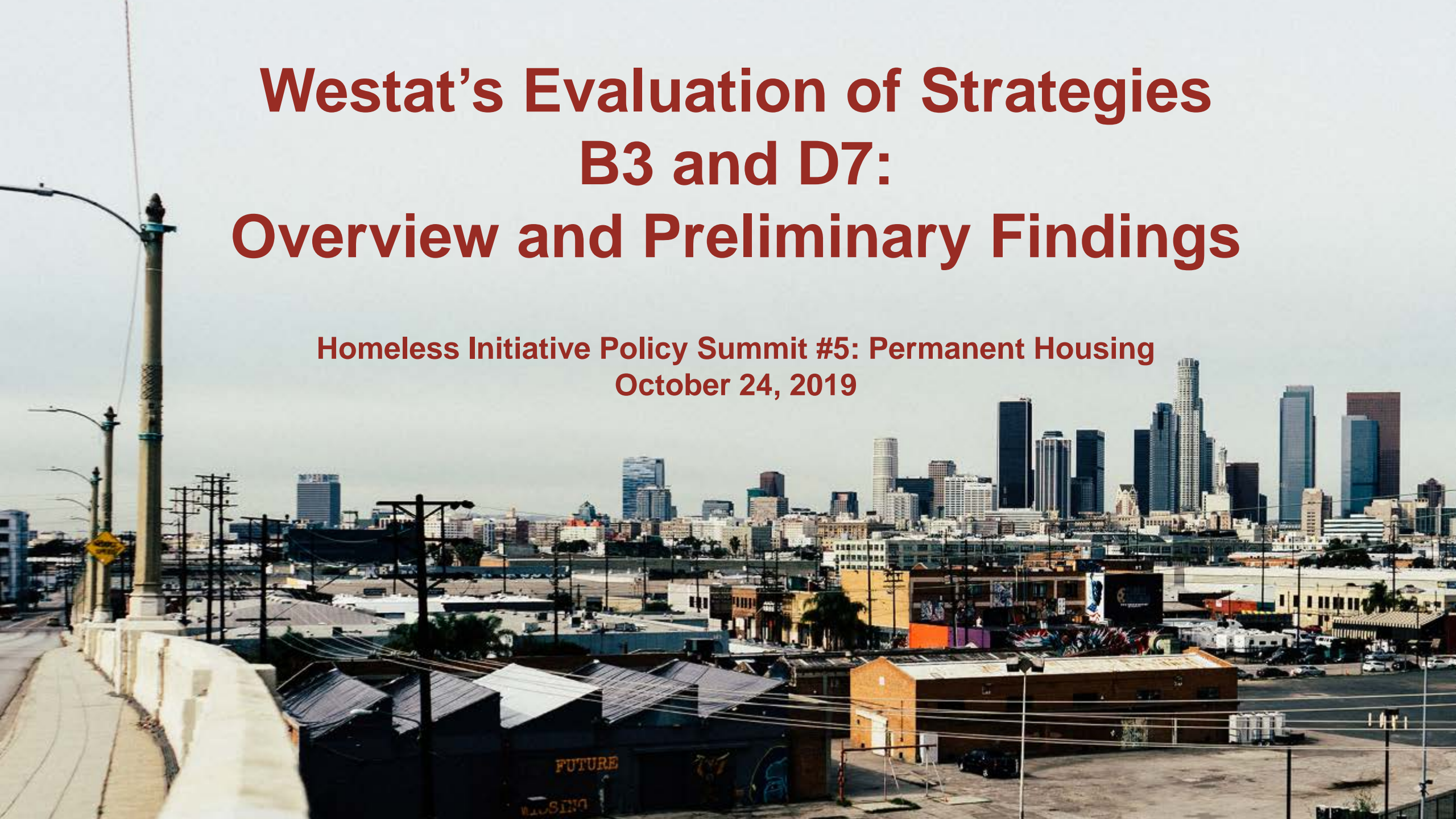


# **Westat's Evaluation of Strategies B3 and D7: Overview and Preliminary Findings**

**Homeless Initiative Policy Summit #5: Permanent Housing  
October 24, 2019**



# Presentation Overview

- Strategy B3 evaluation
  - Overview of Strategy B3
  - Evaluation Methods
  - Qualitative Findings
- Strategy D7 evaluation
  - Overview of Strategy D7
  - Evaluation Methods
  - Qualitative Findings
- Summary
- Next steps

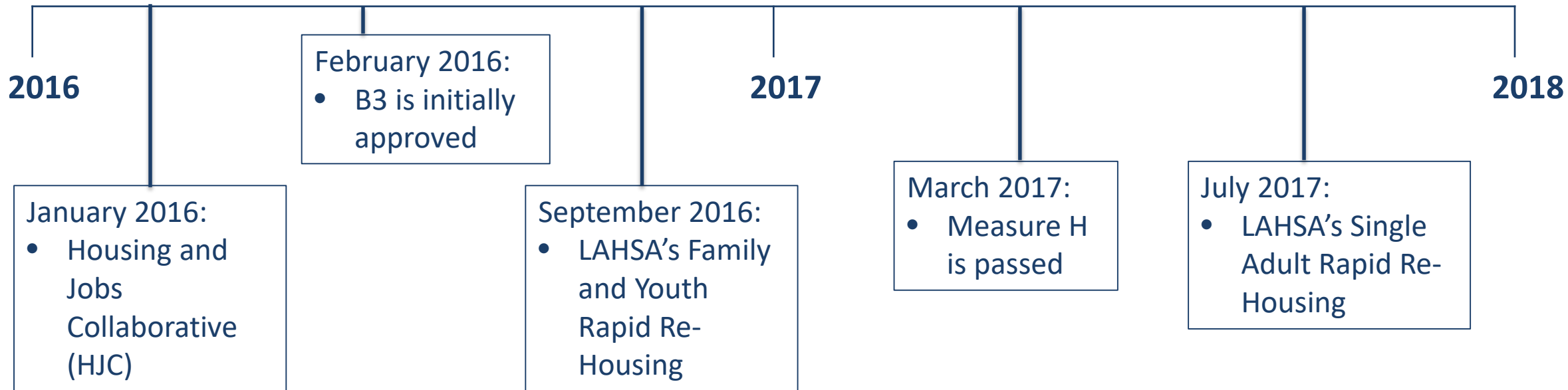
# **Strategy B3 Evaluation: Overview, Methods, and Preliminary Findings**

**Homeless Initiative Policy Summit #5: Permanent Housing  
October 24, 2019**

**DEBRA J. ROG, PI  
KATHARINE GALE, CO-PI  
CLARA WAGNER, PROJECT DIRECTOR**

# Overview of Strategy B3

Goal: To expand availability of rapid re-housing



# Evaluation Purpose and Questions

- How has Strategy B3 affected the operation and outcomes of Rapid Rehousing (RRH) in Los Angeles County?
- Have there been changes in:
  - Funding and training?
  - Services and supports (financial assistance, case management)?
  - Housing identification and navigation?
  - Identification and enrollment of clients?
  - Population served? (Forthcoming)
  - Client outcomes? (Forthcoming)
- Are there variations by population, provider, or SPA?

# Evaluation Methods

## Document Review

- HI strategic planning documents and quarterly reports
- HI performance evaluations
- Budgets
- Dashboards and publicly available documents from LAHSA

## Interviews and Focus Groups

- 15 interviews with key administrators (CEO, LAHSA, DHS, Brilliant Corners, DCFS, HACLA, LACDA, PATH)
- 13 interviews with agency providers
- 4 focus groups with front line staff (4-7)
- 5 focus groups with rapid re-housing recipients (2-9)

## Administrative Data Analysis (currently underway)

- All households served by RRH since July 1, 2016
- Data sources:
  - CHAMP
  - HMIS

# Overall Findings for Strategy B3

- Stakeholders generally describe B3 as offering more resources and more flexibility
- Strategy and guidance around implementation has evolved over time
- Variability in implementation across providers with regard to:
  - Duration and nature of case management
  - How housing is identified and maintained
  - Process of client identification and enrollment
- Challenges persist around engaging landlords, navigating LA County's tight housing market, and insufficient resources to meet the need

# Funding and Training

- B3 funding is perceived as more flexible than other sources. Can cover staffing, rental assistance, furniture, household supplies, etc.
- Not much guidance/training around implementation initially, but increased over time (SRS, minimum practice standards, one-on-one technical assistance)
- Current trainings and guidance from LAHSA include:
  - Boot Camps for direct line staff
  - Peer-to-peer learning communities to share ideas, resources
  - Topics: available local resources, information about leases/evictions/progressive engagement
- Providers would like more training on
  - How to help clients with income progression
  - Critical time intervention



# Financial Assistance

- More assistance available, for longer durations, and with greater flexibility under B3
- Not yet a systems approach – nature of assistance client receives depends on where and when RRH is accessed
  - Most providers report assistance is determined on a “case by case” basis
  - At the same time, some providers:
    - view as a set 2-year program or one with rigid steps
    - apply standard formula or algorithms, in lieu of, or coupled with, progressive engagement
  - In practice, assistance may be driven by provider budget cycles, with availability reduced at the end of the year
- Providers report the amount provided is insufficient to meet families’ needs



# Case Management

- Nature and amount of case management varies by provider
  - Most provide connection to services (internal and external)
  - Some provide budgeting and housing plans, neighborhood orientation
  - Home visits rarely provided
- There is consensus around minimum contact acceptable amount (1 meeting per month)
- Caseloads differ across populations (1:40 for families, and 1:20 for youth) and depend on available agency resources
- Case managers (and other staff) experience high turnover and burnout



# Housing Identification and Navigation

- Providers struggle to find housing with limited availability of affordable units
- There is variation across provider, population, and SPA in
  - Housing location processes and resources
  - Expectations for clients' role in housing search
- Challenges include
  - Finding willing landlords
  - Managing landlords' expectations regarding incentives
  - Competition for landlords across programs
  - Managing clients' expectations
- Resources include
  - PATH "LeaseUp" program
  - Shared housing (especially for youth)



# Identification and Enrollment of Clients

- System-wide requirements around eligibility exist, but prioritization and matching not yet in place
- Role of CES in RRH differs by population and by SPA
  - Regional variation in processes of identification and referral
  - Process of family identification and referral poses unique challenges
  - Greater coordination in youth system
- Challenges include
  - Over-enrollment and/or high caseloads & insufficient resources to serve all who are eligible
  - Lack of transparency around enrollment criteria across providers
  - Perception RRH is serving higher acuity clients
  - Prospect of prioritization of RRH to those with higher needs is meeting resistance



# **Strategy D7 Evaluation: Overview, Methods, and Preliminary Findings**

**Homeless Initiative Policy Summit #5: Permanent Housing  
October 24, 2019**

**DEBRA J. ROG, PI  
SUZANNE WENZEL, CO-PI  
CLARA WAGNER, PROJECT DIRECTOR  
TAYLOR HARRIS, GRADUATE RESEARCH ASSISTANT**

# Overview of Strategy D7

- To provide services and subsidies for permanent supportive housing
  - Integrated care model
    - Intensive case management services
    - On-site and field-based specialty mental health and substance use disorder services
  - Access to local rental subsidies when federal subsidies are insufficient
- Implementation date: July 1, 2017
- Collaborating Agencies: Los Angeles County Department of Health Services (DHS), Department of Mental Health (DMH), and Department of Public Health Substance Abuse Prevention and Control (DPH-SAPC)

# Evaluation Purpose and Questions

How has Strategy D7 affected the operation, outcomes, and inventory of Permanent Supportive Housing (PSH) in Los Angeles County?

Have there been changes in the:

- Funding and inventory of housing?
- Intensity and role of case management?
- Coordination of services?
- Training, guidance, and collaboration?
- Client identification, matching, and placement in housing?
- Retention in housing?
- Population served? (Forthcoming)
- Client outcomes? (Forthcoming)

# Evaluation Methods

## Document Review

- HI strategic planning documents and quarterly reports
- HI performance evaluations
- Budgets
- Dashboards and documents from LAHSA, DHS, DMH, DPH

## Interviews and Focus Groups

- 11 interviews with key administrators (CEO, DHS, LAHSA, DPH-SAPC, DMH, HACLA, LACDA/HACOLA, Brilliant Corners)
- 15 interviews with agency providers (12 completed)
- 3 Focus Groups with program directors (2-7 participants)
- 3 Focus Groups with front-line staff (3-6 participants)

## Administrative Data Analysis (currently underway)

- All households served by PSH since July 1, 2017
- Data sources:
  - CHAMP
  - HMIS



# Overall Findings for Strategy D7

- Stakeholders are generally positive about D7. They note that D7 provides:
  - More flexibility and resources
  - More quality training and support
  - More holistic, comprehensive services
- However, challenges persist including:
  - Meeting the complex needs of high acuity clients
  - Navigating new service coordination efforts
  - Frequent staff turnover
  - Recent reductions in resources
  - LA County's tight housing market and vast geography

# Funding and Housing Inventory

- D7 has led to more flexible funding for services
- Providers appreciate dedicated funding for services, particularly to serve clients in pre-existing units and to facilitate client retention
- Dedicated services funding has facilitated development of new housing inventory
- Challenges
  - Funding, which increased under D7, has recently tightened
  - Despite improvements, funding and housing stock insufficient
  - Scattered site housing presents unique challenges



# Intensity and Role of Case Management

- D7 has led to smaller case loads, based on acuity (1:20 for high, 1:40 for low)
- Frequency of case management depends on client need (ranging from 1 contact per month to multiple home visits per week)
- Case managers
  - Connect at coordinated entry, facilitating move-in
  - Help with housing navigation and stabilization
  - Act as liaisons between client and property managers/landlords
  - Support housing authority applications and recertification process
- Case management is reportedly
  - Hands-on, individualized, and intensive
  - Tailored to acuity, client needs/choice, recency of housing placement



# Coordination of Services

- Case managers play key role in connecting clients to needed services
  - Health, mental health, substance use
  - Employment/vocation services (especially for youth)
  - School-based services and child care (for families)
- Through D7, reported increases in health, mental health, and substance abuse service access and coordination (CENS, FSP) at project-based sites
  - Access to on-site mental health care
  - Client referral for substance abuse screening and treatment
  - Team-based coordination of services
  - Case manager supports attendance at offsite medical appointments, home nursing visits



# Challenges to Service Delivery and Coordination

- Caseloads remain high and/or time intensive in some cases (turnover, fluctuating client needs)
- Staff burnout and turnover is significant
  - Varies across providers, caused by a variety of factors
  - Results in large caseloads; gaps in service coordination; lack of sustained knowledge
- Challenges to service delivery under D7 include
  - Scattered site housing across vast geographic distances
  - Initial role confusion and potential duplication of services
  - Differing philosophies across DHS, DMH, DPH/SAPC, providers
  - Clients can be hard to engage; hard to project need for services
  - Lack of communication across providers
  - Delays in mental health intakes & insufficient substance abuse resources
  - Barriers to medical care access

# Training, Guidance and Collaboration

- More training and guidance available through DHS under D7
- Positive assessments of Case Management Institute, monthly trainings, and “coaching model”
- Areas for improvement: need for more focus on best practices (i.e., housing first, harm reduction), training not always applicable to perceived role
- D7 has necessitated and resulted in increased collaboration across agencies (DMH, DPH, DHS), PSH providers, and staff
- Collaboration has helped systems work together to identify and address problems and barriers (e.g., delays in filling units, challenges in navigating applications through the housing authorities)

# Client Identification, Matching, and Housing Placement

- Clients identified primarily through CES, but also through DHS
- Providers report employing a housing first model, minimal exclusionary criteria
- Exclusionary criteria include screenings by the housing authorities, landlords, and requirements of specific buildings funding sources
- D7 has helped streamline the process of placing matched clients in housing
  - Families are the hardest to place
- Challenges: successful targeting of high acuity clients, serving undocumented clients, delays in filling units



# Retention

- Retention in housing generally perceived to be high; some perceive an increase under D7, others say it's still too early to measure or was already high
- D7 provides resources that reportedly allow for
  - Extended case management support, including help with annual recertification, facilitating retention
  - More availability on-site to coordinate with property managers
- Retention still challenged by substance use, some clients' need for a higher level of care, the housing market, and staff turnover
- Loss of housing due to eviction, however, appears to be rare
  - Primary reason cited was violation of lease agreement
  - Efforts by providers to coordinate with property managers to preempt eviction by catching problems or relinquishing housing



# **Strategies B3 and D7 Evaluations: Summary and Next Steps**

**Homeless Initiative Policy Summit #5: Permanent Housing  
October 24, 2019**

# Summary for B3 and D7

- Strategies B3 and D7 have resulted in more resources that offer greater flexibility
- B3 has provided more resources for rapid re-housing throughout the county, with financial assistance tailored to people's needs and context
- D7 has strengthened case management and service coordination for high acuity individuals with complex needs
- Challenges
  - For B3, primary challenges are around standardizing RRH implementation and engaging landlords
  - For D7, primary challenges are around barriers to service access and coordination
  - Staff burnout and turnover and the housing market are challenges for both strategies

# Next Steps

	Document Review	Interviews and Focus Groups	Administrative Data Analysis
B3 (RRH)	Ongoing	Interviews with ~2 private landlords and ~3 CES leads	Examining client-level characteristics, service receipt, and outcomes (time to housing, length of stay in housing, exits to permanent housing)
D7 (PSH)	Ongoing	Interviews with 3 remaining PSH program directors and 2-3 property managers	Examining client-level characteristics, service receipt, and outcomes (time to housing, length of stay in housing, exits to permanent housing)

# Contact Information

Debra Rog, *Principal Investigator, Strategies B3 and D7*

[DebraRog@westat.com](mailto:DebraRog@westat.com)

Katharine Gale, *Co-Principal Investigator, Strategy B3*

[kgaleconsulting@sbcglobal.net](mailto:kgaleconsulting@sbcglobal.net)

Suzanne Wenzel, *Co-Principal Investigator, Strategy D7*

[swenzel@usc.edu](mailto:swenzel@usc.edu)

Clara Wagner, *Project Director, Strategies B3 and D7*

[ClaraWagner@westat.com](mailto:ClaraWagner@westat.com)

Taylor Harris, *Graduate Research Assistant, Strategy D7*

[TaylorH@usc.edu](mailto:TaylorH@usc.edu)