

County of Los Angeles CHIEF EXECUTIVE OFFICE

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February 5, 2009

To:

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Supervisor Gloria Molina

Supervisor Mark Ridley-Thomas Supervisor Zev Yaroslavsky Supervisor Michael D. Antonovich

From:

William T Fujioka

Chief Executive Officer

LOS ANGELES COUNTY HOMELESS PREVENTION INITIATIVE STATUS REPORT

According to the Los Angeles Homeless Services Authority (LAHSA), Los Angeles County has the highest concentration of homelessness in the nation (74,000 people). Various social and economic factors, as well as gaps in available housing and social services have contributed to the crisis. In response to this crisis, on April 4, 2006, the Los Angeles County Board of Supervisors made an investment toward addressing and preventing homelessness with the approval of the \$100 million Homeless Prevention Initiative (HPI). The Chief Executive Office continues to implement specific key HPI programs in partnership with County Departments of Children and Family Services, Community Development Commission, Health Services, Mental Health, Probation, Public Defender, Public Health, Public Social Services, and the Sheriff, LAHSA, and cities. To date, the HPI has been tremendously successful in implementing 23 programs and serving 12,801 individuals and 7,840 families (four programs included a duplicated participant count during Fiscal Year (FY) 2007-08). The initiative focuses on reaching the following two goals through the six strategies shown below:

Goal 1 – Preventing Homelessness

- Housing assistance
- Transitional supportive services

Goal 2 – Ending Homelessness

- · Community capacity building
- · Regional planning
- Supportive services integration linked to housing
- Innovative program design

Each Supervisor February 5, 2009 Page 2

Three attachments are included with this memo:

- 1. Executive Summary of FY 2008-09, First Quarter;
- 2. HPI Status Report (Attachment A): The FY 2008-09 First Quarter HPI status report includes information on program participants, services provided, and associated outcomes; and
- 3. Index of Programs (Attachment B): A table presents key performance indicators and budget information on each program. Following the table, each program's performance measures are included with a description of successes, challenges, an action plan, and a client success story.

This HPI report provides information about the progress of your Board's investment to decrease homelessness and inform future planning efforts.

If you have any questions, please contact me or your staff may contact Miguel Santana, Deputy Chief Executive Officer at (213) 974-4530, or via e-mail at msantana@ceo.lacounty.gov.

WTF:MS:KH GS:VKD:hn

Attachments (3)

c: Sheriff's Department

Department of Children and Family Services
Department of Community Development Commission
Department of Health Services
Department of Mental Health
Probation Department
Department of Public Defender
Department of Public Health
Department of Public Social Services
City of Santa Monica
Los Angeles Homeless Services Authority
Public Counsel
Skid Row Housing Trust



FY 2008-09, July - September, First Quarter Executive Summary

Los Angeles County has the highest concentration of homelessness in the nation (74,000 people). The Los Angeles County Board of Supervisors invested to address and prevent homelessness with the approval of the \$100 million Homeless Prevention Initiative (HPI). With this crisis worsening as a result of the downturn in the economy, the Chief Executive Office (CEO) continues to implement specific key HPI programs in partnership with County departments, the Los Angeles Homeless Services Authority (LAHSA), Community Development Commission (CDC), and cities. To date, the HPI has been tremendously successful in implementing 23 programs and serving 12,801 individuals and 7,840 families. The initiative focuses on reaching the following two goals through six strategies shown below:

Goal	Strategy
Preventing Homelessness	 Housing assistance Transitional supportive services
Reducing Homelessness	 Community capacity building Regional planning Supportive services integration and linkages to housing Innovative program design



¹ Los Angeles Homeless Services Authority (LAHSA) 2007 Greater Los Angeles Homeless County.

² Departments of Children and Family Services (DCFS), Health Services (DHS), Public Health (DPH), Mental Health (DMH), Public Social Services (DPSS), Probation, Public Defender, and the Sheriff.

³ Four programs included a duplicated participant count during FY 2007-08. Homeless Release Projects are not funded by HPI.

Through the HPI, 12,801 individuals and 7,840 families have been served. For each strategy, specific outcomes and a combined total of actual and estimated expenditures are listed. Within the Goal 2, Supportive Services Coordination Strategy, cumulative results are shown.

GOAL 1: PREVENTING HOMELESSNESS

HOUSING ASSISTANCE

Eviction Prevention Moving Assistance Rental Subsidy \$9,237,540

Through housing assistance, individuals, youth, and families maintain permanent housing.

 4,670 individuals and 4,876 families received housing assistance, which prevented homelessness.

TRANSITIONAL SUPPORTIVE SERVICES

Access to Housing for Health (AHH) Homeless Release Projects Jail-In Reach Program \$5,721,343

Clients discharged from public hospitals and jails receive case management, housing location, and supportive services.

- 2,220 clients received public benefits.
- 50 clients placed into permanent supportive housing (PSH).
- 83% decrease in inpatient days and 74% decrease in ER visits a year post enrollment.

GOAL 2: REDUCING HOMELESSNESS

COMMUNITY CAPACITY BUILDING

City and Community Program (CCP) \$25,644,929
Revolving Loan Fund

Provide 21 communities with housing development and supportive services via contracts with local housing developers and service providers.

 For CCP, 13 service contracts (60%) have been executed, and nine capital projects will begin construction by Spring of 2009.

REGIONAL PLANNING

Homeless Services

\$3,250,000

Helping communities address homelessness in their neighborhoods through development of housing resources and service networks.

 Gateway and San Gabriel Valley Council of Governments (COG) and Long Beach Homeless Veterans implemented.

SUPPORTIVE SERVICES COORDINATION AND LINKAGES TO HOUSING \$12,060,791

AND LINKAGES TO HOUS

Case Management Recuperative Care

Housing Locators

Multi-disciplinary Team/Access Center

Provide clients with integrated supportive services and housing. Supportive services include case management, health care, mental health services, and substance abuse treatment.

- 2,508 individuals and 2,641 families placed into emergency, transitional, and PSH.
- 5,620 linkages to integrated supportive services enhanced participants' well-being.
- 3,715 individuals and families achieved greater self-sufficiency through public benefits, income support, and connections to employment opportunities.

INNOVATIVE PROGRAM DESIGN

Project 50

\$16,085,050

Skid Row Families Demonstration Project Homeless Court

Housing Resource Center

Santa Monica Service Registry

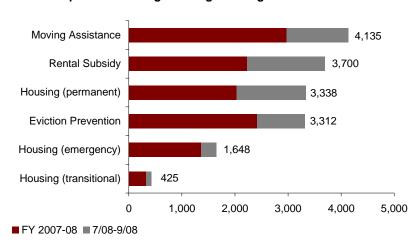
Provide access to housing and services for the most vulnerable, including chronic homeless individuals and families on Skid Row, individuals with co-occurring disorders, and homeless individuals with outstanding warrants.

- 44 chronic homeless individuals placed into PSH.
- 227 families placed into PSH from Skid Row.
- Citations and warrants dismissed for 401 individuals.
- Over 1.5 million housing searches conducted.

INCREASED NEED FOR HOUSING AND SERVICES

With the current economic condition, there is even greater need for cost-effective strategies to prevent and decrease homelessness. From July 2007 to September 2008, DPSS reported that the County's unemployment rate steadily increased, peaking at 8.1% in August and slightly decreasing to 7.8% in September. Similarly, the number of CalWORKs applications rose to 14,388 last September – a 28% increase compared to one year ago. Unfortunately, DPSS showed the number of CalWORKs homeless families has increased by 12% to 7,218 during the same time period. As a result, DPSS has experienced increased demand for Moving Assistance and Emergency Assistance to Prevent Eviction Prevention (EAPE), with monthly expenditures at a 15-month high for both programs during September.

During July-September 2008, the number of HPI participants who received permanent housing and housing assistance increased dramatically. Compared to FY 2007-08, the first quarter of FY 2008-09 showed a 32% increase in the number of families served and a 23% increase in individuals. The chart shows 3,338 participants have received permanent housing, and 39% of all placements occurred during the past quarter.



HPI Participants Receiving Housing/Housing Assistance

STRATEGIES FOR CHANGE

The County departments are developing a Countywide Homeless Services Integration Plan based on the lessons learned from the Homeless Prevention Initiative. Final plan will include the following elements:

- Expansion of Permanent Supportive Housing (PSH) in partnership with the CDC, four LA County Continuums of Care, Councils of Government, and the cities within the County;
- Institutionalization of successful projects from the Homeless Prevention Initiative (HPI) and lessons learned from the HPI, including the County hospital and jail discharge protocols;
- Continued development of regional planning, partnership and collaboration;
- Enhanced coordination of existing Homeless Services system and programs within the County; and
- An initial cost avoidance study of the General Relief Housing Subsidy and Case Management Project estimates a total of \$5.4 million to \$10.3 million in cost savings for the County by 2012. Future studies of other HPI programs are expected to show similar cost savings.



COUNTY OF LOS ANGELES

Homeless Prevention Initiative (HPI) FY 2008-09, First Quarter Status Report

TABLE OF CONTENTS

Following the **Executive Summary** of this report are two attachments.

Attachment A: Overview of HPI Status

I.	Introduction	2
II.	Participants	4
III.	Service Components	6
IV.	Longer-term Outcomes	9
V.	Narrative	10
VI.	Recommendations	11
Attachment	B: Index of HPI Programs	
J	-	1
1.	Table of Programs by Population	ı
II.	Programs for Families	3
III.	Programs for Transition Age Youth	8
IV.	Programs for Individuals	10
V.	Programs for Multiple Populations	32
VI.	City and Community Program (CCP)	34
VII.	Council of Governments (COGs)	38

Page 2 Attachment A

HOMELESS PREVENTION INITIATIVE (HPI) STATUS REPORT - FY 2008-09, First Quarter

I. INTRODUCTION

In accordance with your Board's direction on April 4, 2006, this report provides a status update on the implementation of 23 programs included in the Los Angeles County Homeless Prevention Initiative (HPI) during July-September of FY 2008-09. During the previous reporting period, 20 programs had been implemented. The Chief Executive Office (CEO) continues to implement specific key HPI programs in participation with the Community Development Commission (CDC), the Departments of Children and Family Services (DCFS), Health Services (DHS), Public Health (DPH), Mental Health (DMH), Public Social Services (DPSS), Probation, Public Defender, and the Sheriff. Representatives from these County agencies and departments comprise the County HPI Team (Team). The Team meets monthly to ensure consistent communication and integration of services across County departments and to facilitate successful implementation of HPI programs serving the County's homeless population.

The ultimate goal of HPI is to help individuals and families achieve housing stability and greater self-sufficiency. Through the HPI investment, program strategies are expected to enhance coordination of various housing and supportive services for the homeless and at-risk population. As a result, more individuals and families will have access to integrated services.

Goals and Strategies

As mentioned in the Executive Summary of this report, the Chief Executive Office continues to implement specific key HPI programs in partnership with County departments, the Los Angeles Homeless Services Authority (LAHSA), Community Development Commission (CDC), and cities. The initiative focuses on meeting the following two goals through six strategies shown:

Goal	Strategy
Preventing Homelessness	 Housing assistance Transitional supportive services
Reducing Homelessness	 Community capacity building Regional planning Supportive services integration and linkages to housing Innovative program design

Actual and Estimated Expenditures by Strategy

In this report, total expenditures include FYs 2006-07 and 2007-08 actual expenditures and estimated expenditures for FY 2008-09. The total expenditures for the HPI programs in this report are \$71,539,653. Chart I shows that 22 percent of all expenditures have or will be spent on the initiative's first goal to prevent homelessness. Seventy-eight percent of all expenditures have or will be spent on the HPI's second goal to reduce homelessness. In addition, the amount expended by each strategy is shown in Chart I. For the community capacity building strategy, 30 percent of all expenditures are designated for housing development and supportive services in 21 communities via contracts with local housing developers and service providers.

Page 3 Attachment A

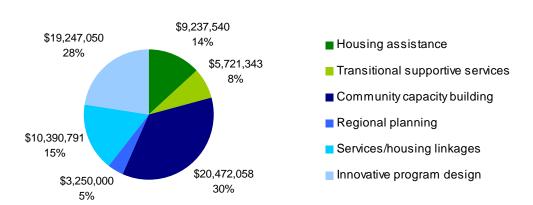


Chart 1: Estimated Actual Expenditures
Total: \$71,539,653*

*Actual expenditures are \$79.4 million. Additional expenditures include: 1) Board approved operational support at \$1.9 million (FY 2006-07); and 2) operational support, administrative, and evaluation costs at approximately \$6.0 million. Outcomes for these projects, such as LAHSA contracted programs, will be included in the next status report.

Increased Need for Housing and Services

With the current economic condition, there is even greater need for cost-effective strategies to prevent and decrease homelessness. From July 2007 to September 2008, DPSS reported that the County's unemployment rate steadily increased, peaking at 8.1 percent in August and slightly decreasing to 7.8 percent in September. Similarly, the number of CalWORKs applications rose to 14,388 last September – a 28 percent increase compared to one year ago. Unfortunately, DPSS showed the number of CalWORKs homeless families has increased by 12 percent to 7,218 during the same time period. As a result, DPSS has experienced increased demand for Moving Assistance and Emergency Assistance to Prevent Eviction Prevention (EAPE), with monthly expenditures at a 15-month high for both programs during September. As a result, for FYs 2007-08 and 2008-09, \$3,748,431 in unspent HPI DPSS program funds have been shifted to the Moving Assistance and EAPE programs.

During July-September 2008, the number of HPI participants who received permanent housing and housing assistance increased dramatically. Compared to FY 2007-08, the first quarter of FY 2008-09 showed a 32 percent increase in the number of families served and a 23 percent increase in individuals. Chart 5 shows 3,338 participants have received permanent housing, and 39 percent of all placements occurred during the past quarter.

Page 4 Attachment A

II. PARTICIPANTS

During the first quarter of FY 2008-09, 21 of 23 implemented HPI programs¹ directly served the homeless and at-risk homeless population in the County. While several programs served more than one homeless population, participants in 18 programs corresponded to one of five categories: homeless individuals (seven programs), chronic homeless individuals (four programs), transition age youth (two programs), homeless families (three programs), and at-risk families (two programs). A summary table of HPI programs is in Appendix B.

To date, Table 1 shows HPI touched the lives of 12,801 individuals and 7,840 families.² Compared to the total in FY 2007-08, the first quarter of FY 2008-09 showed a 32 percent increase in the number of families served and a 23 percent increase in individuals.

Table 1: Number of Contacts by Participant Category FY 2008-09, First Quarter								
	FY 2008-09 First Quarter	FY 2007-08	*Cumulative	Percent Increase				
Homeless Individuals	1,699	9,042	10,741	19%				
Chronic Homeless Individuals	361	234	595	154%				
Transition Age Youth	344	1,121	1,465	29%				
Total for Individuals	2,404	10,397	12,801	23%				
Homeless Families	998	3,463	4,461	36%				
At-Risk Homeless Families	892	2,487	3,379	31%				
Total for Families	1,880	5,950	7,840	32%				
Total	4,284	16,347	20,641	26%				

^{*}FY 2008-09: Returning participants have been subtracted for an unduplicated count.

Chart 2: Percent by Participant Category

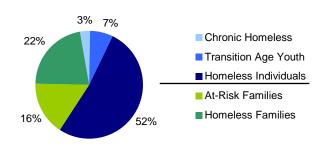


Chart 2 illustrates that of all HPI participants, 62 percent were individuals and 38 percent were families. According to LAHSA, 24 percent of the total homeless population lives in families,³ and homeless families made up 22 percent of all HPI participants. Of all individual participants, 52 percent were homeless adults, and seven percent were transition age youth. Approximately onethird of the homeless in the County are chronically homeless,4 while these individuals made up three percent of all HPI participants.

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¹ Housing Locators and Housing Specialists programs are included, but these programs are funded by CalWORKs Single Allocation and DMH Mental Health Services Act (MHSA) respectively.

Note most programs provided an unduplicated participant number; however, four programs included a duplicated participant count during FY 2007-08. Housing Locators/Housing Specialists are included in total participant count, however not in HPI funding.

³ LAHSA 2007 Greater Los Angeles Homeless Count.

⁴ Ibid.

Page 5 Attachment A

Participant Characteristics

During the first quarter of FY 2008-09, a total of 17 programs provided demographic information for program participants. Demographic information included gender, age, and race/ethnicity of participants. To obtain cumulative demographic information on all HPI participants, demographic information from new participants served during this past quarter was added to FY 2007-08 data.

Gender

While approximately 59 percent of the homeless population in Los Angeles County consists of adult men,⁵ of the 3,950 participants whose gender was provided, 51 percent (2,031) were male, 48 percent (1,911) were female, and one percent was transgender.

Race/Ethnicity

Chart 3 shows 55 percent of HPI participants were African American, which compares to the total homeless population. Similarly representing the total homeless population, 23 percent of participants were Hispanic and 19 percent Caucasian. The remaining three percent of participants included Asian/Pacific Islander, Native American, and other racial/ethnic groups.

Age

Compared to an average age of 45 years for homeless individuals in the County, 42 percent were between 25-49 years of age. Chart 4 shows that of HPI participants whose age was provided, 17 percent of participants were between the ages of 25-49, 27 percent were children less than 15 years of age, and 14 percent were 50 years of age and older.

Chart 3: Race of HPI Participants (n=3,973)

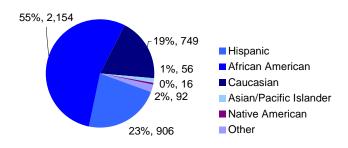
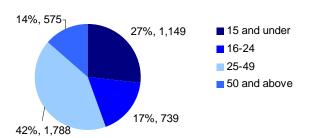


Chart 4: Age of HPI Participants (n=4,251)



⁵ LAHSA 2007 Greater Los Angeles Homeless Count.

Page 6 Attachment A

III. HPI SERVICE COMPONENTS

During July-September 2008, HPI provided participants with services in four core areas: 1) Housing/Housing Assistance, 2) Employment/Education, 3) Benefits Advocacy and Enrollment, and 4) Supportive Services. Programs were requested to provide information on services that were directly provided to clients. Referrals for services were to be included, if follow-up was made to verify participants received services.

Housing/Housing Assistance

Eighteen programs provided housing assistance through moving assistance, eviction prevention, and rental subsidies. During the past year, a total of 10,373 participants received housing assistance to secure permanent housing. Table 2 shows 49 percent of participants who obtained housing assistance were families, 41 percent were individuals, and 10 percent were transition age youth. In addition, 3,111 participants received permanent housing with 70 percent being families, 16 percent transition age youth, and 14 percent individuals. Chart 5 shows a significant increase in the number of participants who received housing assistance and housing during the first quarter of this fiscal year.

Table 2: FY 2007-08	Housing Assistance			gency/ sitional	Perma Hous	
Homeless Individuals	4,145	40%	1,297	63%	238	8%
Chronic Homeless Individuals	183	1%	154	7%	201	6%
Transition Age Youth	1,013	10%	168	8%	485	16%
Homeless & At-Risk Families	5,032	49%	454	22%	2,187	70%
Total	10,373	100%	2,073	100%	3,111	100%

These additional services were not grouped by population: 224 housing assistance; 2 emergency housing; 227 permanent housing

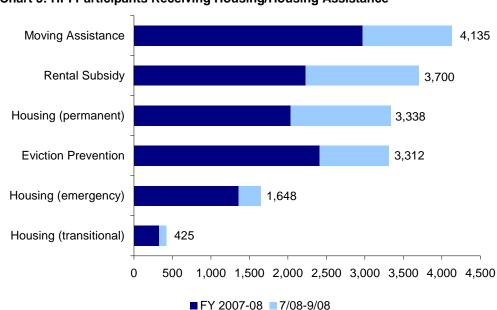


Chart 5: HPI Participants Receiving Housing/Housing Assistance

Page 7 Attachment A

The HPI Report Form requested additional information on transitional/emergency housing. This quarter, 11 programs placed participants into transitional or emergency housing, and four programs placed 64 participants into permanent housing upon exiting transitional or emergency housing. Participants in these programs spent an average of 58 days in temporary housing prior to permanent housing. Participant stay in temporary housing ranged from 5-193 days.

Employment/Education Services and Support

From July-September 2008, eight HPI programs reported a total of 376 program participants received job and/or education related supports (Table 3). Fifty-one percent of these participants received job training, referrals, or related resources. Participants in these programs included transition age youth, chronic homeless individuals and families on Skid Row, and participants with co-occurring disorders. As programs continue to make linkages to job and education related services and build infrastructure for data collection, these numbers are expected to increase. Knowing that 90 percent of the homeless in Los Angeles are unemployed, providing them with the support to overcome barriers in obtaining and maintaining employment will assist them in attaining greater self-sufficiency.

Table 3: Jobs/Education	FY 2008-09, First Quarter	Cumulative	Percent
Job training/referrals/resources	187	231	51%
Job placement (employment)	117	127	28%
Education (course, class, books)	72	93	21%
Total number of services provided:	376	451	100%

Benefits Advocacy and Enrollment Assistance

For participants who entered programs in need of specific public benefits, 12 HPI programs reported enrolling homeless individuals and families. Table 4 shows that through September 2008, homeless individuals were enrolled into General Relief, which consisted of 73 percent (2,370) of all benefit enrollments. Ten percent of participants were enrolled into Supplemental Security/Disability Income (SSI/SSDI), and 10 percent received Section 8 or Shelter Plus Care to secure permanent housing. This quarter, five times as many participants received SSI/SSDI and Shelter Plus Care, which had the greatest increases from FY 2007-08.

Table 4: Benefits	FY 2008-09, First Quarter	Cumulative	Percent
General Relief (& Food Stamps)	302	2,057	63%
SSI/SSDI	275	323	10%
General Relief only	59	313	10%
Shelter Plus Care	167	200	6%
Section 8	44	140	4%
Medi-Cal or Medicare	29	103	3%
CalWORKs	38	66	2%
Food Stamps only	14	54	2%
Veterans	4	5	0%
Total number of benefits provided:	932	3,261	100%

⁶ Bring L.A. Home: The Campaign to End Homelessness; LAHSA 2005 Homeless Count.

Page 8 Attachment A

Supportive Health and Human Services

During the first quarter of FY 2008-09, 13 programs made 5,620 linkages between participants and supportive health and human services. These programs served homeless and chronic homeless individuals, homeless families, and transition age youth. Table 5 shows 37 percent (2,090) of these HPI participants received case management, which was the most frequently reported supportive service. Followed by case management, 12 percent (677) received mental health care, and 10 percent (581) acquired life skills.

While more programs did report on supportive services during this period, it is possible that other programs linked participants to these services. Additional data collection and reporting of supportive services could show that more individuals and families are receiving such services, especially those with multiple needs. Knowing that 74 percent of the homeless population have a physical or mental disability, depression, alcohol or drug use, or chronic health problems, linking these individuals and families with health care, mental health care, and substance abuse treatment is critical.

Eleven programs reported providing case management services, and eight programs selected the most intense level of case management. The HPI Report Form asked about the level of case management provided, with level one assessing the client and level three assisting with supported referrals and counseling.⁸ Hours provided to each participant per month ranged from 3-66 hours (average of 7 hours) with an average caseload of 21 cases per case manager.

Table 5: Supportive Services	FY 2008-09 First Quarter	Percent	FY 2007-08
Case management	2,090	37%	2,257
Mental health care	677	12%	142
Life skills	581	10%	676
Transportation	494	9%	615
Alternative court	474	9%	286
Health care	432	7%	183
Social/community activity	256	5%	51
Tenant rights/responsibilities	270	5%	-
Food vouchers	118	2%	414
Substance abuse treatment (outpatient)	90	2%	89
Clothing/hygiene	56	1%	80
Recuperative care	55	1%	45
Substance abuse treatment (residential)	17	0%	22
Legal services	6	0%	15
Detox	1	0%	5
Total number of services provided to participants	s: 5,620	100%	4,880

⁷ LAHSA 2007 Greater Los Angeles Homeless Count.

⁸ Post PA. Developing Outcome Measures to Evaluate Health Care for the Homeless Services. National Health Care for the Homeless Council. May 2005.

Page 9 Attachment A

IV. LONGER-TERM OUTCOMES

The HPI Report Form requested for programs to report on three outcome areas for participants receiving services for six months or longer. The three outcome areas were: 1) housing stability, 2) education and employment status, and 3) health and well-being. Four programs that served chronic homeless individuals, transition age youth, and homeless individuals reported on these longer-term outcome areas. As additional programs follow up with clients in the future, more information on longer-term outcomes may be collected. By following up and collecting data on participants, a better understanding of the impact of HPI on achieving housing stability and overall well-being could be gained. Table 6 shows participant outcomes for four programs in each of the three outcome categories.

Highlights of these outcomes for this past quarter include:

- Housing Stability: A total of 988 participants continued to live in permanent housing and/or receive rental subsidy.
- Employment/Education: A total of 98 participants maintained employment and 70 became employed.
- Health and Well-Being: Of participants continuing to receive services for six months or more, 863 continued to receive case management, 204 received mental health services, and 190 received health care.

Table 6: Outcome Category	FY 2008-09, First Quarter
Housing Stability	
Continuing to Live in Housing (permanent)	194
Receiving Rental Subsidy	794
Employment/Education Status	
Obtained employment	70
Maintained employment	98
Enrolled in educational program, school	44
Received high school diploma/GED	-
Health and Well-Being (for participants continuin	g services)
Case management	863
Health care/medical	190
 Good or improved physical health status 	34
Mental health/counseling	204
 Good or improved mental health status 	24
Substance abuse treatment (outpatient)	<u>-</u>
Substance abuse treatment (residential)	88
No drug use	1
Reunited with family	15

Page 10 Attachment A

V. QUALITATIVE INFORMATION (NARRATIVE)

Program Successes, Challenges, and Action Plans

Each quarter, the HPI Report Form requests information from County Departments about each program's successes, challenges, and action plans. The narrative section for all programs is included in Attachment B of each quarterly report. A review of the narrative section within the quarterly reports has identified four common themes in implementing strategies to decrease and prevent homelessness. In addition, the FY 2007-08 report provides specific programmatic examples of the following four elements: collaborative partnerships, innovative processes, outreach strategies, and leveraged funds.

- 1. Develop and strengthen *collaborative partnerships* between County departments and community-based agencies to ensure a seamless and integrated service system.
- 2. Support *innovative processes* that promote information sharing between service providers to better meet clients' housing and service needs.
- 3. Expand *outreach strategies* and education efforts to provide specialized supportive services and housing to more homeless and at-risk individuals and families.
- 4. **Leverage funds** to expand access to housing and services for more homeless and atrisk individuals and families.

Client Success Stories

Client success stories were also requested from each program. All stories are organized by program in Attachment B. The stories illustrate the impact HPI has made on many lives, as shown through the words of participants and providers.

"I would like to thank you all for having given me another chance to get myself and my life back together."

— Co-Occurring Disorder Court Program participant

A client was released from the Men's Central Jail last January. He was able to find employment and is now taking classes to become a drug and alcohol counselor. The client recently wrote to thank the Civic Center District staff for their assistance.

- DPSS-Sheriff Homeless Release staff

After one year and nine months of treatment at a residential recovery program for men dealing with addiction to drugs and alcohol, Client A's case manager applied to Homeless Court on his behalf. Although Mr. A only had one outstanding citation on his record, this citation was a significant barrier for him in achieving his goal of becoming a licensed vocational nurse (LVN). When Mr. A had a job interview, he could not be hired because of his unresolved citation. Through the Homeless Court Program, Mr. A's citation was dismissed, and he is now living independently in his own apartment and enrolled in school, working towards his LVN degree.

Los Angeles County Homeless Court Program staff

Page 11 Attachment A

VI. RECOMMENDATIONS

Through September 2008, the HPI offered hope to many homeless and at-risk individuals and families living in Los Angeles County. As we apply lessons learned to inform future planning efforts, we will continue to make a greater impact on the lives of many residents who need the support to achieve and sustain a safe, stable place to live. The lessons learned make it clear that:

- More linkages between various supportive services as well as housing is critical to create self sustainability for the homeless;
- Greater availability of affordable and subsidized housing would move more homeless residents into safe housing;
- Information sharing and improved data collection would enable more learning about clients' needs and program progress; and
- Opportunities for joint problem solving among partners would build on existing strategies and overcome service delivery barriers.

By June 2009, the County departments will develop and obtain approval of a Countywide Homeless Services Integration Plan based on the lessons learned from the Homeless Prevention Initiative. The final plan will include the following elements:

- Expansion of Permanent Supportive Housing (PSH) in partnership with the CDC, four LA County Continuums of Care, Councils of Government, and the cities within the County;
- Institutionalization of successful projects from the Homeless Prevention Initiative (HPI) and lessons learned from the HPI, County hospital and jail discharge policies, completed cities' 10 year plans to end homelessness, "Bring LA Home;"
- Continued development of regional planning, partnership and collaboration; and
- Enhanced coordination of existing Homeless Services system and programs within the County.

In summary, the CEO will continue to develop public private partnerships with cities and communities throughout the County to create regional solutions to address and end homelessness. To ensure the greatest return on the County's investment, the CEO holds monthly Board briefings and homeless coordination meetings that include staff from Board offices, County Departments, LAHSA, CDC, and cities to provide updates on the HPI budget and programs. The forum is an opportunity to discuss various homeless issues. These monthly meetings are chaired by Deputy Chief Executive Officer, Miguel Santana and his staff. Each of these efforts and your Board's continued investment will ensure that the initiative to end the homeless crisis throughout Los Angeles is successful.

I. Table of Homeless Prevention Initiative (HPI) Programs

Pro	ogram	Indicator (to date)	Target	Funding	Budget
Fa	milies (II)				
1.	Emergency Assistance to Prevent Eviction for CalWORKs Non-Welfare-to-Work Homeless Families	3,272 families received eviction prevention to prevent homelessness	2,079	One-Time	\$500,000
2.	Moving Assistance for CalWORKs and Non-CalWORKs Homeless Families	1,975 families received moving assistance and permanent housing	1,305 450	One-Time	\$1,300,000
3.	Rental Subsidy for CalWORKs and Non-CalWORKs Homeless Families	107 families received rental subsidies to prevent homelessness	1,475	One-Time	\$4,500,000
4.	Housing Locators	486 families placed into permanent housing	n/a	DPSS	\$3,000,000
5.	Skid Row Families Demonstration Project	227 families have been placed into permanent housing	300	Board Approved	\$9,212,000
Tra	nsition Age Youth (III)			11	
6.	Moving Assistance/Rental Subsidies for TAY – DCFS	253 TAY received rental subsidies	335 3yr	One-Time	\$1,750,000
7.	Moving Assistance/Rental Subsidies for TAY – Probation	271 TAY received rental subsidies 11% recidivism rate (compare to 30%)	335 3yr	One-Time	\$1,750,000
Ind	ividuals (IV)				
8.	Access to Housing for Health (AHH)	50 clients placed into permanent housing 83% decrease in hospitalizations; 74% in ER visits.	115 cap	Board Approved	\$1,500,000
9.	Co-Occurring Disorders Court	46 participants placed into permanent housing	n/a	Ongoing HPI	\$200,000
10.	DPSS General Relief Housing Subsidy & Case Management Project	985 homeless GR participants received moving assistance	900 time	Ongoing HPI	\$4,052,000
11.	DPSS-DHS Homeless Release Project	267 potentially homeless individuals received benefits	n/a	Ongoing HPI	\$588,000
12.	DPSS-Sheriff's Homeless Release Project	1,923 individuals received benefits	n/a	Ongoing HPI	\$1,097,000
13.	Homeless Recuperative Care Beds (DHS)	97 patients admitted to recuperative care beds	490/2yr	One-Time	\$1,320,000
14.	Housing Specialists (most clients are individuals)	403 placed into permanent housing	n/a	DMH MHSA	\$923,000
15.	Jail-In Reach Program (new program)	30 individuals linked to public benefits	Individuals 400/2 yr	One-Time	\$1,500,000
16.	Los Angeles County Homeless Court Program	328 individuals with citations or warrants dismissed	n/a	Ongoing HPI	\$379,000
17.	Moving Assistance for Single Adults in Emergency/Transitional Shelter or Similar Temporary Group Living Program	98 single adults received moving assistance to prevent homelessness	until 2,000	One-Time	\$1,100,000
18.	Project 50	44 chronic homeless individuals placed into permanent housing	50	One-Time	\$3,600,000
	Santa Monica Homeless Community Court (as of August 2008)	73 individuals with citations or warrants dismissed	90	Board Approved	\$540,000
Mu	Itiple Populations (V)				
20.	Los Angeles County Housing Resource Center	1.5 million housing searches conducted	n/a	Ongoing HPI	\$202,000

I. Table of Homeless Prevention Initiative (HPI) Programs

Program	Indicator (to date)	Target	Funding	Budget
21. Pre-Development Revolving Loan	4 loans totaling \$16.17 million to CDC in October	n/a	One-Time	\$20,000,000
22. PATH Achieve Glendale	Program to be launched			\$150,000
23. PATH Partners/Gateways to Housing Initiative	-	n/a	Ongoing	\$135,000
24. City and Community Program -CCP(VI)	\$11.6 m capital development/housing units \$20.6 m City Community Programs	Individuals, Families	One-Time	\$32,000,000
25. San Gabriel Valley Council of Governments -COGs (VIII)		n/a	Ongoing	\$200,000
26. Long Beach Veterans	Data to be provided in next status report	250 Individuals	Ongoing HPI	\$500,000
27. SSI and Other Benefits Advocacy Program	Program to be launched	Individuals	One-Time	\$2,000,000
HPI Funding Total (excludes Board approved operational support (f	FY 2006-07), administrative, evaluation, and LAHSA contract	ted programs)		\$90,075,000

City and Community Program (CCP) Funds	Service (\$)	Capital (\$)
A Community of Friends – Permanent Supportive Housing Program	\$1,800,000	
Beyond Shelter Housing Dev. Corp. – Mason Court Apartments		\$680,872
Catalyst Foundation for AIDS Awareness and Care – Expansional Supportive Services Antelope Valley	1,800,000	
Century Villages at Cabrillo, Inc. – Family Shelter EHAP I & II		1,900,000
City of Pasadena – Nehemiah Court Apartments	102,685	858,587
City of Pomona – Community Engagement & Regional Capacity Building	913,975	
City of Pomona – Integrated Housing & Outreach Program	1,239,276	
CLARE Foundation, Inc. – 844 Pico Blvd., Women's Recovery Center		2,050,000
Cloudbreak Compton LLC – Compton Vets Services Center	322,493	1,381,086
Homes for Life Foundation – HFL Vanowen	369,155	369,155
Nat'l Mental Health Assoc. of Greater L.A. – Self Sufficiency Project for Homeless Adults and TAY Antelope Valley	900,000	
Nat'l Mental Health Assoc. of Greater L.A. – Self Sufficiency Project for Homeless Adults and TAY Long Beach	1,340,047	
Ocean Park Community Center (OPCC) – HEARTH	1,200,000	
Skid Row Housing Trust – Skid Row Collaborative 2 (SRC2)	1,800,000	
So. California Housing Development Corp. of L.A. – 105 th and Normandie	200,000	600,000
So. California Alcohol & Drug Programs, Inc. – Homeless Co-Occurring Disorders Program	1,679,472	
Special Services for Groups (SSG) – SPA 6 Community Coordinated Homeless Services Program	1,800,000	
The Salvation Army – Bell Shelter Step Up Program		500,000
Union Rescue Mission – Hope Gardens Family Center	756,580	646,489
	1,096,930	
Volunteers of America of Los Angeles – Strengthening Families	1,000,000	
Women's and Children's Crisis Shelter	300,000	
Total for Service and Capital	\$18,620,613	\$8,986,189
Grand Total for CCP	\$27,606	,802

Page 3 Attachment B

For this report, unless specified: Quarter refers to the first quarter of FY 2008-09 (July 1, 2008 – September 30, 2008). Where applicable, cumulative refers to the number of clients served to date.

II. PROGRAMS FOR FAMILIES

1, 2, 3) DPSS Programs: Moving Assistance, Eviction Prevention, and Rental Subsidy

Goal: Assist families to move into and/or secure permanent housing. **Budget:** (One-Time Funding)

1) Emergency Assistance to Prevent Eviction for CalWORKs Non-Welfare-to-Work Homeless	\$500,000
Families 2) Moving Assistance for CalWORKs Non- Welfare-to-Work and Non-CalWORKs Homeless Families	\$1,300,000
3) Rental Subsidy for CalWORKs and Non-CalWORKs Homeless Families	\$4,500,000

Table A.1: DPSS Services for Families by Program FY 2008-09, First Quarter		
Program (unduplicated count)	Quarter	Cumulative
1) Emergency Assistance to Prevent Eviction for CalWORKs Non-Welfare-to-Work Homeless Families	864 received eviction prevention	3,272 received eviction prevention
2) Moving Assistance for CalWORKs Non- Welfare-to- Work and Non-CalWORKs Homeless Families	489 received moving assistance and permanent housing	1,975 received moving assistance and permanent housing
3) Rental Subsidy for CalWORKs and Non-CalWORKs Homeless Families	28 received rental subsidies for permanent housing	107 received rental subsidies for permanent housing

Table A.2: DPSS Measures by Program FY 2008-09, First Quarter Program (unduplicated count)	applic	ber of cations	applic	ent of ations		e amount grant
	Qtr	To date	Qtr	To date	Qtr	FY 07-08
Emergency Assistance to Prevent Eviction for CalWORKs Non-Welfare-to-Work Homeless Families	1,211	4,871	71%	67%	\$546	\$589
Moving Assistance for CalWORKs Non- Welfare- to-Work and Non-CalWORKs Homeless Families	643	2,934	76%	67%	\$605	\$629
3) Rental Subsidy for CalWORKs and Non- CalWORKs Homeless Families	28	109	100%	98%	\$450	\$150

Each program reported an average of three business days to approve an application.

1) Moving Assistance (MA) for CalWORKs Non-Welfare-to-Work and Non-CalWORKs Homeless Families

<u>Successes:</u> Of the 489 families receiving MA benefits for the reported quarter, 486 families received assistance through MA for CalWORKs families and three families received MA for non-CalWORKs families.

Page 4 Attachment B

<u>Challenges:</u> A major challenge is a lack of funding to preserve and maintain the program in order to assist families from becoming homeless. During the first quarter of FY 2008-09, approvals for applications increased by 19 percent compared to the last quarter of FY 2007-08. This represents an increase in expenditures. With limited funding, it is already a challenge to maintain services during FY 2008-09.

<u>Action Plan:</u> The Department is working internally and with the CEO to develop new and creative ideas to sustain this program.

<u>Client Success Story:</u> A homeless family, consisting of a single mother and her three children, was referred to a DPSS Homeless Case Manager (HCM). With the assistance of the HCM and available resources such as Housing Locator Services and rental listings from the Los Angeles County Housing Database, the family was able to find housing in the City of Azusa. Permanent housing was secured with funds from the DPSS CalWORKs Moving Assistance Program. Moreover, the mother is now ready to search for employment and fulfill her educational goals.

2) Rental Subsidy for CalWORKs and Non-CalWORKs Homeless Families

<u>Successes:</u> One family who received Moving Assistance also qualified for a rental subsidy. This additional benefit helped the family to maintain their newly acquired permanent housing.

<u>Challenges:</u> During the first quarter of FY 2008-09, there was a 35 percent decrease in the number of applications approved from the last quarter in FY 2007-08. Presumably, due to the state of the economy, families are not able to find housing and are staying longer in emergency shelters/transitional housing.

<u>Action Plan:</u> The Department continues to conduct outreach with emergency shelters and transitional housing facilities to promote the program and assist case managers in identifying potential candidates for the program.

<u>Client Success Story:</u> A single mother and her two children were referred to an HCM. The HCM secured emergency shelter for the family at Path Achieve-Glendale and enrolled the participant into the DPSS Greater Avenues for Independence (GAIN) Program. The participant was very determined to find permanent housing. With the assistance of the HCM and the Los Angeles County Housing Database, the participant was able to find permanent housing within a few days. Funds from the Homeless Assistance Program helped the participant to secure permanent housing. As a result, the participant moved from an emergency shelter into permanent housing, and funds from the 12-Month Rental Subsidy Program will assist the participant to maintain permanent housing.

3) Emergency Assistance to Prevent Eviction (EAPE) for CalWORKs Non-Welfare-to-Work Homeless Families

<u>Successes:</u> During this quarter, 864 families accessed emergency assistance to prevent eviction from permanent housing.

<u>Challenges:</u> A major challenge is a lack of funding to preserve and maintain the program and continue to assist families from becoming homeless.

<u>Action Plan:</u> DPSS is committed to evaluating families for the State-approved California Work Opportunity and Responsibility to Kids (CalWORKs) Homeless Assistance (HA) Program.

<u>Client Success Story:</u> Ms. X fell on to hard times after she lost her job. She was served with an eviction letter due to not being able to pay her monthly rent. With the help of the EAPE, Ms. X was able to retain permanent housing for herself and her children.

Page 5 Attachment B

4) Housing Locators - DPSS

Goal: Assist families to locate and secure permanent housing.

Budget: \$3 million (DPSS CalWORKs funding)

Table A.3: Housing Locators Measures FY 2008-09, First Quarter		
(unduplicated count)	Quarter	Cumulative
Homeless Families	400	1,614
Housing (permanent)	123	486
Number of referrals to Program	400	1,614
Average time to place family (days)	60 within 30 days 32 within 60 days 31 within 180 days	120-180

<u>Successes:</u> With the assistance of the Housing Locator program, a total of 400 families were able to receive services this past quarter. The Housing Locators were able to assist 123 of these families in obtaining affordable permanent housing. Approximately 1,614 homeless families have been referred to the Housing Locator program to date. This has resulted in a total of 486 families being placed into permanent housing.

<u>Challenges</u>: Due to the income limitations of our CalWORKs families, and the extremely high cost for shelter (housing market), not all families were placed into affordable permanent housing.

Action Plan: At this time, due to the County budget, the Housing Locator contract will be terminated in December 2008.

<u>Client Success Story:</u> Participant A was referred to the Housing Locator by his/her Homeless Case Manager. With the assistance of the Housing Locator, the participant and his/her family were able to locate and obtain affordable permanent housing. The participant is very appreciative of the assistance received from the Housing Locator program.

Page 6 Attachment B

5) Skid Row Families Demonstration Project

Goal: Locate 300 families outside of Skid Row and into permanent housing.

Budget: \$9,212 million (Board Approved Funding)

Table A.4 : Skid Row Families Demonstration Project Participants and Services FY 2008-09, First Quarter				
(unduplicated clients)	Cumulative (9/30/08)		Quarter	FY 2007-08
(duplicated services) Homeless Families	300	Moving Assistance	37	123
(individuals)	1,084	Moving Assistance Eviction Prevention	37 15	123
Female	273	Housing (emergency/transition		278
Male	27		104	123
a.s	_,	Housing (permanent)	104	123
Hispanic	68	Rental subsidy	18	14
African American	187	Education	1	2
White	12	Education	1	2
Asian/Pacific Islander	3	Job training/referrals	15	25
	S	Job placement	3	6
Native American	-	Section 8	9	65
Other	30			
		Case management	137	254
15 and below	619	Life skills	220	254
16-24	80	Mental health/counseling	14	17
25-49	295	Transportation	130	410
50+	15	Food vouchers	118	390
Program Specific Measures			Quarter	FY 2007-08
Number of families enrolled i	, ,		-	300
Number of families relocated			-	-
Number of families placed in	9 9	9	-	300
Number of adults received re	•	resources and services	180	420
Number of children received	intervention and services		380	850
Number of families received	monitoring/follow up after 6	months case management	89	64
Number of families no longer	enrolled (termination or dr	opped out of program)	5	50
Number of families received	an eviction notice during the	last 3 months	2	-
Number of families who lost	their permanent housing dur	ing the last 3 months	3	-
Emergency Housing/Case M				
Average length of stay in em Most frequent destination (pe				90 days 227 families
Case management (level 2) Average number of case mar Total case management hour Number of cases per manage	rs for all participants during			26 hours 3,564 hours 15 cases

Additional measures to be provided after close of program:

- Gainful Employment (Number of individuals who obtained employment)
- Access to appropriate and necessary Mental Health or substance abuse treatment (Number of individuals who received mental health services, Number of individuals who received substance abuse treatment)
- Educational stability for children (Number of children)
- Socialization/recreational stability for children (Number of children)
- Services to assist domestic violence victims (Number who received domestic violence services/counseling)

Page 7 Attachment B

<u>Successes:</u> As of September 30, 2008, 227 Skid Row families have been assisted in moving into permanent housing, through the utilization of HACLA Section 8 vouchers, utilization of shallow subsidies for Fair Market Value rentals, and placement of some families into subsidized, service-enriched, affordable housing complexes owned by Beyond Shelter. Fourteen families were in emergency or transitional housing. *Effective September 30, 2008, a total of 10 families have completed 12 months in permanent housing and graduated from the program.*

<u>Challenges:</u> The issue of unemployment remains a serious problem, as their limited incomes prevent them from moving into permanent housing. In order to increase income, these families are referred to the Beyond Shelter Employment Department for assistance in obtaining employment, however, there is tremendous difficulty in securing employment. There is also great mental health anguish involved.

<u>Action plan:</u> Ongoing case management services assist families with emotional support and community referrals during their housing search. Creative planning with property owners, including utilizing shallow subsidies and weekly rent installments, will continue to help. Future plans are in development to link homeless families with faith-based resources to provide additional support.

<u>Client Success Story:</u> Client A is a 25-year-old mother of two children, one child is four years of age and the second child is a newborn baby. The client suffers from post traumatic stress disorder (PTSD) as a result of seeing her daughter's father murdered in a drive-by shooting in Los Angeles. The client was pregnant with her daughter at the time of the shooting. The client's husband was not gang affiliated, he simply happened to be in the wrong place at the wrong time. She then suffered from PTSD, and became homeless when she stopped working and was unable to pay her rent. At that time, she and her daughter had nowhere left to turn and sought shelter at the Union Rescue Mission on Skid Row. From there, the client was immediately referred to Beyond Shelter and was moved into a hotel outside Skid Row that same day. Then, the family was moved into a master leased apartment funded by the demonstration project, and Beyond Shelter provided the family with home furnishings and essential items.

Beyond Shelter assisted this client in applying for a Section 8 voucher, and once it was issued, helped her to locate an apartment, access move-in funds, and negotiate the lease. This family happily moved into permanent housing in December 2007. Soon after, the client gave birth to a beautiful baby girl. With a great deal of support from her case manager, including referrals to counseling, she feels that she is finally overcoming some of the stress and the sadness that she experienced after the loss of her husband. This young mother continues to receive case management support from Beyond Shelter on a monthly basis and is grateful to be able to provide a home for her young children.

Page 8 Attachment B

III. PROGRAMS FOR TRANSITION AGE YOUTH

6 and 7) Moving Assistance for Transition Age Youth

Goal: Assist transition age youth to move into and secure permanent housing.

Budget: \$3.5 million (One-Time Funding)

Table B.1: Moving Assistance for Transition Age Youth Participants FY 2008-09, First Quarter					
,	Total	Prob	ation	D	CFS
	Quarter	Quarter	Cumulative	Quarter	**Cumulative
Transition Age Youth	*341 (100%)	*68	271	179	253
C		(new)		(all)	
Female	167 (68%)	34	123	133	-
Male	80 (32%)	34	148	46	-
Hispanic	57 (23%)	19	66	38	-
African American	182 (74%)	47	194	135	-
White	4 (2%)	-	8	4	-
Asian/Pacific Islander	3 (1%)	2	3	1	-
Native American/Other	-	-	-	-	-
16-24	247 (100%)	68	271	179	

^{*}During the First Quarter of FY 2008-09, 162 TAY were enrolled; 94 TAY continued from the previous fiscal year.

^{**}FY 2007-08 DCFS demographic participant data was duplicative; future reports will aggregate this data.

Table B.2: Moving Assistan FY 2008-09, First Quarter	ce for Transition Age	Youth Services			
(unduplicated count)	Total	Prob	ation	DO	CFS
	Quarter (all)	Quarter	Cumulative	Quarter	Cumulative
Moving Assistance	274	59	180	39	94
Rental Subsidy	608	103	271	141	337
Housing (permanent)	415	68	271	29	162
Any supportive service ⁺	165	48	101	19	64
Education	10	9	-	19	10
Job training, referrals	4	-	-	_	4
Job placement	81	39	81		
Case management	196	162	271	179	253
Life skills	8	-	-	8	8
Mental health	1	-	-	1	1
Transportation	17	-	-	17	17
Food vouchers, clothing	24	-	-	10	24

⁺Probation does not break down supportive service by type, except for job placement.

Table B.3: Longer-term Outcomes for Transition Age Youth (6 or more months), FY 2008-09, First Quarter				
	Probation	DCFS		
Continuing to live in housing	51	56		
Obtained employment	39	15		
Maintained employment	130	46		
Enrolled in educational program/school	9	23		
Received high school diploma/GED	-	-		

^{**}May be less than 6 months

Page 9 Attachment B

Table B.4: Program Specific Measures for Transition Age Yo FY 2008-09, First Quarter	outh				
		bation	DCFS		
	Quarter	Cumulative	Quarter	Cumulative	
Number of new approvals	70	355	59	264	
Average cost per youth	\$3,964	\$3,815	\$925.85	\$2,663	
Number of program participants satisfied with program services	70 (of 70)	157 (of 157)	36	105	
Number of pregnant/parenting youth placed in permanent housing	28	82	7	68	
Number exited housing	21	48	59	235	
Number remaining in permanent housing and receiving assistance at 6 months	n/a	n/a	11	48	

Probation – Moving Assistance for TAY

<u>Successes:</u> Transitioning young Probationers from jail, camp, placement, gang related environments and/or an unstable family situation is difficult. *The overall recidivism rate for Probation is approximately 30 percent, and to date, the re-offend rate for TPP participants is 11 percent.* This appears significant and it will be interesting to track whether or not this is sustained over the next year. From last quarter, the recidivism rate slightly increased to 11 from 10 percent.

<u>Challenges:</u> Currently, meeting continuing needs with the remaining resources is a challenge. Probation has used more than half of funds for this fiscal year and may have to stop recruiting participants in January. The program will focus on helping participants gain self-sufficiency by connecting youth to job training and employment opportunities. By linking youth with jobs that can pay rent, they will gain greater stability and independence. Another challenge is keeping contact with participants. Youth often do not have a land-line phone and tend to use disposable phones so their numbers change frequently.

<u>Action Plan:</u> Probation plans to leverage funds with other HPI programs to better service clients. Such programs include DMH Full Service Partnerships and DPSS programs serving families and individuals. As mentioned, the program will focus on temporary housing and connect existing participants with better employment opportunities.

<u>Client Success Story:</u> One young woman has been in housing with her two sons for over a year. She is working on her GED and recently found employment as a career development intern with DPSS.

DCFS - Moving Assistance for TAY

<u>Successes:</u> The program continues to have great success. During the first quarter, 179 youth participated. A total of 122 youth received ongoing services, and 59 youth received new approvals. The program provided moving assistance to 39 youth. Average spending was \$53,000 per month.

<u>Challenges:</u> The program continues to face challenges in maintaining contact with youth. The majority of youth use cell phones, and telephone numbers change frequently. Moreover, it is extremely difficult to conduct the follow-up reviews, if they are no longer receiving assistance.

<u>Action Plan:</u> DCFS will attempt to conduct more frequent follow-up with the youth. In addition, we are also obtaining email address as another avenue to maintain contact.

<u>Client Success Story:</u> A 21-year old female college student, who receives SSI, moved in with her boyfriend after knowing him for six weeks. Shortly after they moved in together the boyfriend became physically abusive, and the youth was forced to relocate. She had no funds to secure alternate housing. She was forced to sleep in her car and also spent several nights with relatives who reside 150 miles away. With assistance from DCFS, the youth was able to locate housing and will receive move-in fees for six months of rental assistance.

Page 10 Attachment B

IV. PROGRAMS FOR INDIVIDUALS

8) Access to Housing for Health (AHH)

Goal: To provide clients discharged from hospitals with case management, housing location and supportive services while permanent housing applications are processed.

Budget: \$1.5 million (Board Approved Funding)

FY 2008-09, First Quarter (unduplicated count)	Quarter	Cumulative		Quarter	Cumulative
Homeless Individuals	4	4	Education	-	
Chronic Homeless	48	66	Job training	-	-
Homeless Families	3	3	Job placement	-	2
Female	22	26			
Male	40	48	General Relief	7	54
			Food Stamps only	-	•
Hispanic	17	20	Medi-Cal/Medicare	-	29
African American	26	35	Section 8	4	34
White	19	25	Public Housing Certificate	3	10
Asian/Pacific Islander	-	1	SSI/SSDI	-	23
Native American	-	-		Quarter	FY 07-08
Other	-	-	Case management	55	6
			Health care	55	6
15 and below	6	13	Life skills	55	6
25-49	21	31	Mental health/counseling	55	1
50+	35	44	Substance abuse (outpat.)	8	1
			Transportation	55	6
Moving Assistance	7	45			
Housing (emergency)	17	83			
Housing (permanent)	7	50			
Rental subsidy	7	45			
Program Specific Measur	es			Quarter	Cumulativ
Number of referrals				49	43
Number admitted to progra	am (enrolled)			8	7
Pending applications				3	
Number that did not meet	eligibility criter	ia		38	28:
Number of exited clients				3	2
Of the current AHH enrolle	es, number of i	npatient admis	sions	1	
Number of ER visits after p	orogram enrolln	nent		4	3
Number of new AHH enroll	ees that have a	primary healtl	hcare provider	8	7
ansitional Housing/Case					
verage stay at emergency.	transitional ho	using:		193 days, 50 permanent h	
evel 3 Assisted/Supported verage case management otal case management hou umber of cases per case m	hours for each ırs for all partic	participant per	month:	12 hours 96 hours 12 cases	

Page 11 Attachment B

Successes: Since March 1, 2007 - September 30, 2008, a total of 44 clients have been placed into permanent housing (County Section 8, City Section 8, or County Public Housing); six persons were placed in alternative housing arrangements, such as nursing or board and care facilities; and a total of 17 persons have exited the program. At the end of the quarter, a total of eight persons were receiving emergency housing and were pending permanent housing placement. Clients in permanent

Table C.2: Longer-term Outcomes FY 2008-09, First Quarter	6 mo.	12 mo.
Continuing to live in housing	9	5
Receiving rental subsidy	9	5
Obtained employment	-	-
Maintained employment	-	2
Enrolled in educational program	1	-
Case management	27	24
Health care	24	24
Substance abuse treatment (outpatient)	3	-
Reunited with family	2	5

housing continue to receive case management services.

There are 17 individuals that reached their one year mark since enrolling in AHH during the July to September 2008 quarter. They had a combined total of 54 Emergency Department visits during the 12 months prior to AHH enrollment. *Post enrollment, the clients had a combined total of 14 Emergency Department visits for a 74 percent reduction.*

The same 17 individuals had a combined total of 17 inpatient visits (totaling 90 days) prior to AHH enrollment. Post enrollment, the clients had a total of 4 inpatient visits (totaling 15 days) for an 83 percent reduction in inpatient days.

An additional success of the program has been the increase in eligible referrals. Staff continues to conduct outreach at the DHS hospitals as well as with community providers.

<u>Challenges</u>: An on-going challenge for the AHH program is accessing funds from the DPSS - HPI Move-In Assistance Program. Since March 2007, only two clients have successfully received assistance with move-in/appliance funds through the program, although the majority of the AHH clients were eligible. DHS, DPSS, and Homeless Healthcare Los Angeles (HHCLA) have met various times over the year to discuss barriers and potential remedies.

Action Plan: DHS, DPSS, and HHCLA will continue to work together and discuss how to secure these funds. In the meantime, HHCLA will continue to pay the move-in fees for clients through the AHH budget. Unfortunately, there will be less AHH funds left over to fund other essential move-in items such as furniture, turning on utilities, apartment applications, credit checks, etc.

<u>Client Success Stories</u>: Mr. J is a 57-year-old African American male who was diagnosed with Hepatitis C in 2005. Mr. J also has a history of substance abuse and has been clean and sober for more than 20 years. He has cirrhosis of the liver, diabetes, and vertigo. He receives medical treatment at LAC+USC Medical Center, Harbor-UCLA Medical Center, and the Edward R. Roybal Comprehensive Health Center. Mr. J is divorced, has no children, and had been working as a self-employed painter until March 2007. Before entering AHH, he had been homeless for nine months and living in his car.

Mr. J entered the program in June 2008 and was assisted with an application for public housing. It was determined that public housing would be beneficial for Mr. J due to the additional case management services available on-site. In August 2008, he was approved for Supplemental Security Income (SSI) and in September he moved into a public housing unit. His increase in income allowed him to save money and furnish his unit. Due to his previous homeless status, he could not be placed on the liver transplant list. Transplants require long recovery periods and candidates need stable living arrangements, so that they may receive proper nutrition, regular rest, and maintain their on-going medical appointments. Currently, he is currently on the list and is awaiting a liver.

Page 12 Attachment B

9) Co-Occurring Disorders Court

Goal: Assist dually diagnosed adult defendants in receiving comprehensive community-based mental health and substance abuse treatment.

Budget: \$200,000 (HPI On-going Funding; pass through for DMH)

(unduplicated count)	Quarter			Quarter
Chronic Homeless	49	Education		12
Homeless Individuals	1	Job training/referrals		10
Transition Age Youth	1	Job placement		1
		CalWORKs		1
Female	29	General Relief (GR,FS)		9
Male	22	Food Stamps only		2
		Medi-Cal/Medicare		26
		SSI/SSDI		25
Hispanic	6	Shelter Plus Care		1
African American	42			
White	3	Alternative Court		47
		Case Management		47
	2	Health care/medical		36
16-24	32	Life Skills		47
25 -49	17	Mental health/counseling		47
50+		Social/community activity		29
Handa a famora a a		Substance abuse (outpatient)		42
Housing (emergency)	4 *33	Substance abuse (residential) Transportation		8 47
Housing (permanent) Rental Subsidy	33 19	Clothing		26
*46 placed into permanent hou		Personal Hygiene		30
Longer-term Outcomes	<u> </u>	73.	6 mo.	12 mo.
Continuing to live in housing			7	7
Receiving rental subsidy			3	2
Enrolled in educational program, school			5	3
Case management			14	10
Health care			14	10
Good or improved physical health			14	9
Mental health/counseling			14	10
Good or improved mental health			14	10
Substance abuse treatment (outpatient)			7	10
Substance abuse treatment (residential)			<u>-</u>	-
No drug use			7	4
Reunited with family			12	2
Emergency Housing/Case Management				
Average stay in emergency housing:			12 da	9
Number placed into permanent supportive h	ousing:		3 pa	rticipants
Level 3 Assisted/Supported Referral and Co				
Average case management hours for each participant per month:			7 hours	
Total case management hours for all participants during current reporting period:			945 hours	
Number of cases per case manager:			7 ca	ises

Page 13 Attachment B

Table C.4: Program Specific Measures	Quarter	Cumulative
Number of clients screened for enrollment	70	359
Number of clients accepted for observation	18	69
Total number of clients enrolled	12	60
Number of clients pending enrollment	6	13
Number of clients not meeting Program criteria	23	166
Number of clients rejecting/dropping out prior to enrollment	13	96
Number of clients lost during follow-up process	3	6
Number of participants in ER/crisis stabilization while enrolled in program	9	17
Average length of hospital stay (days)	6	9
Number of participants who have a primary healthcare provider while enrolled	17	38
Number of participants with new arrest(s)	9	17
Misdemeanor:	1	3
Felony:	8	10
Number of participants in jail	9	18
Average number of days in jail	31	36
		(FY 07-08)

<u>Successes:</u> An established peer-to-peer support group provides a powerful treatment tool in improving positive peer relationships and assists in sobriety, stable housing, commitment to treatment, and progress toward education and employment. DMH, the Court and Special Services for Groups (SSG) treatment staff work together to establish strong relationships with clients. As a result, many clients who relapse feel connected enough to the staff and program that they are willing to return and try again.

<u>Challenges:</u> SSG does not own private housing but contracts with two housing providers for supervised, stable housing. Since the house managers and other staff are not employed by SSG, there are issues (e.g., not catering to special dietary issues, level of cleanliness, and conflict resolution) that have not been handled with the expected standard of care or adequate sensitivity by the housing staff.

Action Plan: SSG Central Management is addressing these issues and will continue to provide on-site trainings for all housing managers in areas of communication, conflict resolution, mental health 101, and co-occurring disorders. SSG will write and provide written housing protocols and increase site visits weekly. Clients are also encouraged to provide feedback about their housing so issues can be investigated and addressed.

<u>Client Success Story:</u> After more than a year of homelessness, Client P was referred to the CODC program last April. Client P describes that he had "occasionally" been able to secure a shelter bed but on most nights would sleep on a street or in an alleyway. For 35 years, the client has been using drugs. He is the first to describe that his severe substance addiction has impacted all aspects of his life – from stable housing, to employment, education, and his relationships. Since his referral to the CODC program six months ago, he has successfully maintained his sobriety and has been stable in SSG Central housing, which he describes as "a real home, almost like a family." He knows his continued sobriety will be "a lot of work," but he is motivated to stay clean for the long run.

Client P has suffered from severe depression most of his life. He's been on anti-depressant medication for 10 years, but has been highly inconsistent about taking his medications. Over the past six months at SSG Central, Client P has learned about the importance of medication compliance and has been consistent in regard to his psychiatric and mental health treatment. Client P describes that he "rarely" feels depressed these days and acknowledges that his functioning has improved in all aspects of his life. Learning to talk about his substance cravings has been an important step, and he has begun to establish peer relationships that are strong enough for him to depend on when he's struggling with his sobriety. Client P has started attending computer classes. This is the first time he has been in any kind of education for over 40 years. He is happy to report that he is a quick learner and sees computers as "a new world that's opening up for him." Most significantly, after having been estranged from his family for 17 years while living on the streets, the client has initiated communication and visited his daughter. Client P regularly expresses his appreciation for being in the program. He gives hand-written notes and cards to his case manager talking about how wonderful his life is now and how happy he is that he was included in the program.

Page 14 Attachment B

10) DPSS General Relief (GR) Housing (Rental) Subsidy and Case Management Project

Goal: To assist the homeless GR population with a rental subsidy. In addition, coordinate access to supportive services and increase employment and benefits to reduce homelessness.

Budget: \$4.052 million (HPI On-going Funding)

Table C.5: DPSS GR Housing FY 2008-09, First Quarter	J Subsidy an	d Case Mana	gement Project Measures		
(unduplicated count)		Quarter			Quarter
Chronic Homeless		254	Education		8
Homeless Individuals		83	Job training/referrals Job placement		103 52
Female		115	· ·		
Male		222			
			SSI/SSDI		18
Hispanic		31	Section 8		1
African American		225	Veteran's		1
White		71			
Asian/PI		6	0		005
Native American Other		2 2	Case management Health care		885 61
Other		2	Life skills		17
			Mental health/counseling		121
16-24		26	Substance abuse (resident)		25
25-49		240	Transportation		55
50+		71_	·		
	Quarter	FY 07-08			
Rental (housing) subsidy	858	1,535			
Moving assistance	125	860			
Case management	885	1,535			
Longer-term Outcomes			6 mo.	12 mo.	18 mo.
Receiving rental subsidy			435	200	63
Obtained employment			52	-	-
Maintained employment			48	-	-
Enrolled in educational program	m, school		11	-	-
Case management Health care			435 54	200 24	63 25
Mental health/counseling			54 61	24 13	25 11
Substance abuse treatment (o	utnatient)		31	5	4
Reunited with family	arpunont)		1	1	-

Table C.5: DPSS GR Housing Subsidy and Case Managemer FY 2008-09, First Quarter	ent Project Measures	
(duplicated count)	Quarter	Fiscal Year
Number of applications received	411	Not available
Average number of business days to approve	20	20
Average amount of rental subsidy	\$285	\$300
Number of individuals re-entering program	41	Not available
Number of SSI approvals	18	Not available
Percent of SSI approvals	6%	Not available
Number of individuals disengaged from program	136	Not available

Page 15 Attachment B

Level 1 Case Management (assessment)	
Average case management hours for each participant per month:	2 hours
Total case management hours for all participants during current reporting period:	8,724 hours
Number of cases per case manager:	60 cases

<u>Successes:</u> Of all participants, 52 received job placements, and 80 percent were placed within this reporting period. Eighteen received SSI approvals, one received Section 8 approval; and one reunited with family.

<u>Challenges:</u> 1) A lack of affordable housing is available in the West Los Angeles area; 2) Participants move constantly; 3) Motivating the chronically homeless to maintain housing can be difficult; and 4) Maximizing the 900 allocation is a challenge due to high exit numbers.

Action Plan: The following are part of the Housing Locator's plan: 1) Request to identify more available housing in the West Los Angeles area; this was accomplished at a quarterly meeting held in October 2008; 2) monitor and evaluate participant's rental property changes and encourage them to maintain stable housing; 3) advise participants to seek assistance from their General Relief Housing Case Manager before making a decision to change rental property; and 4) encourage participants to visit and inspect rental property before they move in.

<u>Client Success Stories:</u> A couple was placed in an apartment and received MA to pay for last month's rent and a stove. Staff focused on getting them approved for SSI, and the wife was approved for SSI in September 2008. As part of transitioning from the program during the exit interview, case management staff discussed that she would pay her portion of the rent in full, and since the husband is enrolled in the project, his portion of the rent will be paid through the HPI Rental Subsidy Project.

As a result of Hurricane Katrina, Ms. L came to Los Angeles, and she found stability by housing provided through this project. Ms. L's General Relief Opportunities for Work (GROW) and Housing Case Manager assisted her in developing career goals, and she enrolled in a property management program at L.A. Trade Tech where she received a certificate of completion.

Mr. M is disabled and chronically homeless, and he was having difficulty living in an emergency shelter. He was then placed in shared housing for persons aged 50 and over. Mr. M loves his new environment, and he is now focused on going back to school and has applied for SSI benefits.

Page 16 Attachment B

11 and 12) Homeless Release Projects (DPSS-DHS and DPSS-Sheriff)

Goal: Identify individuals scheduled for release who are eligible for DPSS administered benefits. **Budget:** DPSS-DHS: \$588,000; DPSS-Sheriff: \$1.097 million (On-going Funding)

Table C.6 Homeless Release	Cumulative Total	DPSS	-DHS	DPSS-	Sheriff
(unduplicated count)		Quarter	Cumulative	Quarter	Cumulative
Homeless Individuals Homeless Families	3,877 1	94	508 1	417	3,463
Female	190	18	*n/a	172	*n/a
Male Transgender	319 2	76		243	
Hispanic	102	20		141	
African American	180	44		206	
White	80	25		57	
Asian/PI	3	1		2	
Native American	2	1		1	
Other	11	1		10	
16-24	26	n/a		91	
25-49	240	n/a		273	
50+	71	n/a		53	
Housing (emergency)	158	20	**19	38	139
Average stay (days)	13	14	14	12	12
CalWORKs (approvals)	26	-	1	-	25
General Relief (w/FS)	1,690	22	201	218	1,511
General Relief only	249	5	64	29	190
Food Stamps only SSI/SSDI	35 9	-	1	12 9	34 9
Veterans	3		-	3	3

^{*}Information not available for FY 2007-08.

^{**}Third and fourth quarter number substituted for fiscal year (unavailable).

Table C.7 Program Measures	Cumulative Total	DPSS-	DHS	DPSS-S	Sheriff
		Quarter	Cumulative	Quarter	Cumulative
Total referrals received	6,812	94	508	901	6,304
Total referrals accepted	4,428	37	286	679	4,142
	(65%)				
Of the total referrals	, ,				
accepted:					
Total approved	395 (Quarter)	27	*27	368	1,760
Total denied	81 (Quarter)	57	*57	24	86
Total pending	1,039 (Quarter)	7	*7	1,032	1,619
release:					
Releases/discharges	305	27	172	133	133
Number of applications					
Food Stamps	35	-	1	-	34
General Relief	1,939	49	287	306	1,701
CalWORKs	26	_	1	6	25

Page 17 Attachment B

DPSS-DHS Homeless Release Project

<u>Successes:</u> Program staff reviewed 94 referrals and processed and approved 27 applications. Twenty housing (emergency) vouchers were requested and issued within 14 business days.

<u>Challenges:</u> The Project's outreach efforts are directed to a population in need of various programs, such as Food Stamps and Cash Aid. The servicing of this project is challenging, due to the participants' urgent medical needs. These patients are offered services in a hospital setting. They are often unable to apply for these services because of the time needed during the discharge process. Moreover, these patients are often discharged during hours when staff is not available. Consequently, the number of referrals to this program remains very low.

Action Plan: Due to the low number of referrals received in the DPSS/DHS Homeless Release Project, the Project was expanded to two private hospitals, White Memorial and Hollywood Presbyterian. The expansion was implemented on September 29, 2008. The next quarterly report will reflect this expansion.

DPSS-Sheriff Homeless Release Project

<u>Successes:</u> Many participants have expressed gratitude for the outreach by DPSS staff. They also exhibit renewed optimism once they understand they will receive temporary housing and expedited benefits upon release.

<u>Challenges:</u> Often, inmates are released during the evening or weekend hours, when DPSS staff is not available to provide services. Also, some inmates are transferred to other facilities to be released, and DPSS staff is not available at those facilities.

<u>Action Plan:</u> Bi-monthly meetings are scheduled with Sheriff's Department and DPSS staff to identify inmates participating in this program and plan for their release. Program participants are to be released during regular office hours and at facilities with available DPSS staff.

<u>Client Success Story:</u> Client P was released from the Men's Central Jail in January 2008. Mr. P was able to find employment and is now taking classes to become a drug and alcohol counselor. Mr. P. wrote to thank the Civic Center District staff for their assistance.

Page 18 Attachment B

13) Homeless Recuperative Care Beds

Goal: Homeless individuals from area hospitals receive recuperative care and are discharged to transitional or permanent housing.

Budget: \$1.320 million (One-Time Funding)

Table C.8: Homeless Recuperative Care Beds Participants and Services FY 2008-09, First Quarter (point in time)				
(unduplicated count)	Quarter		Quarter	
Homeless Individuals	55	Housing (permanent)	5	
Familia	0	Housing (transitional)	2	
Female Male	8 38	General Relief only	11	
Male	30	Medi-Cal/Medicare	7	
Hispanic	11	SSI/SSDI	7	
African American	15			
White	9	Case management	55	
Other	4	Health care	55	
16-24	1	Life skills	12	
25-49	22	Mental health/counseling	1	
50+	23	Recuperative care	55	
		Substance abuse (outpatient)	2	
		Transportation	55	
Program Specific Measures			Quarter	
Number of patients referred for recuperative care beds			66	
Number of patients admitted to recuperative care services			55	
Number of patients who were discharged from recuperative care services			33	
Number of patients who were assigned to a primary health care provider during recuperative care stay			33	
Average length of stay for patie	nts in recuperative c	are program (days)	30	
Number of ER visits 6 months a	fter being discharged	from recuperative care	-	
Number of inpatient admissions	6 months after rece	iving recuperative care	-	
Average length of acute care stay for clients discharged to recuperative care				
Emergency Housing/Case Management				
Average stay at emergency/transitional housing:			30 days	
Level 3 Assisted/Supported Referral and Counseling case management services Average case management hours for each participant per month: Total case management hours for all participants during current reporting period: Number of cases per case manager:			600 hours 1,800 hours 20 cases	

<u>Successes:</u> The average turn around time for admission has vastly improved, and JWCH Institute is notifying referring parties within 24 hours of acceptance or denial. In addition, JWCH has arranged to have the ramp to enter the Bell Shelter redone to comply with ADA specifications.

<u>Challenges:</u> Patients continue to elope and leave recuperative care without notice and/or a discharge plan.

Action Plan: According to the last status report, DHS and recuperative care staff made some arrangements with Bell Shelter to accept our clients for transitional housing. In addition, DMH has agreed to come and evaluate any client that staff feel has a mental disorder and could be eligible for a DMH program and/or housing.

<u>Client Success Story:</u> Two patients have been discharged from recuperative care directly into the Access to Housing for Health Project.

Page 19 Attachment B

14) Housing Specialists- DMH

Goal: Assist homeless individuals, families, and transition age youth to obtain and maintain permanent housing. *Eighty-six percent of participants during FY 2007-08 were homeless individuals.*

Budget: \$923,000 (annually in MHSA funding)

Table C.9: Housing Specialists Program Specific Measures FY 2008-09, First Quarter and FY 2007-08		
(duplicated count)	Quarter	Fiscal Year
Number of referrals to program.	163	n/a
Number of property owners contacted.	330	898
Average time to place family.	n/a	n/a

Successes: During the first quarter of FY 2008-09, the Countywide Housing Specialists reported 86 individuals placed in permanent housing. Stay in permanent housing ranged from less than 30 days to up to 12 months. Of the 86 individuals, 30 have been housed in permanent housing for 30 days or less, 31 for three months, and 25 for six or more months (16 for six months, four for nine months and five for 12 months). Those individuals who have been housed over three months were initially housed during the previous fiscal year but are continuing to receive follow-up services to increase housing stability and retention.

<u>Challenges:</u> The Department's Projects for Assistance in Transition from Homelessness (PATH) grant received a significant reduction for FY 2008-09. The PATH grant, a federal program that provides funding to address the needs of people who are homeless and have serious mental illness is utilized across the DMH system with allocations to directly operate programs and contract agencies. One of the DMH programs that has been impacted by this reduction is the Move-in Assistance Program designed to provide financial assistance with first month rent and security

Table C.10: Participants and Se FY 2008-09, First Quarter and FY		
1 1 2000-03, 1 list Quarter and 1 1	Quarter	Fiscal Year
Chronic homeless individuals	31	-
Homeless individuals	210	2,343
Homeless families	9	255
Transition age youth	2	142
Female	154	*n/a
Male	127	
Transgender	2	
Hispanic	75	
African American	106	
White	85	
Asian/Pacific Islander	13	
Native American Other	1	
Other	3	
16-24	2	
25-49	272	
50+	2 Quarter	Cumulative
Moving assistance	Quarter 25	173
Eviction prevention	2	7
Housing (emergency)	174	977
Housing (transitional)	87	390
Housing (permanent)	58	403
Rental subsidy	46	150
	(Section 8: 20)	
Remain in housing (six or more months)	25	*
Mental health	283	*
Life skills	14	292

1,269

deposits to homeless individuals with mental illness moving into permanent affordable housing. As a result, the Department will be forced to reduce the number of individuals served through this program.

Tenant rights/responsibilities

<u>Action Plan:</u> The Department is actively seeking other funding options to augment the Move-In Assistance Program.

<u>Client Success Story:</u> Not available this quarter. The new HPI reporting format has allowed the Housing Specialists to redesign data collection efforts.

^{*}Information not available for FY 2007-08.

Page 20 Attachment B

15) Jail-In Reach Program

Goal: Engage homeless nonviolent inmates upon entry into jail. Develop a release plan that coordinates an assessment and links clients to supportive services, benefits, and housing options upon their release. Case management team works with clients to obtain employment and explore rental subsidy eligibility. **Budget:** \$1,500,000 (One-Time Funding)

Table C.11 : Jail-In Reach	Program		
FY 2008-09, First Quarter (duplicated count)	Quarter		Quarter
Homeless Individuals	61	Housing (emergency)	2
Chronic Homeless	97	Housing (transitional)	2
Female	31	Job training	42
Male	127	Job placement	1
Hispanic	33	General Relief (Food Stamps)	8
African American	94	General Relief only	22
White	36		
Native American	2	Case management	84
Other	3	Health care	1
		Substance abuse, outpatient	5
16-24	20	Substance abuse, residential	2
25-49	117	Transportation	4
50+	19	Legal Advocacy	12
Program Specific Measure	s		Quarter
Number of participants who received intake/enrollment			110
Number of participants who received intake/enrollment within 72 hrs of initial interview			85
Number of participants who did not complete program (exited prior to completing)			38
Number by violent crime			29
Number by non-violent crime			42
Number by area of residence	79		
Number by area of residence	e prior to incarceratio	n (second most frequent residence)	17
Number of times in County	jail		174
Number of times in State pr	ison		24
Number of participants with	a service plan		110
Number of participants with	a service plan within	a week from intake/enrollment	85
Number of referrals provider - Service(s): Case managen treatment, transportation	nent, health/medical o	<u>/pe:</u> care, mental health, substance abuse	128
 Benefit(s): CalWORKs, Gel Plus Care, SSI/SSDI, Medi 		mps only, Section 8 and/or Shelter	30
- Job/education related serv	rice(s): Job training, e	employment referrals, education	42
Number of participants who	do not return to jail		110
Emergency Housing/Case	Management		
Average stay at emergency	transitional housing:	(2 participants)	24 days
• • •		ng case management services	
Average case management		•	2 hours
· ·		during current reporting period:	512 hours
Number of cases per case manager:			22 cases

Page 21 Attachment B

<u>Successes:</u> During the first quarter, the Jail-In Reach Program (JIR) reached over 200 people incarcerated within Twin Towers, CRDF Lynwood, Pitchess Detention Center and Men's Central Jail. Employment classes were provided to groups of up to 80 people. A total of 110 clients who met eligibility requirements was enrolled into the program and began receiving services. The program was introduced to clients, the community and other agencies vital to the success of the Community Transition Unit of the Sheriff's Department. Shortly after implementation, JIR staff successfully collaborated with multiple agencies in serving the population and worked toward the established outcomes.

In this reporting format, the unduplicated count will show that we have enrolled 110 clients; while the housing placement numbers will only four have actually been placed. Because of the limited categories in the report, we are unable to account for the fact that most of our clients are somehow stabilized with temporary housing; such as staying with family, in residential treatment, etc. The goal of this program is to make sure that our clients have a roof over their head in a stable environment using whatever method we can, in order to work with them on their underlying issues to prevent recidivism.

Every two weeks, entire JIR team receives training. To date, training through our partners at the Corporation for Supportive Housing has included Housing Advocacy, Financial Management, Sexual Harassment, Motivational Interviewing, Conflict Resolution and Mediation, Harm Reduction and Software/Data Management Training. These regular team meetings enhance productivity, give our staff a new perspective in dealing with client needs, and promote team unity.

<u>Challenges:</u> The program was being introduced to the clients and the initial enrollment was slow. Staff has worked very hard in the past few months to establish the program and generate interest. It was also challenging to try to retain individuals who had enrolled in the program but did not continue upon release. We believe that this is partially due to the fact that the program is new and therefore there is not a lot of buzz and success stories yet to encourage people. The dropout is also partially due to the fact that once someone is released we lose contact with them. This will most likely be common with a portion of our client population.

The operational requirements of the program and facilities had to be learned quickly by the JIR staff. The integration of the civilian staff into the Sheriff's facility and structure initially presented some challenges, but the Sheriff's Community Transition Unit leadership has worked very hard with our team to create a cohesive environment and a unified front for those we are serving. We anticipate that it will still take a while to break down all of the barriers, as we are working in a very structured environment with high level security and we will need to continue to work hard to make certain that our staff presence does not compromise that.

Action Plan: The continued exposure and marketing of the program will increase awareness. Clients will be able to share their positive experiences with staff and other potential clients who will entrust the program and eventually benefit from services. JIR partnering agencies will continue to work closely with Sheriff personnel to improve coordination. JIR will include Probation, Parole and related law enforcement agencies in planning and oversight exercises to explore ways of maximizing resources. JIR will increase the number of participants into the program and maintain a rigorous training schedule throughout the next quarter on such topics as Mentoring, Housing Advocacy/Tenant Panels, Legal Advocacy, Crisis Intervention/In-Home Safety, etc.

<u>Client Success Story:</u> A 30-year-old female who had been incarcerated more than 10 times was scheduled to release to the Northern California County of her arrest. She was paroled to the County where she has spent most of her life and where her direct family resides. The JIR staff enrolled her into the program and created her service plan. With guidance of her case manager, mentor and employment specialist she was able to work through her service plan and identify potential barriers to her success that will face her upon her release. The initial plan for her was to release her to the area where her negative influences reside. She also had conditions of her Parole that restricted contact from certain members of her family. She eventually created a goal to relocate to Southern California where she can take advantage of the resources available to her in the Los Angeles area – and be far away from the family and friends that promoted and contributed to her negative patterns of behavior. The JIR staff worked

Page 22 Attachment B

tirelessly with the Parole offices of both districts in an effort to have her reassigned. The staff had to convince the agency that the JIR program would assist in this person's rehabilitation and reintegration to society. Within a very short time frame, JIR staff was successful and the client was released to the care of a housing facility within our partnership. She has reconnected with family members in the area with the assistance of her mentor. With continued participation in the program and collaboration with Parole, the outlook for this individual appears to be promising.

Page 23 Attachment B

16) Los Angeles County Homeless Court Program

Table C.12: Los Angeles County Homeless Court Program Participants

benefits, application and eligibility requirements, and legal resources.

Goal: Assist homeless individuals with clearing outstanding tickets, fines, and warrants upon successful completion of rehabilitation recovery programs for mental health, substance abuse and/or other issues. **Budget:** \$379,000 (On-going Funding)

FY 2008-09, First Quarter					
(duplicated count)	Quarter	Cumulative		Quarter	Cumulative
Homeless Individuals	354	508	Hispanic	80	36
			African American	188	78
Female	113	164	White	68	34
Male	240	342	Asian/Pacific Islander	4	-
Transgender	1	2	Native American	2	1
			Other	12	5
			15 and balance		
			15 and below	-	-
			16-24	22	16
			25-49	246	91
			50+	86	47
Program Specific Measur	es			Quarter	Cumulative
Program Specific Measur Number of Los Angeles Con		Court motions	received.	Quarter 707	Cumulative 1,041
Number of Los Angeles Co Number of program partici	unty Homeless pants whose qu	ualifying motior	ns are submitted to and filed	707 707	1,041 1,041
Number of Los Angeles Con Number of program partici by Superior Court, and res	unty Homeless pants whose quolved within 30	ualifying motior days of submi	ns are submitted to and filed ssion.	707 707 100%	1,041 1,041 100%
Number of Los Angeles Con Number of program partici by Superior Court, and res Number of audited records	unty Homeless pants whose quolved within 30 in the Superio	ualifying motior days of submi	ns are submitted to and filed ssion.	707 707 100% 15	1,041 1,041 100% 15 (FY)
Number of Los Angeles Con Number of program partici by Superior Court, and res Number of audited records systems (TCIS/ETRS) that	unty Homeless pants whose quolved within 30 in the Superio are accurate.	ualifying motior days of submi r Court's auton	ns are submitted to and filed ssion.	707 707 100% 15 81%	1,041 1,041 100% 15 (FY) 100%
Number of Los Angeles Con Number of program partici by Superior Court, and res Number of audited records	unty Homeless pants whose quolved within 30 in the Superio are accurate.	ualifying motior days of submi r Court's auton	ns are submitted to and filed ssion.	707 707 100% 15 81% 672	1,041 1,041 100% 15 (FY) 100% 995
Number of Los Angeles Con Number of program partici by Superior Court, and res Number of audited records systems (TCIS/ETRS) that	unty Homeless pants whose quolved within 30 in the Superio are accurate. e granted by S	ualifying motior days of submi r Court's autom uperior Court.	ns are submitted to and filed ssion.	707 707 100% 15 81%	1,041 1,041 100% 15 (FY) 100%
Number of Los Angeles Con Number of program partici by Superior Court, and res Number of audited records systems (TCIS/ETRS) that Number of motions that ar	unty Homeless pants whose queled within 30 in the Superio are accurate. e granted by Sueled by S	ualifying motior) days of submi r Court's auton uperior Court. perior Court.	ns are submitted to and filed ssion. nated case management	707 707 100% 15 81% 672	1,041 1,041 100% 15 (FY) 100% 995
Number of Los Angeles Coo Number of program partici by Superior Court, and res Number of audited records systems (TCIS/ETRS) that Number of motions that ar Number of motions that ar Number of individual cases Number of participants who	unty Homeless pants whose quolved within 30 in the Superio are accurate. e granted by Sue denied by Sue filed under the ose application	ualifying motion) days of submi r Court's autom uperior Court. perior Court. e Los Angeles Courts are submitted	ns are submitted to and filed ssion. nated case management county Homeless Court. If to the Los Angeles County	707 707 100% 15 81% 672 95%	1,041 1,041 100% 15 (FY) 100% 995 96%
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Number of Los Angeles Coo Number of program partici by Superior Court, and res Number of audited records systems (TCIS/ETRS) that Number of motions that ar Number of motions that ar Number of individual cases Number of participants who Homeless Court within 30- Number of participants that upon program completion. Number of participants who	unty Homeless pants whose quolved within 30 in the Superio are accurate. e granted by Sue denied by Sue filed under the ose application days of initial of thave Los Ango complete at I	ualifying motion of days of submit of Court's autom uperior Court. perior Court. e Los Angeles Cost are submitted ontact with particles County cit east 90 days of	ns are submitted to and filed ssion. nated case management county Homeless Court. I to the Los Angeles County rticipant.	707 707 100% 15 81% 672 95% 1,186 330	1,041 1,041 100% 15 (FY) 100% 995 96% - 1,586 484

<u>Successes:</u> We had tremendous success this quarter clearing out the backlog of old cases submitted to the District Attorney's and Public Defender's Office for which we were awaiting dismissals. Through implementation of a new procedure for handling requests for dismissals submitted to the District Attorney's Office as well as diligent efforts on the part of Public Counsel and Superior Court staff, we were able to identify outstanding cases and collaborate to ensure that the dismissals were processed and the necessary documentation was returned. Through these efforts, cases were successfully closed for clients whose applications were submitted as long ago as 2006.

<u>Challenges:</u> One significant challenge we recently identified is that some citations do not appear in the criminal record databases we use to identify cases for dismissal even though they still appear on the client's Department of Motor Vehicles (DMV) record. The result of this problem is that clients may have had outstanding citations on their DMV record that we did not know about and therefore did not submit for dismissal. These citations continue to be a barrier for clients when they go to the DMV office to try to get

Page 24 Attachment B

the suspension lifted on their driver's license. Since clients alerted us to this problem at the August Homeless Court session, we have started taking steps to address the challenge (see Action Plan below). A related challenge is that some clients have reported citations that were dismissed through Homeless Court still show up on their DMV record even after the dismissal has been entered into the Court's system. Again, this poses a barrier for clients when they go to the DMV to get their driver's license reinstated.

Action Plan: In order to address the first challenge described above, we have worked with the Los Angeles City Attorney's Office to obtain access to the DMV database that allows us to retrieve a client's DMV record. With the addition of the DMV records to the other criminal records we already use, we now have more complete documentation of the client's outstanding citations and warrants. We can include the citations listed on the client's DMV record with those identified using other databases to ensure that we request dismissal of all the client's outstanding citations. We brought the second challenge described above to the Court's attention and we are now collaborating with them to ensure that all dismissals are reflected in the DMV's records. In addition, data on transportation and housing vouchers will become available once those subcontracts have been finalized.

The Superior Court worked proactively with Public Counsel to resolve their backlog of motions by taking the following steps:

- 1. Revising Superior Court auditing protocols;
- 2. Developing clear communication with grant partners. Superior Court worked with Public Counsel, the Los Angeles City Attorney, and the Office of the District Attorney on the correct usage of the uniform legal pleading form; and
- 3. Review processes for identifying motions not processed within 30 days of submission. This issue was an acute challenge with respect to processing a backlog of motions for clients whose motions were submitted to other Court locations beginning in 2006. The processing time required for those motions was more than normally required, sometimes beyond 30 days.

The Superior Court has planned the following action items:

- 1. Revising work flow processes and assessing additional clerical training needs;
- 2. Work more closely with grant partners to achieve program goals; and
- 3. Adapting Court workflow process to accommodate the higher volume of work associated with the grant.

<u>Client Success Story:</u> After one year and nine months of treatment at a residential recovery program for men dealing with addiction to drugs and alcohol, Client X's case manager applied to Homeless Court on his behalf. Although Mr. X only had one outstanding citation on his record, this citation was a significant barrier for him in achieving his goal of becoming a licensed vocational nurse (LVN). When Mr. X had a job interview, he could not be hired because of his unresolved citation. Through the Homeless Court Program, Mr. X's citation was dismissed, and he is now living independently in his own apartment and enrolled in school, working towards his LVN degree.

Page 25 Attachment B

17) Moving Assistance for Single Adults in Emergency/Transitional Shelter or Similar Temporary Group Living Program

Goal: Assist individuals to move into permanent housing.

Budget: \$1.1 million

Table C.13: Moving Assistanc FY 2008-09, First Quarter	e for Singl	e Adults Progra	m Measures	
(unduplicated count)	Quarter	Cumulative		Quarter
Harrista de La Rodriga de Cala		247	F	2.4
Homeless Individuals	68	246	Female	34 44
Number applications received	68	246	Male	44
Moving assistance approved	35	98	Hispanic	7
Rental subsidy approved	35	98	African American	48
Percent applications approved	51%	40%	White	9
referrit applications approved	3176	40 /6		-
A	0	20	Native American	4
Average days to approve	9	20	14.04	
Average amount of grant	\$627	*\$575	16-24	1
			25-49	36
		,	50+	31
Number receiving rental subsidy after six months	35	n/a		
General Relief (w/FS)	28	n/a		
Food Stamps only	1	n/a		
SSI/SSDI	1	n/a		
Section 8	10	n/a		

^{*} FY 2007-08 average

<u>Successes:</u> Compared to the first half of the FY 2007-08, the last two quarters of the fiscal year resulted in an increase in referrals. The increase in referrals was a result of the information drive and presentations provided by DPSS staff at various shelters.

<u>Challenges:</u> One of the barriers to increasing referrals to the program is the criteria requiring individuals to be exiting emergency/transitional shelters.

Action Plan: Propose to remove the conditions that requestors must have in order to be eligible: 1) exiting emergency/transitional shelters; and 2) having the necessary time-limits (within the last 2 years) for those previously aided on General Relief/Food Stamps. During this reporting period, DPSS is looking at several options.

One recurring challenge is increasing the usage of this program. We are exploring implementing some changes that will enable more of the homeless population access this program. The changes currently being explored include:

- Expanding coverage to all homeless adults who are referred by agencies working with the homeless population.
- Removing the time requirement of having been aided on GR and/or FS within the last two years.
 Therefore, any individual previously aided on GR and/or FS would be able to apply for the program.
- Increasing the cap on appliance purchases to \$800. The total amount of move-in cost not to exceed the \$800 limit.
- Expanding the target population to include Cash Assistance Program for Immigrants (CAPI) participants.
- Another challenge was the time required to get the required information from vendors. In response, we are developing a list of vendors that have previously done business with us, and since we already have all of their information, approval is much quicker.

Page 26 Attachment B

18) Project 50

Goal: To move 50 of the most vulnerable, chronically homeless individuals off of Skid Row and into permanent housing.

Budget: \$3.6 million (Board Approved Funding)

Table C.14: Project 50 Particip FY 2008-09, First Quarter	ants and Se	rvices			
(unduplicated count)	Quarter	To Date		Quarter	To Date
Chronic Homeless Individuals	14	54	Education	1	1
Female	2	8	Job training/referrals Job placement	-	2 1
Male	12	45	See presenting		
Transgender	-	1	General Relief (GR,FS)	8	12
			General Relief only	-	3
I the sector	0	0	Food Stamps	-	1
Hispanic African American	3 9	9 40	Medi-Cal/Medicare Section 8	3	6 1
White	2	40	Shelter Plus Care	- 9	43
Asian/Pacific Islander	_	-	SSI/SSDI	2	5
Native American	_	-	Veterans	_	1
Other	-	1	Veterans		•
			Case management	9	43
25-49	5	20	Health care/medical	9	43
50+	9	34	Mental health/counseling	8	35
			Social/community activity	_	30
			Substance abuse (outpatient)	7	37
Housing (emergency)	13	23	Substance abuse (residential)	2	3
Housing (permanent)	9	44	Transportation	5	35
Rental Subsidy	-	33	Detox	1	6
			Legal Services		11
Longer-term outcomes (6 mor	iths)				
Continuing to live in housing				38	
Receiving rental subsidy				38	
Enrolled in educational program				1	
0				0.0	
Case management				38	
Health care				38	
				30	
Mental health/counseling				36	
Collector of the state of the				27	
Substance abuse treatment (our				27	
Substance abuse treatment (res	sidential)			1	
Reunited with family				3	

Transitional Housing/Case Management	Quarter
Average stay in transitional housing:	5 days
Number into permanent housing:	9 participants
Level 3 case management services	
<u> </u>	
Average for each participant per month:	5 hours
Total hours for all participants:	85 hours
Number of cases per case manager:	19 cases

Page 27 Attachment B

Program Specific Measures	Quarter	Cumulative
Number of participants who exited housing	-	1
Number of participants developing individualized treatment plans	6	42
Number of participants participating in a housing retention group	-	30
Number of Project 50 participants having arrests	2	6
Number of Project 50 participants having hospitalizations	2	9
Number of Project 50 participants having an emergency room (ER) visit	3	3
Number of Project 50 participants with increased income (i.e., due to SSI/SSDI, GR)	13	13

<u>Successes:</u> Participants are adjusting to interacting with staff and most look forward to staff visits as well as their appointments. The project's list of partner agencies expanded to include: City Attorney, the courts, and judges. The majority of individuals maintaining sobriety has increased to 14 with three reducing their use and six who have entered detox or residential treatment willingly. As of September 2008, 44 participants were in permanent housing.

<u>Challenges:</u> Due to the loss of an outreach team, the program still needs to locate approximately 10 more individuals to reach the goal of housing 50 individuals. The program loses participants to the legal system, by not having a coordinated system to communicate with the court, public defenders, city attorneys and District Attorneys. Preventing arrests is challenging. Moreover, greater understanding about harm reduction is needed for the stabilization and recovery of the homeless individuals as the best and most feasible method of dealing with homelessness.

Action Plan: The program's plans are to: 1) assign 2-3 outreach and engagement staff from DMH to assist in locating the unfound to complete the 50; 2) work diligently with staff to develop policies and procedures for the project; 3) document the challenges and recommendations for future projects; and 4) clarify the role of harm reduction in the stabilization and recovery of the homeless who are mentally ill and using substances.

<u>Client Success Stories:</u> Participant 1 was constantly under the influence of narcotics so that we couldn't even get her to an interview with property managers and the Housing Authority of the City of Los Angeles (HACLA). At our encouragement, she entered detox and then was housed. But within a few days, she started using again. She became a danger to herself, entered a 51-50 (forced hospitalization), returned to the program, but started using again. Then, she entered jail. We worked with the court system, and encouraged her to enter residential drug treatment. With the judge's support, she entered treatment and continues there drug free. At this time she is making plans for her life, and she appears happy and stable. In addition, she continues with P50 providers, including the psychiatrist who regulates her medication and provides therapy.

Participant 2 is a 42 year-old who worked in construction and resided in Anaheim California. After receiving an injury and amputation of her right toes, the patient became homeless. Then, the patient had no income and survived from recycling bottles and cans while living in the streets for seven years. According to Participant 2, she had no history of incarceration, a long history of methamphetamine abuse, and suffered from mental health issues. After being referred from Harbor UCLA Medical Center, Participant 2 entered the JWCH Recuperative Care program for the first time last May. Participant 2 entered had undergone recent surgery after being attacked by a dog. She then received an infection, had to have her lower left lower leg amputated last April. As she entered the Recuperative Care program, she received proper wound care, diabetes management, pharmacy and appointment scheduling and many other services. Upon intake, the patient accepted the continuation of mental health services, case management, transportation, and other services.

Participant 2 was discharged and re-admitted to the JWCH Recuperative Care program. Last July, the patient had received an infection and was now returning to recuperative care for continued wound care.

Page 28 Attachment B

The patient was happy to have the chance to return to Bell Recuperative Care, "Oh, I am so glad to be back with you guys. I am happy to be back in this program" she said upon arrival as she entered the patient Recreation Room. During her stay, the patient worked on completing a few more goals. Participant 2 was compliant throughout her stay. She had SSI pending, GR income, identification, Disabled Bus ID card, and continued mental health services. In August, the participant left the facility to permanent placement in an apartment. The patient also had job training scheduled in September 2008. Participant 2 is now preparing to be a mental health case worker. She plans to reach out to homeless individuals willing to accept mental health services.

Page 29 Attachment B

19) Santa Monica Homeless Community Court

Goal: Assist homeless individuals with clearing outstanding citations, warrants, and misdemeanor offenses upon successful completion of mental health, substance abuse and case management.

Budget: \$540,000

(unduplicated count)	Quarter	*Cumulative		Quarter	*Cumulative
Chronic Homeless Individuals	72	125	15 and below	-	5
			25-49	38	53
Female	19	34	50+	34	67
Male	53	91	Housing (emer/trans)	10	54
			Housing (permanent)	4	14
Hispanic	6	14	Rental subsidy	4	6
African American	10	25			
White	52	71	Alternative court	72	125
Asian/Pacific Islander	2	2	Case management (Ivl. 3)	72	119
Native American	0	-	Mental health	6	54
Other	2	13	Substance abuse (outpatient)	-	5
			Substance abuse (residential)	3	30
Program Specific Measures				Quarter	*Cumulative
Total number of clients who ha	ave enrolled	in Program		11	125
Number of participants who ap	•		3	,	(0 (550))
management for at least three	e months afte	er their first app	bearance at Court	n/a	69 (55%)
Number who participate that h	nave citations	s or warrants di	smissed upon completion	n/a	73 (56%)
Number who receive an emerg	gency shelter	bed and remai	in for two weeks or longer	n/a	13 (24%)
Number who enter residential treatment complete a substance abuse program of 90 days or longer		n/a	12 (40%)		
days or longer					
Number of arrests for all Courtherapeutic, transitional or per	rmanent bed	(or some comb	pination of bed-types) for 90-	n/a	89% reduction
Number of arrests for all Courtherapeutic, transitional or per days or longer as compared to Number of permanently hous	rmanent bed the 90 days ed who cont	(or some comb prior to enterion inue to be hou	pination of bed-types) for 90-	n/a n/a	

^{*}Cumulative data is from 2/07 to 8/08

Successes: The most successful ongoing collaboration which the Homeless Community Court program is engaged in is the relationship with Edelman Mental Health Center. Every Thursday morning, the Edelman psychiatrist and Social Worker provide in-office services at the St. Joseph Center Homeless Services Center and occasional outreach to Homeless Community Court clients. The primary benefit of this Edelman collaboration is giving clients easy access to psychiatric care, with medications administered at two area pharmacies. Given the limited mobility, organization and/or motivation of many Court clients, this is often a superior service option to conventional mental health clinics. Integrating these psychiatric services into the pre-existing relationship which clients have with their program Case Manager and Mental Health Specialist also provides context which can help overcome service barriers stemming directly from mental health symptoms. A secondary but lasting benefit of the Edelman collaboration is streamlining the eventual transfer of client services from in-office services at the Homeless Services Center to long-term mental health care at Edelman or other DMH facilities. Building on the success of our Chronic Homeless Program (CHP) we have managed to link many of our CHP participants to the court which has resulted in the removal of barriers and has allowed for the successful transition by clients to the

Page 30 Attachment B

next phase of their lives. Continued collaboration between our service providers, police and fire has allowed us to continue engaging clients in the field and seizing opportunities to refer them to the program when we think they will be receptive to services. Again, given the voluntary nature of the program, this is often a fine line since clients may change their mind. Our talented Public Defender is greatly appreciated not only by the Resource Coordinator but also by our service providers. She creatively strikes a balance between advocating for her clients and using her motivational interviewing techniques to help clients understand the benefits of connecting to services.

The Santa Monica Homeless Community Court program was extended for an additional six months, through June 30, 2009, via multiple agreements.¹

<u>Challenges:</u> The voluntary nature of the program allows many of our most chronic, high utilizers of police, fire and social services the opportunity to opt out of the program. These are the very people we had wished to engage in services using the authority of the court. Experience has shown us that many of our most chronic homeless do not want to access services and the voluntary nature of the program does not allow us to use the authority of the Court to connect individuals to much needed resources including mental health, psychiatric, medical, substance abuse and monetary assistance programs – all of which can be barriers to stabilizing clients, housing them and helping them maintain their housing. The court will only accept participants cited with quality of life crimes – misdemeanors and infractions. The court will not accept felons or sex offenders. The very nature of the crimes, misdemeanors and infractions, prevent the court from following participant for extended periods of time and result in citations being dismissed with limited client progress.

Greater oversight by the court could have a very positive influence on participants and result in better outcomes. Currently, participants average 2-3 court visits before their citations and warrants are dismissed. This impacts both our substance abuse treatment and housing placements. Indeed, because of Case Management initiated by the Court, some individuals may achieve outcomes months after their exit from the program.

Action Plan: The clients on this contract are chronically homeless with severe and persistent mental illness and/or co-occurring disorders. This is a barrier and often impacts their ability to access emergency shelter. Therefore whenever possible, the goal is to take a housing first approach and move clients directly from the streets and into permanent housing. The amount of time it takes to complete the housing process from time of application to leasing up is often more than six months due to the lack of one-bedroom units willing to accept Section 8. Our services providers continue their efforts to connect Court participants to permanent housing whenever possible. The Human Services Division, Santa Monica Housing Authority and service providers meet regularly to discuss strategies for engaging local area landlords in an effort to increase housing options for participants. Also, as stated under Program Challenges, currently, participants average 2-3 court visits before their citations and warrants are dismissed. This impacts our housing placement outcomes because the Court does not follow clients for significant periods of time therefore they may achieve outcomes months after their exit from the program.

<u>Client Success Story:</u> In 2005, Client B struggled to overcome 40 years of alcohol abuse. She sought help at OPCC's Daybreak Day Center program, when she was using alcohol to suppress disturbing memories and cope with living on the streets. Over time, Daybreak staff supported the client as she worked to overcome her addiction to alcohol. During her 13 years of homelessness in Santa Monica, she had accumulated a number of "quality of life citations". With the help of Daybreak staff, she enrolled in

¹ The extra six months is at a cost of \$200,000, and funded as follows: \$29,703 from the County's 3rd District's portion of the Community Development Commission's ("CDC") Community Development Block Grant ("CDBG") funds; \$93,061 from the County's 3rd District's portion of the Homeless Services/Centers fund; \$31,000 in unspent one-time only Homeless and Housing Program Fund (HHPF) originally allocated for the Homeless Court program; \$23,118 from the HHPF's Administration fund to provide resources to any other HHPF program that has additional funding needs to ensure success as approved by your Board in September 2006; and, \$23,118 from the HHPF's Administration fund to provide funds for administrative services related to continuation of the program.

Page 31 Attachment B

the Santa Monica Homeless Community Court, a collaboration between the City of Santa Monica, Los Angeles County Superior Court, the Public Defender's Office and met all of her court-mandated goals, which lead to the dismissal of her citations. Her work with the Homeless Community Court and clean legal record created new options. While in recovery, she had reconnected with her family after an almost 30 year estrangement and rebuilt a relationship. Ultimately, she decided it would be in her best interest to live with her family. At this point, Client B turned to Project Homecoming, the City's travel assistance program. Project Homecoming helped her to travel to another state, reunite with her family, and ultimately end her homelessness. Upon her return, Client B's family warmly welcomed her. Reconnecting with her family has helped the client develop a greater sense of connection to her life and those around her.

Page 32 Attachment B

V. PROGRAMS FOR MULTIPLE POPULATIONS

20) Los Angeles County Housing Resource Center, (formerly known as the Housing Database)

Goal: Provide information on housing listings to public users, housing locators, and caseworkers. **Budget:** \$382,000 (\$202,000 allocation from HPI funding and \$180,000 from CDC).

Table D: LACHRC Program Measures	Quarter	Year 1 6/1/07- 6/30/08
Number of landlords registered on the site	3,999 494 new	3,505
Average monthly number of units available for rental	1,656	1,324
Total housing unit/apartment complex listings registered on site (includes units that have been leased)	6,075 904 new	5,171
Total number of housing searches conducted by users who returned listing results	495,329 (2,086,154 cumulative)	1,590,825
Average number of calls made/received to the Socialserve.com toll-free call center per month	5,331	4,578
Number of collaborative efforts forged between 211 LA County, County Departments, Red Cross, Federal Emergency Management Agency, HUD	8	33

<u>Successes:</u> Socialserve.com has been able to make improvements to the Housing Resource Center webpage that have improved our Housing Authority's point score in the Section Eight Management Assessment Program (SEMAP) evaluation system administered by the federal Department of Housing and Urban Development (HUD).

<u>Challenges:</u> Socialserve.com's statistics continue to show that the ration of LAC-HRC web page searches to available units is over 80% higher than other metropolitan areas. This demonstrates the need (and challenge) of outreaching to more L.A. County landlords to get more rental listings on the web page to serve this extraordinary demand.

<u>Action Plan:</u> The County Board will be asked to approve the renewal of the existing contract with Socialserve.com to administer the LAC-HRC webpage. A plan to use CEO-IT Fund monies to fund the expansion of the webpage into Phase II will be presented to the County Board in the near future.

<u>Client Success Story:</u> In August, a County resident contacted the Socialserve.com call center to express thanks for the service and "compassion" she received from a call center representative, who successfully helped locate housing for her and her blind father.

Page 33 Attachment B

21) Pre-Development Revolving Loan Fund (RLF)

Goal: Affordable housing developers will receive loans directly from the Los Angeles Housing Innovation Fund, LLC (LAHIIF) to build much needed affordable housing in Los Angeles County.

Budget: \$20 million

- Entered into Loan Agreement on June 20, 2008.
- \$10,030,000 wired from CDC to LACHIF on Friday, June 26, 2008.
- Selected lenders will be tasked with marketing program.
- CDC staff has provided presentation to CDBG participating cities on LACHIF.
- Selected lenders currently report to have seven potential projects to be funded with the LACHIF.

Successes:

Four loans totaling \$16,170,000 will be presented to CDC to begin CEQA clearance in October 2008.

Challenges:

Program marketing has been challenging due to the need to educate borrowers wishing to use the LACHIF for projects in the City of Los Angeles.

Action Plan:

CDC is working on a Memorandum of Understanding (MOU) with the City of Los Angeles. The MOU will delineate handling of projects in the City of Los Angeles by both funds. Any available data will be provided in the next quarterly report.

Page 34 Attachment B

VI. City and Community Program (CCP)

Capital Projects

<u>Successes</u>: CDC is working with developers of the nine capital projects to finalize development timelines and construction start dates. In addition, CDC is finalizing a grant template and deed of trust for each of these projects. The CDC is in constant contact with all of the capital developers regarding the projects and has set up an internal tracking system to monitor progress. Currently, all projects (except Bell Shelter) are in the pre-development phase and are scheduled to start construction before or near spring 2009. The Bell Shelter project is for an acquisition. Draft grant agreements and deed of trusts have been completed and are in final review by County Counsel. The timeline for execution is being determined based on the need of each grantee. It is customary for grants to be executed near the start of construction.

<u>Challenges:</u> In general, coordination with other local, state, and/or federal funding and construction industry changes can cause delays. One project has not submitted an updated budget and timeline. They state that they are waiting on quotes from their contractors. Additionally, they had to update their bids because of the volatile building industry. The project also states that they are in the process of hiring a new project manager.

Action Plan: The CDC is determining with each developer, whether or not to enter into the grant agreements soon or if it is best to wait until near the beginning of construction to avoid the necessity of several amendments. The CDC staff is providing technical assistance and will be conducting site visits to projects that are seeking funding for rehab of existing buildings, *Cumulative Expenditures to Date*: \$358,496 (Administrative)

Service Projects

<u>Successes:</u> Six contracts have been executed; seven contracts are expected to be executed by the end of November, and five contracts will be implemented with capital projects. The CDC completed Accounting System Reviews (ASR) of all agencies that were awarded service contracts and conveyed any required financial improvements to these agencies. All agencies have responded to our corrective actions and have implemented or are in the process of implementing the necessary improvements. The CDC coordinated a mandatory, comprehensive programmatic and financial training on program requirements, contract execution process, and online submission of payment requests. To facilitate the management of all contract-related functions, during this quarter, the CDC completed the development of a web-based online system, including electronic processing of contracts and submittal of payment requests. Most agencies have successfully established their digital signatures for contract execution and completed the online authorization set-up of the various contract functions such as the electronic submittal and approval of payment requests. The system provides direct access to CEO's Performance Counts link.

<u>Challenges:</u> Several issues delayed execution of the service contracts. A number of budgets were incomplete, lacked sufficient information or were inconsistent with the original RFP project descriptions and budgets. CDC also found that allocated expenditures were inconsistent with the agency's cost allocation methodologies. One agency lacked the financial staff to develop a cost allocation plan and budget. As a result, we have spent considerable time providing technical assistance in the budget and cost allocation areas. Two of the projects requested site changes which required us to conduct further follow-up to ensure that the original project scope and delivery of services were not impacted. The County's new subcontractor insurance prerequisites, which requires the CDC to obtain insurance certificates from all subcontractors prior to service delivery, has also delayed some agencies from executing professional service agreements and implementation of their programs. While CDC anticipates contract execution by the end of November for the remaining service contracts that are ready to be implemented, the actual date of contract execution will depend on how responsive the agencies are in providing information that the CDC has requested relative to budget review, insurance, and any pending agency system issues that need to be resolved.

Page 35 Attachment B

Action Plan: CDC has addressed the above issues and has dedicated additional resources to enable all agencies to execute contracts and implement their programs as soon as possible. We will continue to provide training and technical assistance in all needed program and financial areas. CDC's Risk Manager is working with these agencies to provide them with the necessary guidance to meet the insurance requirements.

FY 2008-09, July 1, 2008 - September 30, 2008

Cumulative Expenditures to Date: \$113,562 (Administrative)

Performance Measures: Two CCP programs provided data for this quarter.

Table IIA:

(unduplicated count)

Homeless Individuals

A Community of Friends (ACOF) Successes: The HPI funding has led to collaboration with Housing Works Mobile Integrated Service Team (MIST), provided for case management services, supportive services additional through Resident Management support, and provided for some needed repairs much and While maintenance. the maintenance is still in process, the other elements are in place. The MIST team and case management staff have played an integral role in preventing evictions for those residents in jeopardy of losing housing, and case management staff has been able to ensure that the majority of residents remain permanently housed in a safe and healthy environment.

<u>Challenges:</u> Perhaps the biggest challenge was the slow execution of

Chronic Homeless 73 23 50 Homeless Families 97 97 Female 284 235 49 Male 284 165 119 Transgender 1 1 Hispanic 150 125 25 African American 216 168 48 White 126 53 73 Asian/Pacific Islander 6 4 2 Native American 2 2 Other 2 20 18 15 and below 114 114 4 16-24 40 40 25-49 173 173 88

74

Total

225

ACOF

107

74

OPCC

118

76

the contract. Additionally challenging is combining the reporting of services at so many different sites into one report. Challenges faced by the residents include struggles with substance abuse, budgeting funds, managing medication, and increasing life skills to a point which increases self sufficiency.

50+

Action Plan: Case management staff will continue to work with the MIST team to focus on those individuals most at risk of losing their housing. In addition, case management staff will work with Resident Managers on "best practices" to increase support when case management staff are unavailable on nights and weekends.

<u>Client Success Story:</u> One of the residents is a father of three who is diagnosed with bi-polar disorder. This resident has been dependent upon SSDI due to being unable to obtain gainful employment because of mental health issues. With the assistance of the MIST team and the case manager, the resident was able to complete the training program to become a Peer Advocate. The resident has now obtained full time employment with a Mental Health agency. This resident is now medically stable, financially stable, and is able to successfully provide a stable environment for his family in supportive housing.

Case management (levels II/III)	ACOF	OPCC	
Average hours per case:	5 hours;	3 hours	
Total number of hours:	3,405 hours	5 hours	
Caseload:	19.5 cases	2 cases	

Page 36 Attachment B

Table IIB: Total Services Provided by ACOF and OPCC			
FY 2008-09, July-September 2008 (unduplicated count)	Total		
Moving Assistance	14		
Eviction Prevention	18		
Rental Subsidy	192		
Housing (permanent)	227		
Education	24		
Job training, referrals	18		
Job placement	21		
CalWORKs	37		
General Relief w/Food Stamps	9		
General Relief only	1		
Shelter Plus Care	157		
SSI/SSDI	220		
Alternative court	1		
Case management	229		
Life skills	227		
Mental health	96		
Health care	118		
Social/community activity	227		
Substance abuse treatment (outpt.)	11		
Substance abuse (residential)	2		
Transportation	125		
Residential management support	227		

Ocean Park Community Center (OPCC) HEARTH Successes: OPCC convened regular meetings with all project collaborators including Venice Family Clinic Medical Director. (VFC) Operations Director, Physician, Manager, OPCC Samoshel and Access Center directors, managers and project staff to develop policies, procedures and protocol for intake, referral, and planning for the respite bed component. OPCC completed and fully equipped the two room medical suite at the Access Center for VFC to occupy three days a week with plans to extend to five days a week. Physician and Clinic coordinator commenced the project by offering primary care medical services to 118 individuals on-site at OPCC's Access Center. smooth communication/collaboration process between OPCC and VFC was established. OPCC and VFC hired and trained all program staff during this first quarter of the project.

<u>Challenges:</u> OPCC has been delayed in starting the respite bed component until November 17th

due to unforeseen facility maintenance issues. OPCC is developing a computerized data tracking system for this grant which will be completed next quarter.

Action Plan: By next quarter, OPCC and VFC will finalize program protocol, including referral and tracking forms for case management, respite beds and health care. We plan for a soft launch of the 10 respite bed program to begin November 17th with referrals coming only from VFC. In October, November and December outreach, training and orientation will be conducted at St Johns Hospital with the Emergency Room staff in preparation for a January start date of the respite bed program component with referrals expanded to the hospital.

<u>Client Success Story:</u> A man who had been homeless in Santa Monica for three months came in for health care services, and he was referred to case management by the VFC. Following a divorce, he relocated to Santa Monica with no option but to live on the streets. OPCC staff presented him with different options, and he decided that he would like to reunite with his brother in Fresno. OPCC reunited him with his brother and made arrangements for him to secure transportation home through the City of Santa Monica's Project Homecoming. Currently, he is happy and working on rebuilding his life. This story demonstrates a successful collaborative intervention to provide 'rapid re-housing' for a newly homeless person that only initially requested health care.

	ACOF	OPCC HEARTH
Number of organizations/agencies that your program has a formal collaboration for this project.	1	4
Number of times collaborative partners met each month.	2	4
Total amount(\$) of HPI funding leveraged for project.	\$1,775,550.00	n/a
Percent of HPI funding leveraged for project.	33%	n/a

Page 37 Attachment B

	ACOF	OPCC HEARTH
Number of participants who have enrolled (entered) into program during the reporting period.	227	118
Number of participants who left the program during this period.	-	1
Total number currently enrolled in program.	227	117
Number of clients who received an assessment (if applicable).	15	2
Cost per participant.	\$2,643	n/a
If transitional/emergency or permanent housing program, indicate the number of beds/units that were vacant at the <i>beginning</i> of the quarter.	-	n/a
If transitional/emergency or permanent housing program, indicate the number of beds/units that were vacant at the <i>end</i> of the quarter.	-	n/a
Program Specific Question: Number of participants who received benefits (as a result of the program).	227	118

Page 38 Attachment B

VII. Council of Governments (COGs)

San Gabriel Valley Council of Governments (SCVCG)

During the past quarter, SCVCG has engaged their consultant, Corporation for Supportive Housing (CSH), in a two-phased approach to achieve the following objectives: 1) population identification and needs assessment and 2) a consensus-building process for a proposed strategy and implementation plan to meet these stated needs.

During the first guarter of FY 2008-09, SCVCG has been working with CSH to:

- Complete the Draft Phase I Report;
- Present findings to various stakeholder groups including: COG Homeless Steering Committee, COG Housing Committee, COG Planner's Technical Advisory Committee (TAC), Key Service Providers, and COG City Managers TAC; and
- Revise the Phase I Report to incorporate stakeholder feedback.

An inventory of services was conducted, and the following was reported:

- Fourteen cities in the SGV reported a total of \$1,348,986 in local investments to provide homeless services and housing during the current fiscal year.
- The region has a total of 11 outreach teams and five access centers.
- Homeless population estimates were provided. A total of 10,911 homeless persons live in the region (based on LAHSA and City of Pasadena, 2007). A local estimated count of homeless persons is 5,034 (median 7,977).
- Six preliminary study areas/clusters of the region were provided with a breakdown by gender, race, and sub-population. Regional maps were used to illustrate findings.
- The location of housing by type as well specialized supportive services were shown on regional maps. Additionally, the ratio of short-term beds to homeless single individuals/family members/chronically homeless individuals in need of permanent housing was also shown by region.
- A service gap analysis showed the need for increased coordination and information sharing, shortterm housing, permanent supportive housing, and increased/specialized mental health services.
- Recommendations for short-term strategies/long-term strategies will be addressed in Phase II of the study. Phase II will also include work with San Gabriel Valley leadership to: 1) develop consensus on these findings; 2) determine housing and service delivery models; and 3) identify federal, state and local resources for implementation of strategies.

PATH Partners/Gateways to Housing Initiative

During the first quarter of FY 2008-09, the following are highlights of specific tasks:

Task 1: Assess/Analyze Existing Services

- Confirmed 25 of the 27 cities to participate in the Gateways to Housing Initiative. Secured City Manager designees for each of the 25 cities.
- Obtained homeless count data from LAHSA and the City of Long Beach. A preliminary analysis of the homeless count data was provided. Completed preliminary inventory and analysis of existing services and housing (emergency, transitional and permanent supportive housing) available to homeless persons.

Task 2: Identifying Underserved Regions and Populations

- Conducted 15 interviews with community stakeholders in over eight Gateway cities, including representatives from law enforcement, homeless services, faith groups, education, city departments and senior housing. Through the interviews, groups are being asked about existing services, gaps in services, and challenges & opportunities for addressing homelessness on a local and regional level.
- Conducted one focus group with homeless individuals from the City of Long Beach, hosted by their Multi Service Center. Participants were both male and female, and had been homeless and were from Long Beach. Participants were asked a series of questions about where they have identified services, challenges to accessing services and areas of unmet need. Findings from the focus group

Page 39 Attachment B

- are currently being analyzed and will be incorporated into the strategy along with findings from the stakeholder interviews.
- The "Community Survey on Homelessness" tool has been finalized. Dr. Christie Jocoy, Assistant Professor at California State University, Long Beach, provided support and expertise in finalizing the survey design. Additionally, she and her students will assist in analyzing the survey results. The survey is available in English and Spanish, and is available online and in print format. The survey was distributed to City Manager designees on October 20, 2008. The designees are assisting PATH Partners in forwarding the survey to a minimum of 10 respondents per city. Respondents will represent one of the following groups: business, City Housing office, other City office, faith group, healthcare provider, resident or service provider. The survey will be distributed to 300 respondents and the anticipated deadline for survey collection is Friday, November 7, 2008. California State University,

Task 3: Funding Plan

 The Funding survey was distributed to 25 cities to request information on city funds designated towards homeless services and housing. Twenty-two cities have completed and returned the funding survey. A preliminary assessment of the funding resources received by GCCOG cities was produced.

Task 4: Work with Local Governments (Gateway Cities and Los Angeles County)

• PATH Partners and GCCOG have proposed the division of the Gateway cities into four separate groups. The formation of these four groups will enable the collection of data/community feedback and will begin future planning for smaller, more localized, multi-city responses to homelessness.

Task 5: Develop "Gateways to Housing Strategy"

- As data and community feedback are obtained from the previous task areas, the team will move forward in compiling the draft Gateways to Housing Strategy.
- On Wednesday, November 12, PATH Partners facilitated four planning meetings that bring together
 cities and a diverse group of stakeholders groups, including law enforcement, faith groups,
 businesses, residents, providers and other community groups. The purpose of the meeting was to
 bring local stakeholders together to identify the needs and challenges of serving the homeless, and to
 provide leadership in planning for local approaches and solutions to address homelessness.

An inventory of regional services was conducted, and the following was reported:

- The Gateway Cities Council of Governments (GCCOG) region includes 27 cities.
- It is estimated that 14,000 homeless live in the region (based on LAHSA and City of Long Beach, 2007).
- Approximately 2,000 emergency and transitional beds and 750 permanent supportive housing units are currently located in the region.
- The numbers of programs that offer specific support services were: 7 street outreach/emergency response programs; 8 multi-service centers; 20 medical detoxification programs; and 10 community education programs.
- Percentages of emergency, transitional, and permanent supportive housing beds were shown by population.

Population	Emergency Housing Beds	Transitional Housing Beds	Permanent Supportive Housing
Single Adults	61%	53%	93%
Families	36%	36%	4%
Youth (ages 18-24)	3%	11%	3%