



County of Los Angeles CHIEF EXECUTIVE OFFICE

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SACHI A. HAMAI
Chief Executive Officer

August 16, 2019

To: Supervisor Janice Hahn, Chair
Supervisor Hilda L. Solis
Supervisor Mark Ridley-Thomas
Supervisor Sheila Kuehl
Supervisor Kathryn Barger

From: Sachi A. Hamai 
Chief Executive Officer *FOR*

Board of Supervisors
HILDA L. SOLIS
First District

MARK RIDLEY-THOMAS
Second District

SHEILA KUEHL
Third District

JANICE HAHN
Fourth District

KATHRYN BARGER
Fifth District

HOUSING FOR PUBLIC HEALTH (ITEM NUMBER 44-A, AGENDA OF OCTOBER 16, 2018)

On October 16, 2018, the Board of Supervisors directed the Chief Executive Office - Homeless Initiative (CEO-HI), in coordination with the Departments of Public Health (DPH), Mental Health (DMH), Public Works (DPW), and Health Services (DHS), the Los Angeles Homeless Services Authority (LAHSA), service providers, and other pertinent stakeholders, to provide a report back in 45 days on the following:

- 1) Develop a pilot Housing for Public Health Program (Program) and a description of the pilot model;
- 2) Potential funding sources;
- 3) Possible target locations; and
- 4) A plan for implementation and a deployment schedule.

On November 30, 2018, this office provided the Board with a report back on the directives cited above and indicated that a follow-up report would be provided 90 days after implementation/deployment of the pilot project, which was launched on May 1, 2019. The attachment provides a report summarizing the implementation and status of the pilot program.

Next Steps

The CEO-HI is working with a workgroup comprised of agencies named in the motion to scale the pilot countywide. In the Fiscal Year 2019-20 County Supplemental Budget process, the CEO will recommend the addition of four DPH public health nurses who will be dedicated full-time to the Housing for Public Health Program. These public health

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nurses will work with outreach teams to provide services at encampments that are determined to be at high-risk for public health problems throughout the County.

If you have any questions, please contact Phil Ansell, Director, Homeless Initiative, at (213) 974-1752 or by email at pansell@ceo.lacounty.gov.

SAH:FAD:PA
JR:MDC:tv

Attachment

c: Executive Office, Board of Supervisors
County Counsel
Sheriff
Health Agency
Health Services
Mental Health
Public Health
Public Works
Los Angeles Homeless Services Authority

HOUSING FOR PUBLIC HEALTH PILOT PROGRAM

In response to the Board's directives of October 16, 2018, the Chief Executive Office-Homeless Initiative (CEO-HI) facilitated a workgroup (Workgroup) consisting of the Departments of Public Health (DPH), Mental Health (DMH), Public Works (DPW), and Health Services (DHS), the Los Angeles Homeless Services Authority (LAHSA), the Sheriff Department's Homeless Outreach Services Team, service providers, and other pertinent stakeholders, and provided a report back on November 30, 2018, on the pilot project (Pilot) that included information on:

- 1) The development and description of a pilot Housing for Public Health Program (Program);
- 2) Potential funding sources;
- 3) Possible target locations; and
- 4) A plan for implementation and a deployment schedule.

The Workgroup developed a Pilot that focused on reducing transmission of communicable disease among people experiencing homelessness who live on the streets and/or in encampments. The initial action of the Pilot included training all outreach workers with basic information about communicable disease risk factors, signs and symptoms, prevention, and steps to take to connect people experiencing homelessness (PEH) to medical evaluation and treatment. The Pilot also outlined the following key elements:

- Outreach and Engagement;
- Efforts to improve encampment conditions/cleanliness;
- Vaccinations;
- Health education and assessments;
- Supportive Services; and
- Public hygiene and shower facilities.

Pilot Locations

The Workgroup determined that the pilot would be implemented in two encampments, using the following criteria:

- Significant service access issues (e.g., remote, hard to reach);
- High health needs;
- Large scale homeless encampments with existing and ongoing outreach efforts; and
- Unincorporated areas.

Based on the above criteria, the Workgroup selected the following encampments to implement the Pilot program:

- Area 1: Unincorporated Lancaster (Supervisorial District 5 and Service Planning Area 1)
- Area 2: Coyote Creek near Norwalk (Supervisorial District 4 and Service Planning Area 7)

Pilot Roll Out

The initial assessment of the encampments identified for the Pilot determined the need to address two key issues: 1) substance use/abuse; and 2) the administration of vaccinations. As such, the Workgroup prioritized piloting novel approaches to carrying out street-based service delivery on a broader scale, including harm reduction services, which are proven to reduce the impact of substance abuse and addiction. With regard to vaccinations, *Streptococcus pneumoniae* was identified as the most common cause of bacterial pneumonia, bacteremia, and meningitis in adults. Because homeless adults may be at greater risk of contracting these infections due to underlying medical conditions, the group also sought to pilot the administration of a pneumococcal vaccine in an encampment setting with the Hepatitis A (Hep A) vaccine. Given these parameters, it was decided that DHS Multidisciplinary Teams (MDTs) and LAHSA Homeless Engagement Teams (HETs) would participate in the outreach effort directly, while DMH would partner by being prepared to respond as needed.

On May 1 and 2, 2019, the Pilot was rolled out in Areas 1 and 2 with the intervention approaches described above. Below is an overview of the services provided, agencies' roles, and outcomes for Areas 1 and 2 over the course of the two-day Pilot.

Area 1: Unincorporated Lancaster

May 1, 2019: Focus on Hepatitis A and Pneumococcal Vaccinations

Summary of Services:

Outreach and DPH Teams were deployed to two distinct encampments in Area 1: Encampment #1 consisted of approximately 20-30 people and consisted of four RV's and 6 makeshift shelters. Encampment # 2 was located at Avenue L between 10th Street E. and 20th Street E. DPH administered vaccinations with education and offered food gift cards as an engagement tool. Overall, vaccines were well-received by participants.

Participating Agencies and their Roles

Agency	Role	Services Provided
Department of Public Health	Vaccine Administration	Administration of Hep A and Pneumococcal vaccines
Los Angeles Homeless Services Authority Homeless Engagement Team (LAHSA HET)	Outreach Services	Outreach engagement and offering of services
Los Angeles Homeless Services Authority (LAHSA) CES Outreach Coordination Team	Coordination	Coordinated interagency logistics for two-day Pilot
Mental Health America (MHA) Multidisciplinary team	Outreach Services	Outreach engagement and offering of services
Valley Oasis Outreach	Outreach Services	Outreach engagement and offering of services

Outcome:

- 25 Hep A vaccines administered
- 23 Pneumococcal vaccines administered

May 2, 2019: Naloxone and Harm Reduction Strategies

Summary of Services:

Tarzana Treatment Center led a "train the trainers" session on Naloxone administration. To cover more area, staff divided into two separate teams based on services: Naloxone and syringes. Harm reduction services were well-received by participants who were engaged; however, as teams deployed later in the morning, many PEH were not present at their encampments at the time of outreach.

The May 2nd participating agencies, and their roles, were the same as those listed in the above table. Tarzana Treatment Center was the one additional agency with a role on May 2nd, which was to administer Harm Reduction Services.

Outcomes:

- 5 people experiencing homelessness received Naloxone provision and training
- 80 Sterile Syringes distributed

Area 2: Coyote Creek Near Norwalk

May 1, 2019: Naloxone and Harm Reduction Strategies

Summary of Services:

Outreach team members led initial engagement with clients whom they actively serve and solicited interest in Naloxone education. Staff from Bienestar and outreach teams then delivered Naloxone kits and training, for future use. Additionally, they offered sterile syringes and needle exchange.

Participating Agencies and their Roles

AGENCY	ROLE	SERVICES
Bienestar	Harm Reduction Services	Naloxone administration training and provision, sterile syringe distribution
LAHSA HET	Outreach	Provided outreach services and were trained on Narcan provision to homeless individuals
Los Angeles Homeless Services Authority	Outreach Coordination	Coordinated overall service delivery and logistics for two-day Pilot
People Assisting the Homeless (Public Spaces Team and Multi-Disciplinary Team)	Outreach	Led outreach engagement and offered services
Substance Abuse Prevention and Control (SAP-C)	Coordination of Harm Reduction Services	SAP-C coordinated delivery of services from Bienestar and shadowed Pilot

Outcomes:

- 27 people experiencing homelessness received Naloxone supplies and training, for future use.
- 540 sterile syringes were provided (20 per person).

May 2, 2019: Hep A and Pneumococcal Vaccinations

Summary of Services:

DPH Public Health Nurses educated teams on the vaccines being delivered. Three outreach teams engaged with clients and solicited interest for vaccines. Food gift cards were used as incentive to deliver both HEP-A and Pneumococcal Vaccines.

Participating Agencies and their Roles

Agency	ROLE	Services
Department of Public Health	Vaccine Administration	Administration of Hep A and Pneumococcal vaccines
Los Angeles Homeless Services Authority (LAHSA)	Coordination	Coordinated interagency logistics for two-day Pilot
LAHSA HET	Outreach services	Led outreach engagement and offering of services
People Assisting the Homeless (PATH) Public Spaces Team and Multi-Disciplinary Team (MDT)	Outreach Services	Led outreach engagement and offering of services

Outcomes:

- 18 total clients served
- 13 total Pneumococcal vaccines administered; 12 Hepatitis A vaccines administered.

Next Steps

The Pilot was successfully completed on May 1 and 2, 2019, and the Workgroup has agreed on the following next steps:

- Reconvene the Workgroup on a regular basis to develop a plan for scaling up the Pilot to address public health concerns at large homeless encampments across the County. Encampment locations for program deployment will be identified on an on-going basis by outreach workers, trained to identify public health concerns, based on their findings in the field.

- The CEO-HI will seek approval via the FY 2019-20 County Supplemental Budget process to add four Public Health Nurses (PHN) in the Department of Public Health. If the funding is approved, the process to onboard the PHNs will begin immediately.
- The PHNs will be dedicated to the program full-time and accompany E6 Outreach and MDTs when addressing needs at large scale encampments to administer vaccinations and provide field-based health assessments. Due to the high volume of PEH in need of vaccines and field-based health assessments, the PHNs dedicated to the program will ensure that the program can serve a greater number of people and allow for MDT health experts to deliver services at other locations.
- The Workgroup, with input from E6 Outreach Teams and LASD's Homeless Outreach Services Team, will develop a map of high risk encampments that will identify sites in all five Supervisorial Districts where the Housing for Public Health Program will engage PEH.