

Homeless Initiative Fiscal Year 2023-24 Funding Recommendations Process

Community Stakeholder Input (Draft 11/7/22)

Community and Stakeholder Engagement Process

Background

- In late-Spring 2022 the Homeless Initiative (HI) in partnership with LA County’s Homeless Rehousing System agencies and departments, the community, and other stakeholders, began developing plans to implement the [New Framework to End Homelessness in Los Angeles County](#) approved by the Board of Supervisors (the Board).
- At the same time the HI also began planning the development of draft Fiscal Year 2023-24 HI Funding Recommendations to support implementation of the New Framework. The Board directed HI to submit the draft FY 2023-24 Funding Recommendations to the Board by January 2023 for consideration.

Community and Stakeholder Engagement Process

- In September and October 2022, the HI conducted the following 18 Community Listening Sessions:
 - 8 Service Planning Area (SPA) Sessions, one in each SPA
 - 7 City/Councils of Government (COG) Sessions, one in each COG area
 - 2 Sessions with People with Lived Expertise
 - 1 Countywide Session in Spanish
- Simultaneously, from August through October 2022 the HI conducted 8 additional stakeholder planning meetings.
 - 1 Homeless Service Provider (Executive Director) Meeting
 - 5 Homeless Rehousing System Lead Agency planning meetings
 - 3 HI Strategy Lead Department/Agency Meetings

This document summarizes the most common recommended changes to the Homeless Rehousing System elevated during the Community and Stakeholder Engagement Process described above, and what actions the County proposes to take to be responsive to those recommendations.

Outreach	
Stakeholder Recommendations	County Response
1. Increase the number of outreach teams that can serve clients with complex health, mental health, and substance use disorder conditions, as well as clients who need assistance with Activities of Daily Living (ADL).	1. The Homeless Initiative is identifying funding to increase the number of Department of Mental Health (DMH) Homeless Outreach and Mobile Engagement (HOME) teams and Department of Health Services (DHS) Multi-Disciplinary Teams (MDTs). The existing and expanded teams will be able to serve an increased number of clients with physical health, mental health, and substance use disorder conditions. The teams will also be able to assess for ADL needs and connect clients to caregiving services, In-Home Supportive Services, and Enriched Residential Care. In addition, DHS is implementing four new mobile medical clinics that will provide clinical services to unsheltered clients countywide.
2. Increase outreach to encampments.	2. The expanded HOME and MDT teams will be able to serve more clients, including clients in encampments. In addition, the DHS mobile clinics will provide medical and behavioral health services to patients directly in encampments.
3. Provide outreach teams and clients with more support for housing navigation and more housing placement options.	3. The draft Fiscal Year (FY) 2023/24 Homeless Initiative Funding Recommendations include increased funding for LAHSA to fund housing navigation for unsheltered people experiencing homelessness. In addition, the Housing and Urban Development Continuum of Care Notice of Funding Opportunity for Unsheltered Homelessness can increase housing support for unsheltered people countywide. If awarded, up to \$3 million in funding will be utilized to provide housing navigation services to assist unsheltered people to navigate all steps in the housing process. Another \$3.3 million will be used for tenant-based rental assistance to house unsheltered individuals in Permanent Supportive Housing.
4. Increase the number of people with lived expertise on outreach teams.	4. DMH and the Department of Public Health (DPH) are both in the process of increasing the number of people with lived expertise through the Medi-Cal Peer Support Services Specialist Program. This program provides peer certification, which will allow people with lived expertise to become billable Medi-Cal providers for a defined set of services. In addition, DMH is exploring the implementation of salary bonuses for Peer Certification and field-based positions. DHS requires that each MDT have at least 1 team member with lived expertise. With the expansion of the MDTs, there will be a corresponding increase in the number of staff with lived expertise on the teams. LAHSA's Access and Engagement (A&E) Department prioritizes hiring individuals with lived expertise during their interview process. Currently, 25% of A&E staff reported having lived experience. LAHSA continues to promote the growth and development of these staff by implementing a Professional Development Program that provides outreach workers the opportunity to enhance their skills and knowledge in focused areas, opening doors for long-term growth.

Outreach	
Stakeholder Recommendations	County Response
5. Assess reimbursement rates for outreach to ensure they cover the full cost of providing the scope of services and address recruitment and retention challenges.	5. The Homeless Initiative will convene a working group to analyze and make recommendations on reimbursement rates for outreach services.
6. Implement flexible multi-year contracts with service providers to ease contract administration burden and to enable providers to be more responsive to changes in unsheltered homelessness and evolving client needs.	6. The Homeless Initiative is working with LAHSA and County departments to identify any delegated authorities or contractual changes that are needed by LAHSA or County departments to implement flexible multi-year contracts.
7. Increase communication and coordination between cities and Councils of Government (COG) and the outreach teams, interim housing providers, and permanent housing providers that provide services within their jurisdiction.	7. The Homeless Initiative has undergone a staffing reorganization to create a unit that is specifically dedicated to strengthening collaborative partnerships with cities and COGs. In addition, LAHSA continues to expand the Governmental Affairs and Community Relations Unit, which has dedicated staff to work with community stakeholders including cities, COGs, and coalitions across the County. The Homeless Initiative will include LAHSA and County departments in future quarterly convenings with cities and COGs to support increased communication and collaboration and will facilitate more frequent meetings if needed.

Interim Housing	
Stakeholder Recommendations	County Response
1. Increase support and services for clients in interim housing who have more complex health, mental health, and substance use disorder conditions, as well as clients who need assistance with Activities of Daily Living.	1. The Homeless Initiative is partnering with Medi-Cal Managed Care Plans and DHS, DMH, and DPH to implement Enhanced Care Assessment Teams that will assess clients for a full array of medical, behavioral, functional, and social service needs to inform appropriate housing placements and service connections. The assessments will include assessing for ADL needs and connecting clients to caregiving services, IHSS, and enriched residential care. In addition, DMH is seeking Mental Health Services Act (MHSA) funding to further expand the Enhanced Care Assessment Teams. DPH will work with interim housing funders to identify interim housing sites with a high need for substance use disorder treatment services and coordinate field-based services at these identified sites.
2. Provide interim housing providers and clients with more housing navigation services.	2. In FY 2022/23 LAHSA both expanded the number of Housing Navigation slots available within the system and enhanced eligible and allowable Housing Navigation services (funding can be used for financial assistance, including application fees, security deposits, and landlord incentives). In addition, LAHSA began to prioritize Housing Navigation resources for people in interim housing. Providing Housing Navigation to interim housing clients will enhance flow through the system as interim housing clients exit more quickly to permanent housing. The draft FY 2023/24 Homeless Initiative Funding Recommendations include increased funding for Housing Navigation to increase the number of slots and to cover increasing costs of programming and service delivery.
3. Establish interim housing sites that can do 24/7 intakes to support after hours outreach and engagement efforts.	3. DHS is opening the first interim housing site in Los Angeles that will accept clients 24/7. The site is scheduled to open in November 2022. The Homeless Initiative will work closely with DHS, outreach teams, first responders, and other stakeholders to monitor the utilization and impact of this interim housing site to inform the timeline and plan for expansion to additional sites.
4. Assess reimbursement rates for interim housing to ensure they cover the full cost of providing the scope of services and address recruitment and retention challenges.	4. The Homeless Initiative is partnering with LAHSA, DHS, and DMH to contract with an entity to conduct an interim housing cost analysis that will be used to inform potential rate changes. The cost analysis will consider site locations, size, population served, required services, and staffing needs.
5. Implement flexible multi-year contracts with service providers to ease contract administration burden and to enable providers to be more responsive to changes in unsheltered homelessness and evolving client needs.	5. The Homeless Initiative is working with LAHSA and County departments to identify any delegated authorities or contractual changes that are needed by LAHSA or County departments to implement flexible multi-year contracts.

Permanent Housing	
Stakeholder Recommendations	County Response
1. Increase mental health and substance use disorder services at permanent housing sites.	1. The Homeless Initiative currently funds DHS Intensive Case Management Services, DMH Housing Supportive Services Program (HSSP), and DPH Substance Abuse Prevention and Control Client Engagement and Navigation Services (CENS) for clients in permanent supportive housing. The Homeless Initiative will convene a work group with DHS, DMH, DPH, and permanent supportive housing providers to ensure that existing resources are being fully utilized, identify any service gaps, and identify opportunities to enhance or increase services. In addition, DMH is seeking MHSA funding to expand their ability to assist clients that are at risk of eviction due to hoarding issues which may result in unhealthy and unsafe environments and may place the unit at risk of not passing inspection by the Housing Authority.
2. Increase capacity to assess the ADL needs of people in permanent housing and to connect them to ADL services and IHSS as needed.	2. DHS hopes to expand its ADL support for PSH clients under the Personal Care and Homemaker Services (PCHS) Community Supports available through CalAIM. By contracting for PCHS with Los Angeles County’s six managed care plans, DHS hopes to increase capacity for PSH residents to gain access to in-home caregiving services until IHSS is approved and an IHSS worker is secured.
3. Increase the ability of clients in permanent supportive housing to access Department of Public Social Services (DPSS) benefits and services and the CBEST benefits advocacy program.	3. All DHS Intensive Case Management Service (ICMS) providers are expected to connect participants to benefits and other resources available to them, including DPSS and CBEST services. DHS operates both the PSH ICMS and CBEST programs and will continue to monitor data to identify PSH ICMS who are likely eligible for disability benefits and connect them to CBEST supports, as appropriate.
4. Strengthen the capacity, operations, safety, and security at existing project-based permanent housing sites.	4. The Homeless Initiative will convene a workgroup including DHS, DMH, DPH, Los Angeles County Development Authority, Los Angeles Housing Department, Public Housing Authorities, developers, and permanent supportive housing service providers to identify the factors that are impacting permanent supportive housing operations and potential solutions.
5. Increase access to market rate housing by expanding the use of “master-leasing,” landlord engagement, and/or other incentives.	5. The Homeless Initiative is partnering with Medi-Cal Managed Care Plans, LAHSA, and DHS to expand housing acquisition programs, including the DHS Flexible Housing Subsidy Pool Master Rental Services Agreement (MRSA) program and the LAHSA Resident and Property Support Services (RPSS) program. In addition, the draft FY 23-24 Homeless Initiative Funding Recommendations include increased funding for LAHSA’s RPSS and Housing Location program.

Permanent Housing	
Stakeholder Recommendations	County Response
6. Make improvements to the time-limited subsidies program to smooth client transitions to other permanent housing options and to implement contract terms that increase the housing supply for the time-limited subsidy program.	6. The Homeless Initiative is working with LAHSA to identify any delegated authorities or contractual changes that are needed for LAHSA to implement contract terms that provide the flexibility needed to be responsive to the needs of clients and that support increased housing placements through the time-limited subsidy program.
7. Assess reimbursement rates for Intensive Case Management Services to ensure they cover the full cost of providing the scope of services and address recruitment and retention challenges.	7. The Homeless Initiative is partnering with LAHSA and DHS to contract with an entity to conduct an ICMS cost analysis. The cost analysis will be used to inform potential rate changes.