costs in public and private systems. In essence, ensuring that persons with complex health needs, who are experiencing homelessness, are linked to supportive field-based case management will increase the likelihood that they will proactively access needed health care services (i.e, health, mental health, and substance use disorder services). For example, housing and homeless service providers are well-positioned to deliver the types of services recommended for inclusion in the Health Homes model, including housing navigation; care coordination; transportation; health education; etc., though these services could be provided beyond health homes if Medi-Cal funding were available.

DESCRIPTION *continued*

3. Health Literacy Education
Create a health literacy education program for homeless clients by funding community-based organizations with experience in health consumer education to create and execute the education program. This program would focus on educating homeless clients and those working with homeless clients on both enrollment and renewing health coverage (Medi-Cal), and how to navigate the health care system and access care, in particular within managed care organizations.

4. Connect Homeless People to Health Care and Services
Utilize the adult Coordinated Entry System (CES) and the Homeless Families Solutions System (HFSS) to connect homeless people to the Medi-Cal application process, health care providers, health plans, and housing resources. CES and HFSS assessment tools gather self-reported information about persons experiencing homelessness, including: insurance and health plan enrollment; physical health; mental health; substance use; and resulting impacts on housing stability. There is potential to gather more targeted information via these assessments (or brief supplemental assessments) that could assist housing providers, in conjunction with the health plans, to confirm eligibility for health care services.

CONNECTION TO CITIES

SAME

COMPLEMENTARY

✓ **NO CITY ROLE**

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

Homeless Medi-Cal beneficiaries

POTENTIAL PERFORMANCE METRICS

- Percentage of homeless clients attending education programs who are still enrolled in Medi-Cal the following year
- Percentage of people attending education programs connected to primary care physicians (PCPs)
- Health outcomes of homeless clients participating in education programs
- Percentage of eligible persons enrolled in HMIS with a health care provider identified

FUNDING

Current Medi-Cal revenue, for some of the activities listed above in the description section.

Strategy E4 | CREATE A COORDINATED SYSTEM **PHASE 1**

Related to Strategy Brief 6.2

First Responders Training

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Sheriff's Department to develop:

1. a training program and implementation plan for law enforcement, fire departments and paramedics throughout Los Angeles County, including but not limited to the LA County Sheriff's Department (LASD) and the Los Angeles Police Department (LAPD); and
2. a Countywide protocol to address encampments and unsheltered homelessness.

LEAD AGENCY

Sheriff

COLLABORATING DEPARTMENTS/AGENCIES

Fire
Community and Senior Services
Health Services
Los Angeles Homeless Services Authority
LAPD
Mental Health
Probation
Public Health
Any first responder agencies Countywide that choose to be a part of this strategy

DESCRIPTION

The proposed training program would educate law enforcement, fire departments, and paramedics, i.e., first responders, about the complex and diverse needs of the unsheltered homeless population and how to connect homeless individuals to appropriate services, so as to better prepare first responders when interacting with people experiencing unsheltered homelessness. The proposed training would emphasize awareness of, and strategies for dealing with, situations that arise among unsheltered homeless individuals due to an array of issues, such as, mental illness; alcohol and/or substance abuse/addiction (training in overdose Narcan protection/prevention is one component for addressing substance abuse); co-occurring substance abuse and mental illness; and/or physical health ailments. LASD and other police agencies interested in participating in the training will develop the training and protocol based on local and national best practices.

The proposed Countywide encampment/unsheltered homeless protocol would ensure that LA County, and police forces across the County, are responding to the crises of encampments and unsheltered homelessness in a manner that both improves efficiencies across jurisdictional boundaries and achieves more effective outcomes and collaboration among police agencies and homeless service providers.

DESCRIPTION *continued*

At a minimum, the protocol must:

- provide first responders with real time information on service providers in the immediate area where they are engaging people on the streets and encampments with the desirable end result being a warm transfer to a homeless service provider who can continue the engagement process, build rapport, and assist the homeless individual to move into housing.
- address the needs of victims of domestic violence (DV) so that first responders are prepared when they engage couples/DV victims on the street and in encampments.
- address the role of Adult Protective Services (APS) in addressing the needs of endangered seniors and dependent adults.
- address best practices for serving the LGBT population.
- incorporate the concepts of Trauma-Informed Care, as applicable to first responders.

CONNECTION TO CITIES

✓ **SAME**

COMPLEMENTARY

NO CITY ROLE

The strategy will be applicable to all first responder agencies countywide.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

Law enforcement, fire departments, and paramedics, i.e., first responders. Street homeless and homeless persons in encampments will benefit from the training because they will be engaged with greater sensitivity and understanding of their needs; however, the focus for this strategy is first responders. (The implementation of this strategy will complement the County's Homeless Encampment Protocol.)

POTENTIAL PERFORMANCE METRICS

- Number of first responders trained
- Number of jurisdictions which adopt the countywide protocol

FUNDING

There would be three tiers of costs:

1. development of the training/protocol;
2. the cost for trainers to deliver the training; and
3. payment of wages for those who attend the training. The training could be added to current training curricula of first responder agencies, which might reduce the associated cost. For the Sheriff's Department, this might include incorporating this training into the Crisis Intervention Training (CIT) recommended by the Mental Health Diversion Task Force, particularly given the high incidence of mental illness among homeless individuals living on the street and in encampments.

Each agency will absorb the cost of sending its first responders to the training or seek any needed funding through the applicable annual budget process. The cost for each trainee will include the cost of curriculum development and the cost of the trainers.

Strategy E5 | CREATE A COORDINATED SYSTEM **PHASE 1**

Related to Strategy Brief 6.3

Decriminalization Policy

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the LA County Sheriff's Department (LASD), in collaboration with the District Attorney (DA), Public Defender (PD), Assistant Public Defender (APD), and Los Angeles Homeless Services Authority (LAHSA) to develop a decriminalization policy for use by the County and cities throughout the County.

LEAD AGENCY

Sheriff

COLLABORATING DEPARTMENTS/AGENCIES

Alternate Public Defender
District Attorney
Probation
Public Defender
Los Angeles Homeless Services Authority
Law enforcement agencies from cities that choose to adopt a similar policy
Mental Health

DESCRIPTION

The criminalization of homelessness has long been seen in some communities as a strategy to address some of the more visible aspects of homelessness; however, over the past few years, there has been an increased understanding that criminalization harms individuals and communities and in fact can make it more difficult to address homelessness. With new efforts by the Federal Government to encourage communities to roll back these measures, there is an increased need for the County to build on current Sheriff's Department policy and practice and take a leading role in promoting the decriminalization of homelessness throughout Los Angeles County. The decriminalization policy should:

1. Include a protocol that complements the County's Homeless Encampment Protocol (the Encampment Protocol also includes best practices that can be applied to street homelessness), to ensure that the County does not disproportionately enforce existing County ordinances against homeless families and individuals;
2. Include a process to ensure greater collaboration between judicial agencies and local alternative courts, e.g., County Homeless Court, DMH's Co-Occurring disorders Court, etc., to enable homeless individuals to address citation fines before they become a warrant and already-incurred warrants and fines, which are often a barrier to services and housing; and,
3. Support statewide efforts to stop criminalizing homelessness.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

All homeless populations, particularly homeless individuals living on the street and in encampments

POTENTIAL PERFORMANCE METRICS

This recommendation does not apply to a specific programs or services; therefore, the success will be measured by a reduction across the County in policies and practices which criminalize homelessness.

FUNDING

N/A. There is no direct cost associated with this strategy.

CONNECTION TO CITIES

✓ **SAME**

COMPLEMENTARY

NO CITY ROLE

The strategy could be implemented by each city in the County.

Strategy E6 | CREATE A COORDINATED SYSTEM **PHASE 1**

Related to Strategy Brief 6.4

Countywide Outreach System

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Los Angeles Homeless Services Authority, in conjunction with relevant County agencies and community based organizations, to develop and implement a plan to leverage current outreach efforts and create a countywide network of multidisciplinary, integrated street-based teams to identify, engage and connect, or re-connect, homeless individuals to interim and/or permanent housing and supportive services.

LEAD AGENCY

Los Angeles Homeless Services Authority (LAHSA)

COLLABORATING DEPARTMENTS/AGENCIES

Fire
Health Services
Mental Health
Probation
Public Health
Public Social Services
Sheriff
City of LA and any of the other 87 cities that would like to collaborate in this effort
United Way

DESCRIPTION

There would be at least one team in each Service Planning Area (SPA) of the County and each team should include the following staff: case manager(s), health outreach worker, mental health outreach worker, substance abuse provider, and LA Homeless Services Authority Emergency Response Team personnel. As needed, the teams would include outreach personnel from agencies that specialize in engaging TAY, Veterans, victims of domestic violence (DV) and Families.

The strategy requires a telephone hotline to connect to the street-based team(s) in each SPA with staff trained and well-versed in the services and housing opportunities in their respective SPA/region of the County.

For this strategy to be successful, it is imperative that all street teams operate with the same understanding of what it means to conduct outreach and what it means to engage homeless on the streets or in encampments. Department of Health Services' County+City+Community (C3) project, including a connection to Intensive Case Management Services (ICMS), is an appropriate model to emulate. Additionally, the outreach teams need to be aware of DV protocols and have a relationship with DV service providers. The definitions are as follows:

Outreach

Outreach is the critical first step toward locating and identifying a homeless person who is not otherwise contacting a government agency or service provider who can connect him/her to available services and housing resources. Outreach is a means of educating the community about available services, in this case for homeless individuals and families. Outreach is

DESCRIPTION *continued*

also a process for building a personal connection that may play a role in helping a person improve his or her housing, health status, or social support network.

Engagement

Engagement, when conducted properly, is a process that establishes a trusting relationship that can lead to a homeless person's participation in services and housing. The process begins after the initial street outreach contact or, for example, when a homeless person presents at an agency such as DPSS, a CES provider agency, or an HFSS Family Support Center. The engagement process can take weeks to months. There is no standard timeline for successful engagement and an outreach worker/team should never be discouraged by initial rejections of their offers to assist a homeless individual. If an agency's policies and resources do not allow for this time and consistent/persistent effort, the worker will more often than not fail at building the necessary relationship and the homeless person will likely not trust the next outreach worker/team who tries to engage them and offer housing and services.

CONNECTION TO CITIES

SAME

✓ **COMPLEMENTARY**

NO CITY ROLE

Cities could take an active role in the outreach/engagement effort and/or provide additional funding/resources to bolster the efforts in their community. Certain cities have provided funding, in the past, for homeless outreach and engagement. Sometimes this has been done through enhanced Business Improvement District (BID) teams that have been trained to engage and connect clients to homeless housing and services.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

Any individual, older adult, victim of domestic violence, youth, or family experiencing homelessness that is encountered during outreach and engagement activities. Families identified will be directed to the HFSS.

POTENTIAL PERFORMANCE METRICS

- Number of contacts-duplicated and unduplicated
- Number of people connected to health, mental health, substance abuse treatment, sources of income
- Number of people connected to interim housing
- Number of people permanently housed
- Number/percentage of people permanently housed who retain housing for 6, 12, and 24 months
- Number/percentage of people permanently housed who return to homelessness after 6, 12, and 24 months

FUNDING

$3,000,000 in one-time HPI funding

Strategy E7 | CREATE A COORDINATED SYSTEM

Related to Strategy Briefs 6.1 and 7.1

Strengthen the Coordinated Entry System

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Los Angeles Homeless Services Authority (LAHSA), in collaboration with the departments/agencies listed below, to assess the adult Coordinated Entry System (CES), the Homeless Families Solutions System (HFSS), and the "under construction" coordinated system for transition age youth, develop a recommended plan to strengthen these three related systems, and submit the plan for consideration.

LEAD AGENCY

Los Angeles Homeless Services Authority (LAHSA)

COLLABORATING DEPARTMENTS/AGENCIES

Community-based homeless service and housing providers
Community Development Commission
Children and Family Services
Fire
Health Services
Mental Health
Probation
Public Health
Public Social Services
Sheriff
Housing Authority of the City of Los Angeles
Housing Authority of the County of Los Angeles
United Way – Home for Good

DESCRIPTION

The move toward CES culminated with the implementation of the Federal "Opening Doors" Strategic Plan to prevent and end homelessness, the HEARTH Act, and the requirement that Continuums of Care (CoC) create a coordinated or centralized assessment and housing placement system. This system must be used to prioritize access to housing and services based on service need in order for a CoC to be eligible for federal homeless assistance funding. Coordinated entry is the process through which people experiencing homelessness or at-risk of homelessness can easily access crisis services through multiple, coordinated entry points, have their needs assessed and prioritized consistently, and, based upon those needs, be connected with appropriate housing interventions and supportive services. For special sub-populations, such as victims fleeing domestic violence or human trafficking, or those who are HIV-positive, CES must ensure that data-tracking and matching protocols do not conflict with confidentiality provisions to maintain individual safety and overall well-being.

The County and City of Los Angeles have come a long way in coordinating the delivery of homeless services and housing. Over the last several years, there has been greater service integration and cooperation among County departments, city agencies and community organizations. For example, in early 2013 CES for single adults rolled out in Skid Row and is now operational in all SPAs and coordinates housing and supportive services not only with the County and City of Los Angeles, but with networks of over 100 local housing providers as well. CES could be strengthened through more standardization and an enhanced administrative/technology infrastructure for the coordinated entry systems for single adults and families, as well as the youth system which is currently in pilot. In fiscal year 2014-15, 9,720 individuals were assessed for homeless services and roughly 1,738 were housed.

DESCRIPTION *continued*

The plan to strengthen CES and HFSS should include, but should not be limited to, the following three elements:

1. Strengthen the network of housing locators in each service planning area (SPA) to enhance communication, capitalize on best practices and housing/real-estate expertise in securing units, increase efficiency, and minimize duplication of landlord contacts.
2. Develop and implement a common core curriculum training for outreach workers, case managers and other staff participating in CES, inclusive of the various applicable protocols and processes, as well as how others, such as local law enforcement, should be directed to access CES.
3. Implement the following database improvements to the CES module within the Homeless Management Information System (HMIS): A) Assess the CES/HMIS platform to enhance functionality for local users, including the development of a system design workflow; B) Review and evaluate new user training for CES/HMIS, including the time to receive HMIS log-ins and identify process improvements to remedy deficiencies; and C) Identify data software that can support a CES/HMIS report feature by service planning area (SPA) and site specific reports, as well as a proposed budget for implementing this reporting feature.

CONNECTION TO CITIES

SAME

✓ **COMPLEMENTARY**

NO CITY ROLE

Cities could contribute funding to CES to support the connection of homeless populations within city boundaries to stable housing and supportive services.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

All homeless populations and sub-populations

POTENTIAL PERFORMANCE METRICS

- Number of permanent housing placements
- Length of time from VI-SPDAT screening to housing
- Number of persons engaged and assessed (in relation to the Point-in-Time Homeless Count)
- Number of matches completed resulting in housing
- Number/percentage of people permanently housed who retain housing for 6, 12, and 24 months
- Number/percentage of people permanently housed who return to homelessness after 6, 12, and 24 months
- Percent of permanent housing resources matched to homeless clients through CES
- Number of persons successfully diverted from the homeless services system

FUNDING

- $2 million of one-time Homeless Prevention Initiative funding.
- Emergency Solutions Grant (ESG) funding is a potential funding source from the County and those cities which receive ESG funding.

Strategy E8 | CREATE A COORDINATED SYSTEM **PHASE 1**

Related to Strategy Brief 7.2

Enhance the Emergency Shelter System

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Los Angeles Homeless Services Authority (LAHSA) to enhance the emergency shelter system, as described herein.

LEAD AGENCY

Los Angeles Homeless Services Authority (LAHSA)

COLLABORATING DEPARTMENTS/AGENCIES

Animal Care and Control
Children and Family Services
Community Development Commission
Community and Senior Services
Health Services
Housing Authority of the City of Los Angeles
Housing Authority of the County of Los Angeles
Mental Health
Probation
Public Health
Public Social Services
Sheriff

DESCRIPTION

The emergency shelter system should be enhanced to be an effective point-of-access to and component of an integrated homeless services system. An adequate crisis housing system ensures that individuals, families, and youth have a safe place to stay in the short-term, with access to resources and services that will help them exit homelessness quickly – optimally within 30 days

The emergency shelter system should be enhanced as follows:

1. Keep shelters open 24-hours a day/7 days a week. This would enable the shelter system to serve as a staging ground to triage/assess clients for housing, health, mental health, substance use disorder, and social service needs, particularly for outreach and engagement teams.
2. Transform emergency shelters and transitional housing into interim/bridge housing from which homeless families/individuals/youth could transition to the best suited form of permanent housing, such as rapid re-housing or permanent supportive housing. Housing location search assistance should be provided at each shelter by community-based housing locators, since such assistance is key to ensuring that the shelter system operates as effectively as possible with enough "throughputs" to move people out of the shelter system, thereby creating shelter capacity for additional homeless families/individuals/youth, including individuals and families fleeing domestic violence.
3. Establish "low threshold" common criteria for shelter eligibility across the county so that homeless families/individuals/youth can easily enter and remain in shelter without restrictive

DESCRIPTION *continued*

requirements that either preempt entry into the shelter system or force people to leave before they can transition to permanent housing.

4. Fully utilize the shelter bed assignment system in LAHSA's Homeless Management Information System so that any provider seeking a shelter bed could readily identify any available beds.
5. When possible, ensure that there is storage for belongings.
6. There needs to be confidentiality for those fleeing domestic violence and others who require it.
7. If shelters cannot accommodate pets for homeless individuals and families seeking shelter, have Animal Care and Control make alternative arrangements for pets.

There should also be a "diversion" component that helps at-risk households avoid entering shelter if alternatives can be identified and implemented, e.g. remaining in their current housing and/or placement into stable housing elsewhere, which might include living with family/and or friends.

CONNECTION TO CITIES

SAME

✓ **COMPLEMENTARY**

NO CITY ROLE

Cities could contribute funding for bridge/interim housing to address homelessness within city boundaries. The other potential role for cities is to modify emergency shelter conditional use permits that do not currently permit 24-hour a day/7-day a week operations.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

All homeless populations

POTENTIAL PERFORMANCE METRICS

- Number and percentage of individuals, families, and youth who exit to permanent housing from emergency shelter (broken out by type of housing obtained, population, and Service Planning Area (SPA)
- Number of days from housing referral for a family/individual in a shelter to housing placement (broken out by type of housing obtained, population, and SPA)
- Number and percentage of individuals, families, and youth place into permanent housing from a shelter who have retained housing after 12 months (by SPA)
- Number and percentage of disengagements from the shelter system without permanent housing or an acceptable alternative
- Returns to shelter within 6 and 12 months

FUNDING

- $1.5million in one-time HPI funds.
- Los Angeles City will need to make a corresponding commitment to keep shelters open 24/7.

Strategy E9 | CREATE A COORDINATED SYSTEM

Related to Strategy Brief 8.4

Discharge Data Tracking System

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Los Angeles Homeless Services Authority (LAHSA), in collaboration with DHS, LASD, DPH, DMH, and DCFS, to develop a consistent, systemic approach to tracking and identifying people in an institution or residential setting who were homeless upon entry or who are at risk of being homeless upon discharge.

LEAD AGENCY

Los Angeles Homeless Services Authority (LAHSA)

COLLABORATING DEPARTMENTS/AGENCIES

Children and Family Services
Health Services
Mental Health
Probation
Public Health
Sheriff
Private Hospitals
Cities that operate jails

DESCRIPTION

As part of an overall effort to improve and enhance effective discharge planning processes to reduce and prevent homelessness within LA County, a consistent approach to tracking and identifying homeless persons and those at risk of being homeless upon discharge is critical. There is currently no consistent method of identifying and tracking current and potentially homeless persons in jails, hospitals, the foster care system, or other public systems which may discharge individuals into homelessness. To the extent permitted by law, such identification is key to the implementation of effective and appropriate discharge planning.

The main components of the system would include:

- Adopt common data elements with definitions to be incorporated into data and reporting structures within County departments involved in discharge planning.
- An update of LAHSA's Homeless Management Information System data collection fields to track and report on homeless clients who were discharged from institutions.
- Utilize the County Enterprise Linkages Project to capture data and produce reports that can be used to measure progress in reducing homelessness and regularly inform discharge planning processes.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

Currently or potentially homeless persons, including the older adult population, who are in an institution or receive residential services from LASD, DMH, DHS, DPH, DCFS, private hospitals, and city jails.

POTENTIAL PERFORMANCE METRICS

- The rate of participation of agencies in utilizing the system and capturing data
- The quality of data produced
- Increase in homeless prevention activities before people are discharged

FUNDING

Each agency will absorb its own costs.

CONNECTION TO CITIES

SAME

✓ **COMPLEMENTARY**

NO CITY ROLE

Cities that operate jails could utilize the same approach to data tracking

Strategy E10 | CREATE A COORDINATED SYSTEM

Related to Strategy Brief 9.4

Regional Coordination of Los Angeles County Housing Authorities

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Housing Authority of the County of Los Angeles, in collaboration with the Housing Authority of the City of Los Angeles, to convene an ongoing, quarterly Homeless Issues Roundtable of all public housing authorities in Los Angeles County, for the purpose of identifying common issues related to combating homelessness and developing more integrated housing policies to assist homeless families and individuals. As appropriate, invite the the Departments of Community and Senior Services, Health Services and Mental Health, and community providers with subject matter expertise in housing to participate in the Roundtable.

LEAD AGENCY

Housing Authority of the County of Los Angeles

COLLABORATING DEPARTMENTS/AGENCIES

Chief Executive Office
City Housing Authorities
Housing Authority of the City of Los Angeles
Los Angeles Homeless Services Authority

DESCRIPTION

The Housing Authorities of Los Angeles County (HACoLA) and City (HACLA) have responded to local, state, and federal efforts to end homelessness by engaging in various collaborative activities that have proven to be beneficial to families and individuals in need across the County, such as:

- Partnership with the Los Angeles Homeless Services Authority (LAHSA) and the United Way of Greater Los Angeles to develop and utilize coordinated access systems that match homeless clients with housing resources and supportive services that meet their specific needs.
- Interagency agreements for several housing programs that allow families to locate units in either jurisdiction by eliminating the cumbersome "portability" process.
- Creation of a universal housing assistance application that eliminates the duplicative effort of completing several different applications when applying for multiple housing programs across both Housing Authorities.
- Alignment of policy, where possible, to facilitate a uniform eligibility determination standard across both Housing Authorities.

This history of collaboration between HACoLA and HACLA provides a foundation to institutionalize ongoing collaboration across all public housing authorities in the County with the goal of maximizing the positive impact on homeless families and individuals.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

Homeless populations with subsidized housing needs.

POTENTIAL PERFORMANCE METRICS

- Number of policies harmonized/integrated between agencies
- Number of forms standardized/harmonized between agencies

FUNDING

NA – This strategy does not require any funding to be implemented.

CONNECTION TO CITIES

SAME

✓ **COMPLEMENTARY**

NO CITY ROLE

Cities which operate their own public housing authorities can ensure that their housing authorities participate in the Homeless Issues Roundtable.

Strategy E11 | CREATE A COORDINATED SYSTEM

County Specialist Support Team

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Chief Executive Officer, in collaboration with the departments listed below, to establish a countywide team of specialists to consult with community-based homeless case managers throughout the County.

LEAD AGENCY

Chief Executive Office

COLLABORATING DEPARTMENTS/AGENCIES

Children and Family Services
Health Services
Los Angeles Homeless Services Authority
Mental Health
Public Health
Public Social Services
Probation Department

DESCRIPTION

Homeless families and individuals often have difficulty navigating County service systems and accessing the services which they need, even when assisted by a community-based homeless case manager. To address this problem and support a countywide system of community-based homeless case managers, a countywide team of specialists is needed throughout the County. The team would consist of an appropriate representative from the Department of Children and Family Services, Department of Health Services, Department of Mental Health, Department of Public Health, Department of Public Social Services, and Probation). One of the participating departments would designate a manager to lead the team.

The team would consult with community-based homeless case managers throughout the County via phone, e-mail, and live chat, and perform the following functions, as needed:

1. intervene within their own departments on behalf of specific homeless families and individuals;
2. consult among themselves; and
3. identify systemic barriers that would then be addressed at a department-wide or countywide level.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

Homeless families and individuals, including victims of domestic violence and the older adult population.

POTENTIAL PERFORMANCE METRICS

- Number of contacts with the team and team member
- Number and type of positive outcomes overall and by team member
- Number of systemic barriers identified
- Number of systemic barriers resolved

FUNDING

Each department would absorb the cost of its team member, with the possible exception of the department providing the manager to lead the team.

CONNECTION TO CITIES

SAME

COMPLEMENTARY

✓ **NO CITY ROLE**

Strategy E12 | CREATE A COORDINATED SYSTEM

Enhanced Data Sharing and Tracking

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Chief Executive Office and the Los Angeles Homeless Services Authority (LAHSA) to develop and implement a plan to enhance data sharing and tracking, as described herein.

LEAD AGENCY

Chief Executive Office
Housing Authority of the County of Los Angeles

COLLABORATING DEPARTMENTS/AGENCIES

Children and Family Services
Community Development Commission
Community and Senior Services
Health Services
Hospital Association of Southern California
Housing Authority of the City of Los Angeles
Housing Authority of the County of Los Angeles
Los Angeles County Office of Education
Mental Health
Probation
Public Health
Public Housing Authorities
Public Social Services
Sheriff
United Way

DESCRIPTION

Data sharing and the development of homeless performance targets are central to the development and effective functioning of a coordinated system to combat homelessness.

The following actions are recommended:

1. Implement common categories for tracking homelessness across key County departments that touch or serve a large proportion of homeless residents, that differentiates between:
   - Those who are literally homeless using the U.S. Department of Housing and Urban Development's (HUD's) definition;
   - Those who are at imminent risk of homelessness using HUD's definition; and
   - Those who are homeless under the individual department's definition, but do not fall within the HUD definition.
2. Identify the costs for implementing homeless data collection on a monthly basis in the Departments of Public Social Services, Children and Family Services, Health Services, Mental Health, Public Health, Probation, Sheriff and the Community Development Commission. If there are no data elements to "flag" homelessness in departmental data systems, develop and implement a plan to add and utilize such departmental data markers.

DESCRIPTION *continued*

3. Develop a plan to make LAHSA a full partner in the Enterprise Linkages Project (ELP) data warehouse, which will include the uploading of Homeless Management Information System records to the ELP data warehouse on the same basis as the County departments participating in ELP, and access for LAHSA to County department data in ELP, to the extent permitted by law.
4. Work with County Counsel to explore the use of passive consent, to the extent permitted by law (including Health Insurance Portability and Accountability Act (HIPAA)), for ELP participating departments working with vulnerable homeless populations. This consent only relates to use of ELP data at an individual level, not at an aggregate level, as no consent is required for the use of deidentified ELP data for program planning and evaluation.
5. Develop Countywide targets to reduce chronic, veteran, family, single adult and TAY homelessness.

CONNECTION TO CITIES

SAME

✓ **COMPLEMENTARY**

NO CITY ROLE

Cities with Public Housing Authorities could adopt the common method of data tracking described in number 1 above.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

All homeless populations

POTENTIAL PERFORMANCE METRICS

To be determined

FUNDING

$1 million in one-time HPI funding

Strategy E13 | CREATE A COORDINATED SYSTEM

Related to Strategy Brief 9.2

Coordination of Funding for Supportive Housing

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Instruct the Director of the Community Development Commission/Housing Authority of the County of Los Angeles and the Los Angeles Homeless Services Authority, in consultation with the Department of Mental Health, the Housing Authority of the City of Los Angeles and the Los Angeles City Housing and Community Investment Department, to:

- Align priorities and processes in order to maximize capital, operating, and service funding for supportive housing.
- Develop a coordinated funding application and award process to dramatically reduce the time required to assemble project financing, with the goal of:
  - > Attracting cities to participate in a one-stop shop for all local capital and funding commitments.
  - > Allowing funders to be more strategic in the allocation of funds, while maximizing the leveraging of State and Federal funds available to the region.
  - > Creating a more streamlined and predictable system for developers, allowing them to maximize their production by creating more certainty about the availability of funds.
  - > Expanding to include other private and public funders through the Home for Good Funders Collaborative to maximize and leverage additional resources, including funds for services and other activities designed to operate and strengthen supportive housing.

DESCRIPTION

Supportive housing is an innovative and proven solution that combines affordable housing with services that help people who face the most complex challenges to live with stability, autonomy and dignity. Supportive housing has been shown to have positive effects on housing stability, employment, mental and physical health, and school attendance. In addition, supportive housing is cost-effective as cost studies across the country demonstrate that supportive housing results in tenants' decreased use of homeless shelters, hospitals, emergency rooms, jails and prisons and therefore is often less costly than continued homelessness. Furthermore, supportive housing benefits communities by improving the safety of neighborhoods, beautifying city blocks with new or rehabilitated properties, and increasing or stabilizing property values over time.

Given the importance of supportive housing, there are multiple public agencies in Los Angeles County that regularly provide funding for the capital costs associated with the development of supportive housing. Enhanced coordination among these public agencies would increase the efficiency of the current funding system and thereby streamline the development of supportive housing.

LEAD AGENCIES

Community Developmet Commission
Los Angeles Homeless Services Authority

COLLABORATING DEPARTMENTS/AGENCIES

Health Services
Housing Authority of the County of Los Angeles
Housing Authority of the City of Los Angeles
Los Angeles City Housing and Community Investment Department
Mental Health

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

All homeless populations, but primarily chronically homeless individuals

POTENTIAL PERFORMANCE METRICS

Increase in the number of supportive housing units

FUNDING

Not applicable

CONNECTION TO CITIES

SAME

✓ **COMPLEMENTARY**

NO CITY ROLE

Cities which provide funding for the development of supportive housing could participate in the recommended ongoing working group.

Strategy E14 | CREATE A COORDINATED SYSTEM

Enhanced Services for Transition Age Youth

POPULATION IMPACT

ALL FAMILIES ✓ **TAY** SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Chief Executive Office (CEO) to work with the Los Angeles Homeless Services Authority to provide additional funding to support the expansion of the Youth Coordinated Entry System (CES) and programs providing housing navigation, access/drop-in centers, shelter, after care/case management and transitional housing for youth. Funding will be allocated based on geographic burden and need, as determined by the 2015 Homeless Count results for the Los Angeles, Glendale, Pasadena and Long Beach Continuums of Care.

Direct the Los Angeles Homeless Services Authority to work with the CEO, key county departments, the Los Angeles County Office of Education and a Community-Based Organization (CBO) serving mainstream youth to design a Youth Housing Stability Assessment pilot where one or more county departments, one or more school districts, and a CBO serving mainstream youth will administer a quick prescreening tool to determine if a youth should be referred to the Youth CES.

Direct the CEO and the Los Angeles Homeless Services Authority to work with the Los Angeles Coalition to End Youth Homelessness (LACEYH) to increase and maximize collaboration between County agencies and community-based organizations serving homeless youth.

DESCRIPTION

As directed by the Board on December 15, 2015, County Departments and Community-Based Organizations specializing in providing services to homeless youth (up to age 24) collaborated to: (1) discuss TAY homeless service needs; (2) identify gaps in available homeless services; and (3) discuss opportunities for enhanced coordination that would strengthen the homeless service delivery system for youth. Together, the group identified LAHSA's Housing Inventory for TAY (Homeless Initiative Board Letter Attachment 7) and the Directory of Services for Homeless Youth (https://www.ourchildrenla.org/community-center/directory/) developed by Our Children Los Angeles (including its online app), as the most extensive, current inventories of available TAY homeless services. With respect to the $5 million earmarked by the Board on December 15, 2015, strengthening the TAY homeless services system and enhancing the shelter system for youth, after care and transitional housing were identified as key service enhancements.

As homeless TAY are identified, a coordinated homeless service system is vital. Strengthening and providing additional access/drop-in centers where housing navigation options could be provided and expanding the current Youth CES by including TAY specific scoring and eligibility criteria is key to support the increased number of homeless youth in the County and ensuring access to homeless services.

One or more county departments, one or more school districts, and a CBO serving mainstream youth could pilot the practice of proactively assessing the housing status of TAY to identify those who are potentially homeless/at-risk of homelessness. The pilot will assess the impact of this routine assessment on the mainstream system's ability to link homeless TAY, or those at risk of homelessness to homeless/homeless prevention

DESCRIPTION *continued*

services and enhance opportunities for coordination. By assessing the housing status of TAY served within the mainstream system, homeless/at-risk TAY may be identified sooner and diverted from homelessness or the duration of the TAY's homelessness may be reduced.

Lastly, strengthening the ongoing collaboration between County departments and community-based organizations serving homeless youth is intended to result in:

1. the development of strategies to better coordinate services, resources and funding for TAY experiencing homelessness and housing instability;
2. identification of additional system gaps and solutions to fill those gaps; and
3. bringing to scale solutions and best practices that meet the housing and service needs of TAY experiencing homelessness and housing instability.

LEAD AGENCIES

Chief Executive Office
Los Angeles Homeless Services Authority

COLLABORATING DEPARTMENTS/AGENCIES

Children and Family Services
Community -Based Organizations
Community Development Commission
Health Services
Mental Health
Office of Education
Probation
Public Health
Public Social Services

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

Transition Age Youth

POTENTIAL PERFORMANCE METRICS

- The number of TAY who are housed
- The number of TAY who maintain housing
- The number of TAY who become self-sufficient
- The number of TAY who are prevented from becoming homeless

FUNDING

- $2 million one-time Homeless Prevention Initiative Funding to support expanded shelter, transitional housing and after care/case management services
- $1 million one-time Homeless Prevention Initiative Funding to support housing navigation, access/drop-in centers and enhancement of the Youth CES
- $2 million one-time Homeless Prevention Initiative Funding earmarked under Strategy B3, Rapid Re-housing
- All of this funding will be administered by LAHSA.

CONNECTION TO CITIES

SAME

✓ **COMPLEMENTARY**

NO CITY ROLE

Cities could contribute additional funding to support the key homeless services identified and proactively assess the housing status of TAY who receive services from city departments.

Strategy E15 | CREATE A COORDINATED SYSTEM

Homeless Voter Registration and Access to Vital Records

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Registrar-Recorder to collaborate with the Los Angeles Homeless Services Authority (LAHSA) and other County departments and homeless/housing service providers to enhance training and outreach efforts to homeless service providers and County agencies that serve homeless individuals, families and TAY by providing assistance in helping homeless citizens register to vote and access vital records, as described herein.

LEAD AGENCY

Registrar Recorder

COLLABORATING DEPARTMENTS/AGENCIES

Beaches and Harbors
Children and Family Services
Community and Senior Services
Health Services
Homeless Service Providers
Mental Health
Military and Veterans Affairs
Parks and Recreation
Public Health
Public Library
Public Social Services
Housing Authority of the City of Los Angeles
Housing Authority of the County of Los Angeles
Los Angeles Homeless Services Authority
Probation
Sheriff
United Way

DESCRIPTION

The Registrar Recorder has been enhancing voter registration opportunities for homeless populations and organizations that serve the homeless throughout Los Angeles County as a result of:

1. A desire to lay the foundation for reaching out to communities who may have a greater chance of not being registered through the new Motor Voter law, which automatically registers to vote all eligible voters when they obtain or renew their driver's license at the Department of Motor Vehicles (DMV).
2. Being contacted by homeless services agencies requesting voter registration information, and realizing this was an area where additional outreach was needed.

The Registrar Recorder offers a variety of outreach support which includes training, voter registration cards, tracking of voter registration, and educational materials in various languages (with an emphasis on best practices and rules specific for registering homeless populations), in addition to information on how to access vital records (birth, death and marriage certificates).

Next steps for enhancing educational information and conducting more targeted outreach and engagement on voter registration and access to vital records include:

1. Finalize a single-page document that educates individuals and organizations on voting rights.
2. Connect with LAHSA and other collaborating agencies to discuss enhancements to training on voter registration and how to access needed vital records.
3. Place voter poling facilities, when possible, within a reasonable proximity of homeless shelters and services.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

All homeless populations

POTENTIAL PERFORMANCE METRICS

- Number of trainings conducted per quarter
- Number of homeless individuals/families/TAY registered to vote per quarter
- Number of homeless individuals/families/TAY provided with vital records per quarter

FUNDING

Costs will be absorbed by the Registrar-Recorder

CONNECTION TO CITIES

SAME

COMPLEMENTARY

✓ **NO CITY ROLE**

Strategy E16 | CREATE A COORDINATED SYSTEM

Related to Strategy Briefs 5.1, 5.2, and 5.5

Affordable Care Act Opportunities

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Health Agency to maximize the contribution of the Affordable Care Act to combating homelessness, by aggressively pursuing the nine goals related to homelessness in the Health Agency's Strategic Priorities, with emphasis on: (1) maximizing revenue through the Whole Person Care (WPC) pilots and Health Homes; and (2) providing integrated physical health, mental health and substance use disorder services to address the unique needs of the homeless population within the larger health care system.

LEAD AGENCY

Health Agency

COLLABORATING DEPARTMENTS/AGENCIES

Children and Family Services
Community-Based Providers
Health Services
Hospital Association of Southern California
Housing Authority of the City of Los Angeles
Housing Authority of the County of Los Angeles
Los Angeles Homeless Services Authority
Medi-Cal Managed Care Organizations
Mental Health
Private Hospitals
Probation
Public Health
Public Social Services
Sheriff

DESCRIPTION

The extension of full-scope Medi-Cal eligibility to almost all homeless individuals under the Affordable Care Act (ACA) creates a range of critical new opportunities to combat homelessness, including:

- Federal and state revenue to pay for physical health, mental health, and substance use disorder services;
- Potential additional funding under WPC, which is included in the State's new 1115 Medicaid waiver, effective January 1, 2016;
- Potential additional funding under the Health Homes Benefit (Section 2703 of the ACA) which the State proposes to implement in Los Angeles County on January 1, 2018 for eligible beneficiaries with serious mental illness and for all others six months later.

On September 29, 2015, the newly-formed County Health Agency identified homelessness as one of its top priority areas and released nine goals related to homelessness. These goals focus on strengthening the partnerships between the Agency, health plans, County departments, and homeless service providers, in addition to addressing the unique needs of homeless clients within the broader health care delivery system. As such, pursuit of these goals, in conjunction with the other recommended Homeless Initiative strategies, is the best way to maximize the contribution of the Affordable Care Act to combating homelessness.

The Health Agency's goals regarding homelessness are:

Goal 1
Evaluate and reconfigure, as needed, housing and homeless services within the Agency and Departments to facilitate improved outcomes for homeless clients, including but not limited to the reduction/elimination of eligibility barriers and greater sharing

DESCRIPTION *continued*

of Departmental resources, to ensure that resources are available to homeless clients regardless of where they present.

Goal 2
Develop an accurate way to identify homeless clients, and those at risk of homelessness, currently served across the three Departments (e.g., development of a real-time unduplicated database, flag within shared client record) for the purpose of identifying priority clients who are determined to be likely to benefit from services from multiple Departments to regain health and residential stability.

Goal 3
Develop and implement shared standards and practices for ensuring a full range of housing, health, and prevention services are able to be delivered to clients based on client-specific needs.

Goal 4
Improve and expand upon multidisciplinary street engagement teams capable of effectively engaging homeless people living outdoors throughout the County with the express goal of securing interim and permanent housing.

Goal 5

Develop and open a range of "bridge" residential services that provide low-barrier, welcoming programs (e.g., sobering centers; day centers with showers, meals, and health services; recuperative care; detox centers; stabilization housing; congregate supervised living; and other effective bridges to permanent housing) for homeless individuals with complex health conditions in high density neighborhoods (e.g., Skid Row, Hollywood, Venice) and in unincorporated areas of LA County.

Goal 6
Maintain a real-time inventory of available residential slots, funded and usable by all three Departments, that facilitate immediate placement of homeless clients into available interim and permanent residential options appropriately matched to various need indicators (e.g., Medi-cal necessity, accessibility, level of on-site services, neighborhood, age).

Goal 7
Obtain Medi-Cal coverage, when possible, and successfully link individuals, where clinically appropriate, to comprehensive, integrated health services that are delivered in a way that is tailored for the unique needs of homeless individuals.

Goal 8
Develop screening questions for those conditions that lead to homelessness that could be incorporated into the practices of all three Departments along with methods and plans to link individuals to needed supports and services as part of the delivery of health care, mental health and public health services.

Goal 9
Engage in policy development and technical assistance activities to enhance the availability of high-quality, affordable, stable housing stock within LA County.

The Health Agency goals strive to capitalize on the opportunities presented by the ACA by:

1. having no wrong entry points or 'doors' to care;
2. integrating an array of physical health, mental health, and substance use disorder (SUD) services;
3. remaining sensitive to the unique realities and lived experiences of homeless patients by maintaining a level of 'homeless cultural competence'; and
4. effectively challenging public entities and community-based organizations to work together in unprecedented ways to maximize services to those who lack stable housing/ shelter including new strategies, systems, and platforms to aggressively enroll and retain chronically homeless individuals on Medi-Cal.

Affordable Care Act Opportunities *continued*

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

Homeless families and individuals enrolled in Medi-Cal

POTENTIAL PERFORMANCE METRICS

To be determined

FUNDING

Medi-Cal

CONNECTION TO CITIES

SAME

COMPLEMENTARY

✓ **NO CITY ROLE**

Strategy E17 | CREATE A COORDINATED SYSTEM

Regional Homelessness Advisory Council and Implementation Coordination

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

- Direct LAHSA to convene a public-private *Regional Homelessness Advisory Council* to ensure broad-based collective strategic leadership.
- Direct LAHSA to establish an intergovernmental *Homeless Strategy Implementation Group* jointly with County public administrative leaders, Los Angeles City public administrative leaders and LAHSA to coordinate the ongoing implementation of the approved homeless strategies.

LEAD AGENCY

Los Angeles Homeless Services Authority

COLLABORATING DEPARTMENTS/AGENCIES

Chief Executive Office
Children and Family Services
Community Development Commission
Health Services
Mental Health
Probation
Public Health
Public Social Services
Sheriff
Housing Authority of the City of Los Angeles
Housing Authority of the County of Los Angeles
LA City Housing & Community Investment Dept.
Various LA City public administrative agencies
Office of Education
United Way of Greater Los Angeles
LA County Continuum of Care leadership
Philanthropy representatives
Business Leadership
Community-based organizations

DESCRIPTION

Regional Strategic Alignment

The purpose of a *Regional Homelessness Advisory Council* is to provide an enduring forum for broad-based, collaborative and strategic leadership on homelessness in Los Angeles County in alignment with Home For Good. The Advisory Council would facilitate wide understanding and acceptance of national and local best practices, and communicate goals, barriers and progress to community stakeholders.

Objectives for a Los Angeles Regional Homelessness Advisory Council include:

1. Provide strategic leadership to all homeless system stakeholders, including consumers, providers of housing and services, public funders, private philanthropy, and public officials.
2. Support implementation of best practices and evidence-based approaches to homeless programming and services.
3. Promote alignment of funding across all sectors (e.g. public mainstream, private non-governmental, and homeless-specific) and the leveraging of resources in the most effective way possible.
4. Coordinate programmatic approaches across all homeless system providers and mainstream systems.
5. Support a regional strategic response to identify and resolve the primary factors contributing to housing instability and homelessness.
6. Identify and articulate artificial barriers across geographic and political spheres, in order to eliminate them.

DESCRIPTION *continued*

7. Influence mainstream systems to ensure access and accountability to homeless consumers.
8. Track progress and evaluate results.

Intergovernmental Implementation Support
The purpose of a joint LA County-City *Homeless Strategy Implementation Group* is to provide ongoing leadership support and oversight of the implementation of aligned homeless system strategies. A formally convened body will ensure an ongoing forum for high-level coordination across jurisdictions between public administrative agencies charged with implementation of aligned homelessness strategies, including but not limited to, tracking metrics, removing barriers, resolving conflicts, promoting shared responsibility, and maximizing the effective utilization of resources by the respective agencies.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

All homeless populations, including the older adult population.

POTENTIAL PERFORMANCE METRICS

- Homeless population decrease/increase
- Length of time individuals/families remain homeless
- Housing placement and retention for all homeless sub-populations
- Recidivism (return to homelessness)
- New entrants to all system points – outreach, shelter, transitional housing, rapid re-housing, permanent subsidized housing and permanent supportive housing by referral source

FUNDING

No funding required. Existing administrative funding for departments and LAHSA will cover the cost of the needed staff time.

CONNECTION TO CITIES

SAME

✓ **COMPLEMENTARY**

NO CITY ROLE

Strategy F
Increase Affordable/ Homeless Housing

TRODUCTION

The lack of affordable housing overall and homeless housing in particular contributes substantially to the current crisis of homelessness. The County and cities throughout the region can increase the availability of both affordable and homeless housing though a combination of land use policy and subsidies for housing development.

Los Angeles County
Homeless Initiative

Strategy F1 | INCREASE AFFORDABLE/HOMELESS HOUSING

Related to Strategy Brief 2.1

Promote Regional SB 2 Compliance and Implementation

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Department of Regional Planning to secure consultant assistance to develop a Countywide SB 2 strategy, which encompasses the following:

1. drafting an SB 2 model ordinance and set of best practices for distribution to jurisdictions throughout Los Angeles County; and
2. consulting with jurisdictions to promote compliance and/or implementation of SB 2.

These actions should occur in partnership with the State Department of Housing and Community Development and cities.

LEAD AGENCY

Regional Planning

COLLABORATING DEPARTMENTS/AGENCIES

None

DESCRIPTION

SB 2 (Cedillo) is enacted state legislation that requires each city and County (for the unincorporated areas) to:

1. identify at least one zone where emergency shelters are permitted as a matter of right; and
2. treat transitional and supportive housing as a residential use of property, subject only to restrictions that apply to other residential dwellings of the same type in the same zone.

SB 2 was crafted with the objective not only of ensuring that emergency shelters, transitional housing, and supportive housing are permitted in each jurisdiction, but also to ensure a realistic potential for development, when there is a willing, private developer with adequate funding.

While the County is in full compliance with SB 2 in the unincorporated areas, a number of cities in the County are not in compliance with SB 2.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

All homeless populations are impacted.

POTENTIAL PERFORMANCE METRICS

- Number of cities that adopt ordinances that comply with SB 2
- Number of emergency shelter, transitional housing, and supportive housing projects permited by right as a result of zoning code changes made by participating jurisdictions

FUNDING

$75,000 in one-time Homeless Prevention Initiative funds to secure consultant to assist with development and implementation plan to encourage countywide compliance with SB 2.

CONNECTION TO CITIES

✓ **SAME**

COMPLEMENTARY

NO CITY ROLE

County is in compliance with SB 2. All local jurisdictions are required to be in compliance with SB 2.

Strategy F2 | INCREASE AFFORDABLE/HOMELESS HOUSING

Related to Strategy Brief 2.2

Linkage Fee Nexus Study

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Department of Regional Planning to conduct a nexus study for the development of an Affordable Housing Benefit program ordinance, as referenced in the December 8, 2015 Board motion on equitable development tools.

LEAD AGENCY

Regional Planning

COLLABORATING DEPARTMENTS/AGENCIES

None

DESCRIPTION

An Affordable Housing Benefit Fee program (alternatively referred to as a housing impact fee or linkage fee program) in the unincorporated areas of the County would charge a fee on all new development to support the production of affordable/homeless housing and preservation of existing affordable/homeless housing. The fee would contribute to County affordable housing programs, including bridge housing, rapid re-re-housing, and permanent supportive housing.

A nexus study is necessary for the County to adopt a linkage fee for affordable housing. The purpose of the nexus study would be to accomplish the following:

a. Document the nexus between new development and the need for more affordable housing;
b. Quantify the maximum fees that can legally be charged for commercial and residential development; and
c. Make recommendations about the appropriate fee levels with a goal to not adversely impacting potential new development.

The study should be conducted consistent with the goal of flexibility and adaptability to local economic conditions through some of the following key considerations:

- Assess appropriate fee rates for specific industry types;
- Explore potential exemptions for industries that would otherwise bear an unfair burden from the fee program;
- Set thresholds so that fee amounts vary by project size; and
- Explore applying fees in high-growth zones, expanding residential areas or near transit.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

All homeless populations

POTENTIAL PERFORMANCE METRICS

- Amount of fees received
- Number of affordable housing units constructed

FUNDING

$450,000 in one-time Homeless Prevention Initiative funds to secure consultant to conduct a nexus study for a linkage fee for all new development.

CONNECTION TO CITIES

✓ **SAME**

COMPLEMENTARY

NO CITY ROLE

Each city which does not already have a Linkage Fee could conduct a nexus study and then implement a Linkage Fee, subject to the results of the nexus study.

Strategy F3 | INCREASE AFFORDABLE/HOMELESS HOUSING

Related to Strategy Brief 2.3

Support Inclusionary Zoning for Affordable Housing Rental Units

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Instruct the Chief Executive Officer and the Sacramento advocates to support amendment or clarification of the Costa-Hawkins Rental Housing Act to allow for an inclusionary housing requirement for new rental housing.

LEAD AGENCY

Chief Executive Office

COLLABORATING DEPARTMENTS/AGENCIES

None

DESCRIPTION

Inclusionary housing, also known as inclusionary zoning or mixed-income housing, is a policy tool that requires or encourages private housing developers to include a certain percentage of income-restricted units within new market rate residential developments. The Costa-Hawkins Act, enacted in 1995, provides owners in rent control communities the right to establish initial rental rates when there is a change in occupancy of a dwelling unit and exempts housing constructed after 1995 from local rent controls. California courts have interpreted the Costa-Hawkins Act to mean that inclusionary zoning is prohibited for all newly-constructed rental units. Specifically, in Palmer/Sixth Street Properties v. City of Los Angeles (175 Cal. App. 4th. 1396 (2009), the Court of Appeals (Second District)) held that the Costa-Hawkins Act preempted local inclusionary housing ordinances for new rental units.

Los Angeles County (LAC) could support amending or clarifying the interpretation of the Costa-Hawkins Rental Housing Act (Costa-Hawkins Act) to allow an inclusionary housing requirement for new rental housing. Such authority would apply to the County for the unincorporated areas and to each of the 88 cities in the County within its own boundaries. Support for such a proposal would be consistent with the County's State Legislative Agenda, section 5.1 Housing and Community Development, which reads: "Support proposals that provide incentives to local governments and/or developers to increase and protect affordable housing and flexibility for counties to promote a diversity of affordable housing types through local policies."

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

All homeless populations

POTENTIAL PERFORMANCE METRICS

- Number of cities adopting inclusionary zoning ordinances
- Number and type of affordable housing units created as a result of inclusionary zoning ordinances adopted by the County and cities

FUNDING

No funding required

CONNECTION TO CITIES

✓ **SAME**

COMPLEMENTARY

NO CITY ROLE

Cities could also advocate for an amendment or clarification of the Costa-Hawkins Rental Housing Act to allow for an inclusionary housing requirement for new rental housing.

Strategy F4 | INCREASE AFFORDABLE/HOMELESS HOUSING

Related to Strategy Brief 2.4

Development of Second Dwelling Units Pilot Program

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Direct the Department of Regional Planning to work with the the Community Development Commission, Chief Executive Office, and Department of Public Works to develop and recommend for Board approval a Second Dwelling Unit Pilot Program that:

1. expedites the review and approval processes to facilitate the development of second units on single-family lots in the unincorporated areas of the County;
2. provides technical assistance to homeowners, such as pre-approved architectual plans that would not require extensive engineering approvals; and
3. provides County incentives to assist homeowners in constructing new or preserving existing, unpermitted second units in exchange for providing long-term affordability covenants or requiring recipients to accept Section 8 vouchers, such as:
    a. waiving or reducing permit fees and/or utility/sewer hookup charges;
    b. working with Community Development Financial Institutions or banks to provide easy-to-access low-interest loans;) and/or
    c. providing grants that could use a mix of conventional home improvement loans, loan guarantees and CDBG or other funds.

DESCRIPTION

In 2003, the California Legislature passed AB 1866, which explicitly encouraged the development of second units on single-family lots. It precluded cities from requiring discretionary actions in approving such projects, and established relatively simple guidelines for approval. Some cities have adopted local ordinances and some have taken additional actions to help homeowners build second units. For example, the City of Santa Cruz made second units a centerpiece of its affordable housing strategy by providing pre-reviewed architectural plans, waiving fees for permitting and processing, and providing a free manual with instructions about the development and permitting process. The City also helped arrange financing with a local credit union to qualify homeowners for a period of time. This example shows how the locality removed barriers, and actively encouraged residents to pursue this type of development.

The County of Los Angeles has adopted an ordinance specifically regulating second units. The opportunity exists to develop processes to further facilitate the development of new second units and the preservation of existing,unpermitted second units. Similar opportunities exist in cities throughout the County. Construction cost of second dwelling units on single-family lots can be substantially less than creating a new unit of supportive housing because there would be no land costs involved. Per the Community Development Commission, the cost of building a new unit exceeds $300,000 compared to the cost of developing a second dwelling unit that can range from $25,000 to $150,000, depending on the size of the unit.

LEAD AGENCY

Regional Planning
Community Development Commission

COLLABORATING DEPARTMENTS/AGENCIES

Chief Executive Office
Public Works

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

All homeless populations

POTENTIAL PERFORMANCE METRICS

- Number of second dwelling units approved under new program
- Number of households with a housing subsidy housed in a second dwelling unit under new program

FUNDING

$550,000 in one-time HPI funds for pilot project ($500,000 pilot project to fund grants and/or loans and/or loan guarantees and $50,000 for administration)

CONNECTION TO CITIES

✓ **SAME**

COMPLEMENTARY

NO CITY ROLE

Each city could develop a program to promote the development of second dwelling units, which could be specifically tied to subsidized and/or homeless housing.

Strategy F5 | INCREASE AFFORDABLE/HOMELESS HOUSING

Related to Strategy Brief 2.5

Incentive Zoning/Value Capture Strategies

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Instruct the Department of Regional Planning (DRP) to secure a consultant to assess the feasibility of implementing various Incentive Zoning/Value Capture strategies, including those outlined in DRP's Equity Development Tools report provided to the Board on June 24, 2015, and in conjunction with the Board's December 15, 2015 motion on equitable development tools. The consultant, with the direction of DRP, would be tasked with:

- coordinating with jurisdictions and stakeholders in the County to develop an inventory of best practices on incentive zoning/value capture strategies;
- Assessing the market conditions of the various unincorporated areas to determine where and which Inventive Zoning/Value Capture strategies would be most practical and effective; and
- Identifying potential uses of the generated funds.

LEAD AGENCY

Regional Planning

COLLABORATING DEPARTMENTS/AGENCIES

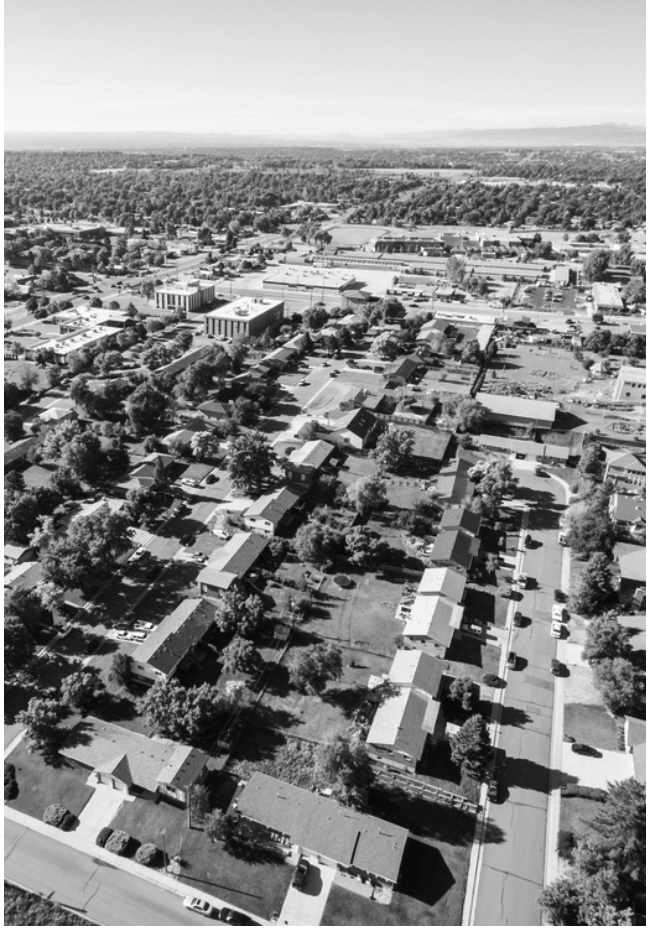
Community Development Commission

DESCRIPTION

Incentive Zoning (IZ)/Value Capture (VC) is the concept that investments such as new transportation infrastructure and planning actions such as a zone change or density bonus can increase land values, generating increased profit opportunities for private landowners. Value capture strategies seek to redirect some of the increases in land values for public good. Value capture strategies include:

1. Public Benefits Zoning;
2. Incentive Zoning/Density Bonus;
3. Housing Overlay Zoning;
4. Tax Increment Financing;
5. Community Benefits Agreements;
6. Special Assessment Districts;
7. Development Agreements;
8. Infrastructure Financing Districts; and
9. Business Improvement Districts.

Incentive Zoning/Value Capture strategies could generate funding to support the preservation of existing affordable/homeless housing and/or construction of new affordable/homeless housing units. Such funding could be used for a range of specific uses, from preserving existing Single Room Occupancy (residential) hotels to construction of permanent supportive housing and workforce housing.



POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

All homeless populations

POTENTIAL PERFORMANCE METRICS

Number of housing units preserved/developed with funding generated through implementation of Incentive Zoning/Value Capture Strategies

FUNDING

$50,000 from one-time HPI funds to secure a consultant to assess the feasibility of implementing Incentive Zoning/Value Capture strategies in the unincorporated areas.

CONNECTION TO CITIES

✓ **SAME**

COMPLEMENTARY

NO CITY ROLE

Each city could systematically review opportunities to utilize Incentive Zoning/Value Capture strategies to preserve and/or develop affordable/homeless housing.

Strategy F6 | INCREASE AFFORDABLE/HOMELESS HOUSING

Related to Strategy Brief 2.6

Using Public Land for Homeless Housing

POPULATION IMPACT

✓ **ALL** FAMILIES TAY SINGLE ADULT VETERAN CHRONICALLY HOMELESS ADULT

RECOMMENDATION

Instruct the Chief Executive Office's Real Estate Division and the Community Development Commission to work in collaboration with the departments of Internal Services, Fire, Health Services, Libraries, Parks and Recreation, Public Works, Regional Planning, and Sheriff, to assess the feasibility of making County-owned property available for the development of housing for homeless families/individuals, and develop a public land development strategy/program that shall include:

1. a comprehensive list of available County land suitable for housing, including identification of the top five most suitable properties ;
2. governing structure options, such as an agency authorized to own, hold, prepare, and dispose of public land for affordable housing;
3. identification of funds that can be used for pre-development of properties;
4. partnership opportunities with non-profit developers, if appropriate; and
5. policies to:
   a. identify and protect publicly owned sites that are good for affordable housing;
   b. define affordability levels on public land, e.g., homeless, very-low income, low-income, etc.;
   c. engage communities in the development process;
   d. link publicly owned land to other housing subsidies; and
   e. reduce the cost of development through public investment in public land set aside for housing.

DESCRIPTION

In Los Angeles County, there are opportunities for using public land for affordable housing on many different types of sites, including vacant publicly owned land, under-utilized sites, parcels where existing public facilities are no longer needed, and as part of the development of new public facilities such as community centers, libraries, fire stations, and police stations. Discounted public land can provide a valuable subsidy to the development of affordable housing, as well as facilitate the development of affordable housing in transit-accessible, amenity-rich locations. The joint development of public facilities and housing properties can lead to infrastructure cost savings, better design, and more accessible public services.

Opportunities that support using public land for homeless housing include:

- AB 2135, which provides affordable housing projects the right of first refusal to obtain surplus land held by local governments, gives project developers more time to negotiate the purchase of the surplus land, and allows the land to be sold for less than fair market value as a developer incentive; and
- Establishing a Joint Powers Authority to acquire, hold, and dispose of public land for housing.

Various examples of discounted public land are available throughout the country. Examples of Public Land being used for Affordable Housing in Los Angeles County include:

- Affordable Housing on Metro Joint Development Sites;
- Affordable Housing on Los Angeles Unified School District property;

DESCRIPTION *continued*

- Homeless Housing on surplus Department of Motor Vehicle site in Hollywood;
- Affordable Housing on land purchased by former redevelopment agencies; and
- Housing for Homeless Veterans on U.S. Department of Veteran Affairs Property in Westwood.

LEAD AGENCY

Chief Executive Office
Community Development Commission

COLLABORATING DEPARTMENTS/AGENCIES

Fire
Health Services
Library
Internal Services Department
Parks and Recreation
Regional Planning
Sheriff

CONNECTION TO CITIES

✓ **SAME**

COMPLEMENTARY

NO CITY ROLE

Each city could pursue development of homeless housing on city-owned property.

POPULATION(S) TARGETED & OTHER CATEGORIZATIONS

All homeless populations

POTENTIAL PERFORMANCE METRICS

Number of housing units developed for homeless people on County and other publicly-owned properties

FUNDING

No cost to conduct the feasibility assessment and develop the strategy/program.

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Addenda

Los Angeles County
Homeless Initiative

Summary of Approved Funding

Focus Area/Approved Strategy		APPROVED FUNDING	
		HPI-NCC*	Department Funding
A. PREVENT HOMELESSNESS			
A1	Homeless Prevention Program for Families	0	$5 million one-time CalWORKs Fraud Incentives (DPSS)
A2	Discharge Planning Guidelines	0	0
A3	Housing Authority Family Reunification Program	0	0
A4	Discharges From Foster Care and Juvenile Probation	0	0
B. SUBSIDIZE HOUSING			
B1	Provide Subsidized Housing to Homeless Disabled Individuals Pursuing SSI	$3,725,000	$1 million one-time SB 678 funding (Probation) $4 million one-time AB 109 funding
B2	Expand Interim Assistance Reimbursement (IAR) to additional County Departments and Los Angeles Homeless Services Authority	0	0
B3	Partner with Cities to Expand Rapid Re-Housing	$8,000,000**	$11 million one-time SB 678 funding (Probation) $7 million one-time AB 109 funding
B4	Facilitate Utilization of Federal Housing Subsidies	$2,000,000	0
B5	Expand General Relief Housing Subsidies	0	Interim Assistance Reimbursement of Rental Subsidies and redirected NCC savings resulting from ACA impact on MSUDRP (DPSS)
B6	Family Reunification Housing Subsidy	$1,000,000	$2 million in one-time funding plus Reinvestment of Out-of-Home Placement savings (DCFS)
B7	Interim/Bridge Housing for those Exiting Institutions	$3,250,000	$3.4 million one-time SB 678 funding (Probation) $4.6 million one-time AB 109 funding
B8	Housing Choice Vouchers for Permanent Supportive Housing	0	0
C. INCREASE INCOME			
C1	Enhance the CalWORKs Subsidized Employment Program for Homeless Families	0	CalWORKs Subsidized Employment (DPSS)
C2	Increase Employment for Homeless Adults by Supporting Social Enterprises	$2,000,000	0
C3	Expand Targeted Recruitment and Hiring Process to Homeless/Recently Homeless People to Increase Access to County Jobs	0	0
C4	Establish a Countywide SSI Advocacy Program for People Experiencing Homelessness or At Risk of Homelessness	0	Current SSIMAP Funding (DPSS)***
C5	Establish a Countywide Veterans Benefits Advocacy Program for Veterans Experiencing Homelessness or At Risk of Homelessness.	$1,200,000 (from Homes for Heroes funding)	0
C6	Targeted SSI Advocacy for Inmates	0	$1 million one-time AB 109 funding
D. PROVIDE CASE MANAGEMENT AND SERVICES			
D1	Model Employment Retention Support Program.	0	0
D2	Expand Jail in Reach	$2,000,000	$3 million one-time AB 109 funding
D3	Supportive Services Standards for Subsidized Housing	0	0
D4	Regional Integrated Re-entry Networks – Homeless Focus	$800,000	$2 million one-time AB 109 funding
D5	Support for Homeless Case Managers	0	0
D6	Criminal Record Clearing Project	$200,000	0

Summary of Approved Funding

Focus Area/Approved Strategy		APPROVED FUNDING	
		HPI-NCC*	Department Funding
E. CREATE A COORDINATED SYSTEM			
E1	Advocate with Relevant Federal and State Agencies to Streamline Applicable Administrative Processes for SSI and Veterans Benefits	0	0
E2	Drug Medi-Cal Organized Delivery System (DMC-ODS) for Substance Use Disorder Treatment Services	0	Drug Medi-Cal-Outpatient Drug Services (DPH)
E3	Create Partnerships for Effective Access and Utilization of ACA Services by Persons Experiencing Homelessness	0	0
E4	First Responders Training	0	0
E5	Decriminalization Policy	0	0
E6	Countywide Outreach System	$3,000,000	TBD
E7	Strengthen the Coordinated Entry System (CES)	$2,000,000	0
E8	Enhance the Emergency Shelter System	$1,500,000	0
E9	Discharge Data Tracking System	0	TBD
E10	Regional Coordination of Los Angeles County Housing Authorities	0	0
E11	County Specialist Support Team	0	0
E12	Enhanced Data Sharing and Tracking	$1,000,000	0
E13	Coordination of Funding for Supportive Housing	0	0
E14	Enhanced Services for Transition Age Youth (TAY)	$3,000.000	TBD
E15	Homeless Voter Registration and Access to Vital Records	0	0
E16	Affordable Care Act Opportunities	0	Medi-Cal (DHS/DMH/DPH)
E17	Regional Homelessness Advisory Council and Implementation Coordination	0	0
F. INCREASE AFFORDABLE / HOMELESS HOUSING			
F1	Promote Regional SB 2 Compliance	$75,000	0
F2	Linkage Fee Nexus Study	$450,000	0
F3	Support Inclusionary Zoning for Affordable Rental Units	0	0
F4	Development of Second Dwelling Units Pilot Program	$550,000	0
F5	Incentive Zoning/Value Capture Strategies	$50,000	0
F6	Use of Public Land for Homeless Housing	0	0
NEW FY 2015-16 FUNDING ALREADY ALLOCATED BY BOARD OF SUPERVISORS			
Rapid Re-housing for Single Adults		$10,000,000	0
Rapid Re-housing for Families		$3,000,000	0
Homeless Prevention for Families		$2,000,000	0
Homes for Heroes- Combating Veteran Homelessness		$3,800,000	0
Veterans' Housing Subsidies – Move-In Assistance		$1,100,000	0

TOTAL NEW FUNDING	*$55,700,000 one-time funding	****$44,000,000 one-time funding plus additional Departmental funding
FY 2015-16 Homeless Prevention Initiative Base Funding	$50,000,000	0
GRAND TOTAL	**$149,700,000**	

Strategies with red shading are identified as Phase 1 strategies, targeted for implementation by June 30, 2016.

* $55.7 million is comprised of: (1) $51.1 million approved by the Board on September 29, 2015; and (2) $4.6 million of FY 2016-17 Affordable Housing dollars that are not dedicated for capital expenditures.
** For Strategy B3 – Rapid Re-housing, $2 million is earmarked to serve Transition Age Youth and $5 million is earmarked for families.
*** $6.8 million in ongoing annual DPSS SSIMAP funding has been identified for this strategy.
**** $44 million is comprised of: (1) $5 million of one-time CalWORKs Fraud Incentives from DPSS; (2) $21.6 million of one-time AB 109 funding; (3) $15.4 million of one-time SB 678 funding from Probation; and (4) $2 million of one-time funding from DCFS.

Phase 1 Strategies

A. PREVENT HOMELESSNESS

A1 Homeless Prevention Program for Families

B. SUBSIDIZE HOUSING

B1 Provide Subsidized Housing to Homeless Disabled Individuals Pursing SSI

B3 Partner with Cities to Expand Rapid Re-Housing

B4 Facilitate Utilization of Federal Housing Subsidies

B7 Interim/Bridge Housing for those Exiting Institutions

B8 Housing Choice Vouchers for Permanent Supportive Housing

C. INCREASE INCOME

C2 Increase Employment for Homeless Adults by Supporting Social Enterprise

D. PROVIDE CASE MANAGEMENT AND SERVICES

D2 Expand Jail In Reach

E. CREATE A COORDINATED SYSTEM

E4 First Responders Training

E5 Decriminalization Policy

E6 Countywide Outreach System

E8 Enhance the Emergency Shelter System

Opportunities for Cities to Combat Homelessness

Focus Area/Approved Strategy		Key City Opportunities
A. PREVENT HOMELESSNESS		
A1	Homeless Prevention Program for Families	X
A2	Discharge Planning Guidelines	
A3	Housing Authority Family Reunification Program	
A4	Discharges From Foster Care and Juvenile Probation	
B. SUBSIDIZE HOUSING		
B1	Provide Subsidized Housing to Homeless Disabled Individuals Pursuing SSI	X
B2	Expand Interim Assistance Reimbursement (IAR) to additional County Departments and Los Angeles Homeless Services Authority	
B3	Partner with Cities to Expand Rapid Re-Housing	X
B4	Facilitate Utilization of Federal Housing Subsidies	
B5	Expand General Relief Housing Subsidies	
B6	Family Reunification Housing Subsidy	
B7	Interim/Bridge Housing for those Exiting Institutions	
B8	Housing Choice Vouchers for Permanent Supportive Housing	X
C. INCREASE INCOME		
C1	Enhance the CalWORKs Subsidized Employment Program for Homeless Families	
C2	Increase Employment for Homeless Adults by Supporting Social Enterprises	X
C3	Expand Targeted Recruitment and Hiring Process to Homeless/Recently Homeless People to Increase Access to County Jobs	
C4	Establish a Countywide SSI Advocacy Program for People Experiencing Homelessness or At Risk of Homelessness	
C5	Establish a Countywide Veterans Benefits Advocacy Program for Veterans Experiencing Homelessness or At Risk of Homelessness.	
D. PROVIDE CASE MANAGEMENT AND SERVICES		
D1	Model Employment Retention Support Program.	
D3	Supportive Services Standards for Subsidized Housing	
D5	Support for Homeless Case Managers	
E. CREATE A COORDINATED SYSTEM		
E1	Advocate with Relevant Federal and State Agencies to Streamline Applicable Administrative Processes for SSI and Veterans Benefits	
E2	Drug Medi-Cal Organized Delivery System (DMC-ODS) for Substance Use Disorder Treatment Services	
E4	First Responders Training	X
E5	Decriminalization Policy	X
E6	Countywide Outreach System	
E7	Strengthen the Coordinated Entry System (CES)	
E8	Enhance the Emergency Shelter System	X
E9	Discharge Data Tracking System	
E10	Regional Coordination of Los Angeles County Housing Authorities	X
E12	Enhanced Data Sharing and Tracking	
E13	Coordination of Funding for Supportive Housing	
E14	Enhanced Services for Transition Age Youth (TAY)	
E17	Regional Homelessness Advisory Council and Implementation Coordination	
F. INCREASE AFFORDABLE / HOMELESS HOUSING		
F1	Promote Regional SB 2 Compliance	X
F2	Linkage Fee Nexus Study	X
F3	Support Inclusionary Zoning for Affordable Rental Units	
F4	Development of Second Dwelling Units Pilot Program	X
F5	Incentive Zoning/Value Capture Strategies	X
F6	Use of Public Land for Homeless Housing	

Strategies with red shading are identified as Phase 1 strategies, targeted for implementation by June 30, 2016.

Homeless Initiative Policy Summits – Participating Organizations

COUNTY OF LOS ANGELES

Arts Commission
Chief Executive Office
Community Development Commission
County Counsel
Department of Child Support Services
Department of Human Resources
Department of Animal Care and Control
Department of Beaches and Harbors
Department of Children and Family Services
Department of Community and Senior Services
Department of Consumer and Business Affairs
Department of Health Services
Department of Mental Health
Department of Military and Veterans Affairs
Department of Parks and Recreation
Department of Public Health
Department of Public Social Services
Department of Regional Planning
District Attorney
Fire Department
Housing Authority of the County of Los Angeles
Office of the Alternate Public Defender
Office of the Public Defender
Probation Department
Public Library
Sheriff's Department

CITIES

City of Alhambra
City of Arcadia
City of Baldwin Park
City of Bell Gardens
City of Bellflower
City of Beverly Hills
City of Carson
City of Cerritos
City of Covina
City of Diamond Bar
City of El Segundo
City of Glendale
City of Glendora
City of Hawaiian Gardens
City of Hawthorne
City of Hermosa Beach
City of Inglewood
City of Lawndale
City of Long Beach
City of Los Angeles
City of Lynwood
City of Norwalk
City of Palmdale
City of Pasadena
City of Pomona
City of San Gabriel
City of Santa Clarita
City of Santa Fe Springs
City of Santa Monica
City of West Hollywood
City of Whittier

OTHER GOVERNMENT AGENCIES

U.S Department of Veterans Affairs
U.S. Department of Health and Human Services
First 5 Los Angeles
L.A. Care Health Plan
Los Angeles Homeless Services Authority
Los Angeles Unified School District
San Gabriel Valley Council of Governments
South Bay Council of Governments

NON-GOVERNMENTAL AGENCIES

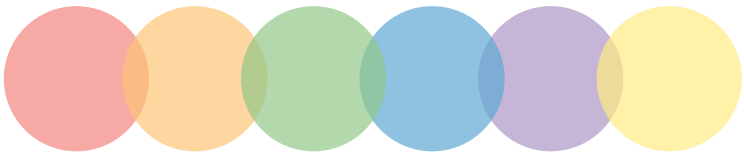
211 Los Angeles County
A Community of Friends
A New Way of Life
Alliance for Children's Rights
Alliance for Housing and Healing
Amity Foundation
APT Associates
Ascencia
Brilliant Corners
California Apartment Association
California Community Foundation
Californians for Safety and Justice
Catholic Charities of Los Angeles
Center for Living and Learning
Center for the Pacific Asian Family
Central City Association
Century
Children Now
Chrysalis
City View
City Watch LA
Coalition for Responsible Community Development
Conrad N. Hilton foundation
Corporation for Supportive Housing
Door of Hope
Downtown Women's Center

Homeless Initiative Policy Summits – Participating Organizations

NON-GOVERNMENTAL AGENCIES cont.

East San Gabriel Valley Coalition for the Homeless
Enterprise Community Partners
First Place for Youth
First Presbyterian Hollywood Church
Goldfarb Lipman, LLP
Good Seed
Habitat for Humanity
Health Net
Help Me Help You
Hilton Foundation
Hollywood Media District, Business Improvement District
Hollywood Presbyterian Church
Hollywood Property Owners Alliance
Homeless Health Care Los Angeles
Homeless Outreach Program Integrated Care System
Hospital Association of Southern California
Housing Works
Imagine LA
Inner City Industry
Inner City Law Center
Integrated Recovery Network
John Wesley Community Health Institute
LA Family Housing
LA Youth Network
Lamp Community
Legal Aid Foundation of Los Angeles
Little Tokyo Service Center
Los Angeles Centers for Alcohol and Drug Abuse
Los Angeles Family Housing
Los Angeles Regional Reentry Partnership
Los Angeles Youth Network
Mental Health Advocacy Services
Mental Health America of Los Angeles
My Friend's Place
National Health Foundation
Neighborhood Legal Services of Los Angeles County
New Economics for Women
Northeast Valley Health Corporation
Ocean Park Community Center
People Assisting the Homeless
Poverty Matters
Prototypes
Proyecto Pastoral
Public Counsel
Rainbow Services
Rapid Results Institute
REDF
Safe Place for Youth
Saint Joseph Center
Salvation Army
San Fernando Valley Community Mental Health Center, Inc.
San Fernando Valley Rescue Mission
Sanctuary of Hope
SCANP
SCHARP
SEIU
SHARE!
Shelter Partnership
Skid Row Housing Trust
South Park Business Improvement District
Southeast Asian Community Alliance
Southern California Grantmakers
Southwestern Law School
SRO Housing Corporation
St. Anne's
St. Joseph Center
State Parole Division
Step Up
The Midnight Mission
The Salvation Army
Tong Consulting
Union Rescue Mission
Union Station Homeless Services
Unite Way of Greater Los Angeles
United Friends of the Children
United Homeless Healthcare Partners
United Way of Greater Los Angeles/Home for Good
University of Calgary
University of California, Irvine
University of California, Los Angeles
University of Southern California
Upward Bound House
Urban Partners
Valley Oasis
Volunteers of America Los Angeles
Watts Healthcare Corporation
Watts Labor Community Action Committee
WCAY, Inc.
Weingart Foundation
Westside Coalition
Women Organizing Resources, Knowledge and Services
YWCA Santa Monica-Westside

Los Angeles County
Chief Executive Office

Los Angeles County Homeless Initiative

priorities.lacounty.gov/homeless