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May 6, 2015

Los Angeles County  
Board of Supervisors

Hilda L. Solis  
First District


Mark Ridley-Thomas  
Second District

Sheila Kuehl  
Third District

Don Knabe  
Fourth District

Michael D. Antonovich  
Fifth District

TO: Mayor Michael D. Antonovich  
Supervisor Hilda L. Solis  
Supervisor Mark Ridley-Thomas  
Supervisor Sheila Kuehl  
Supervisor Don Knabe

FROM: Mitchell H. Katz, M.D.  
Director 

**SUBJECT: HOUSING FOR HEALTH (HFH) QUARTERLY REPORT**

Mitchell H. Katz, M.D.  
Director

Hal F. Yee, Jr., M.D., Ph.D.  
Chief Medical Officer

On January 14, 2014, the Board instructed the Director of the Department of Health Services (DHS) to submit quarterly reports to the Board on Housing for Health permanent supportive housing outcomes including funds, costs, number and composition of clients housed; integrated health, mental health, substance disorder and benefits establishment results; utilization rate and duration of housing subsidies; number of clients transitioning off of housing subsidies; and characteristics of housing units secured.

313 N. Figueroa Street, Suite 912  
Los Angeles, CA 90012

Tel: (213) 240-8101  
Fax: (213) 481-0503

**BACKGROUND**

In November 2012, DHS established the HFH division to expand access to supportive housing for DHS patients who are homeless and who have complex medical and behavioral health conditions and/or are high utilizers of DHS services.

[www.dhs.lacounty.gov](http://www.dhs.lacounty.gov)

HFH utilizes a full range of community-based housing options, including non-profit owned supportive housing, affordable housing, and private market housing. Tenants receive federal rental subsidies such as Section 8 Project Based or Tenant Based Vouchers or a local rental subsidy through the Flexible Housing Subsidy Pool (FHSP). All individuals who are housed through HFH programs are assigned to a homeless services provider to receive Intensive Case Management Services (ICMS). These services include outreach and engagement; case management with on-going monitoring and follow-up; linkage to health, mental health, and substance use disorder services; assistance with benefits establishment; assistance with life skills, job skills, and educational and volunteer opportunities; crisis intervention, etc. ICMS providers provide "whatever it takes" wraparound services to assist clients in regaining stability and improved health.

*To ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.*

[www.dhs.lacounty.gov](http://www.dhs.lacounty.gov)



Mayor Michael D. Antonovich, et al.  
May 6, 2015  
Page 2

**QUARTERLY REPORT**

Please find attached the quarterly report in dashboard format. If you have any questions, please contact me or Mark Ghaly, M.D., Deputy Director of Community Health, at (213) 240-7702.

MHK:mg

cc: Chief Executive Office  
County Counsel  
Executive Office, Board of Supervisors

Attachment

HOUSING  
FOR  
HEALTH

# Quarterly Report

January-March 2015

# Number of Clients Housed

- Housing for Health (HFH) clients are DHS patients who are homeless and who have complex medical and behavioral health conditions and/or are high utilizers of DHS services.

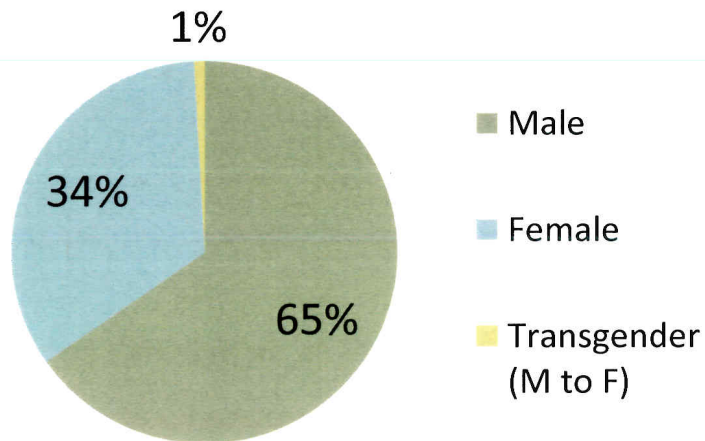


## HFH Housing Outcomes

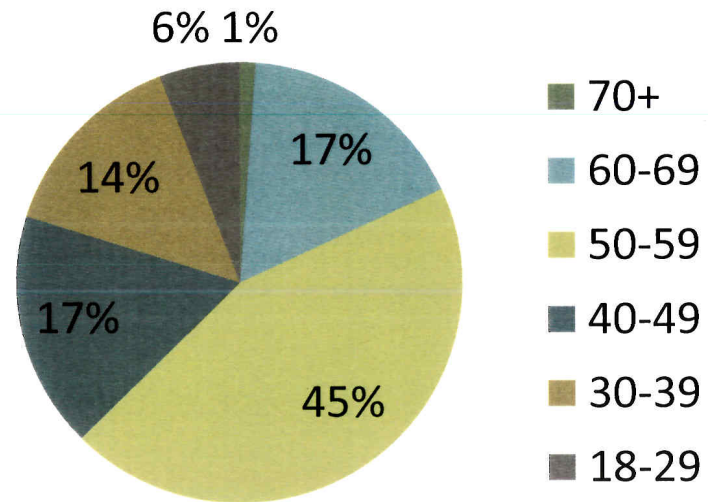
Total # of patients who have attained housing since HFH began in November 2012	694
Total # of patients who are currently housed	650
Total # of patients housed January-March 2015	125

# Demographics of Clients Housed

## Gender of Clients Housed (N=663)



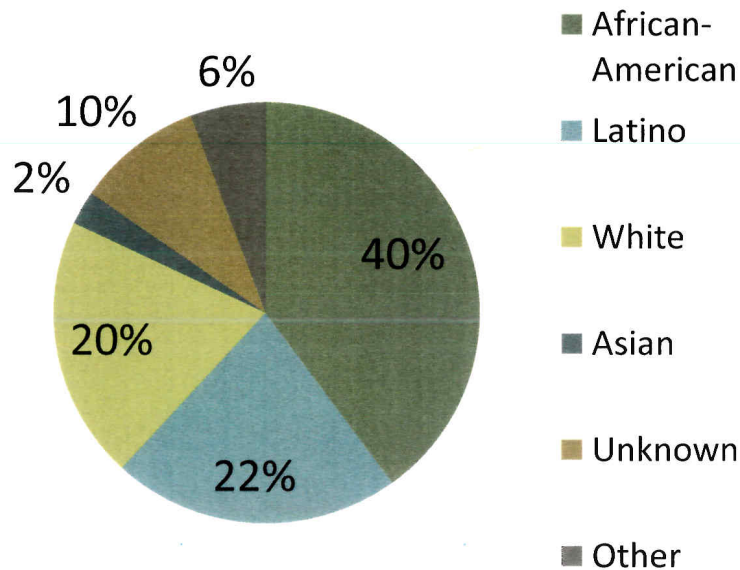
## Age of Clients Housed (N=686)



\*Patient data does not add to 694 due to clients who decline to state demographic information

# Demographics of Clients Housed (Cont.)

**Race/Ethnicity of Clients Housed (N=694)**



The most common diagnoses of HFH clients:

- Hypertension
- Diabetes
- Congestive heart failure and heart disease
- Asthma
- Cancer
- HIV/AIDS
- Hepatitis C
- Lung disease
- Depression
- Bipolar disorder
- Post-traumatic stress disorder

# Housing Status and Retention

## Homeless Status

- The average length of time that patients experienced homelessness was 3 years and 11 months and the median length of time was 2 years.
- The majority of HFH clients were chronically homeless (83%), which means they were homeless for more than one year or experienced four or more episodes of homelessness in the last three years.

## Housing retention rate

- 93% of tenants retained housing (remained in unit or exited to other permanent housing) after 12 months.

## Exits from housing this quarter

- Eight patients exited housing this quarter. Two moved in with family or friends, three were evicted, two voluntarily surrendered their units, and one patient passed away.



# Flexible Housing Subsidy Pool Update

FHSP Quarterly and Program-to-date Accomplishments:	
Move-ins January – March 2015	90
Total move-ins to date	272
Units secured* January – March 2015	85
Total units secured* to date	396

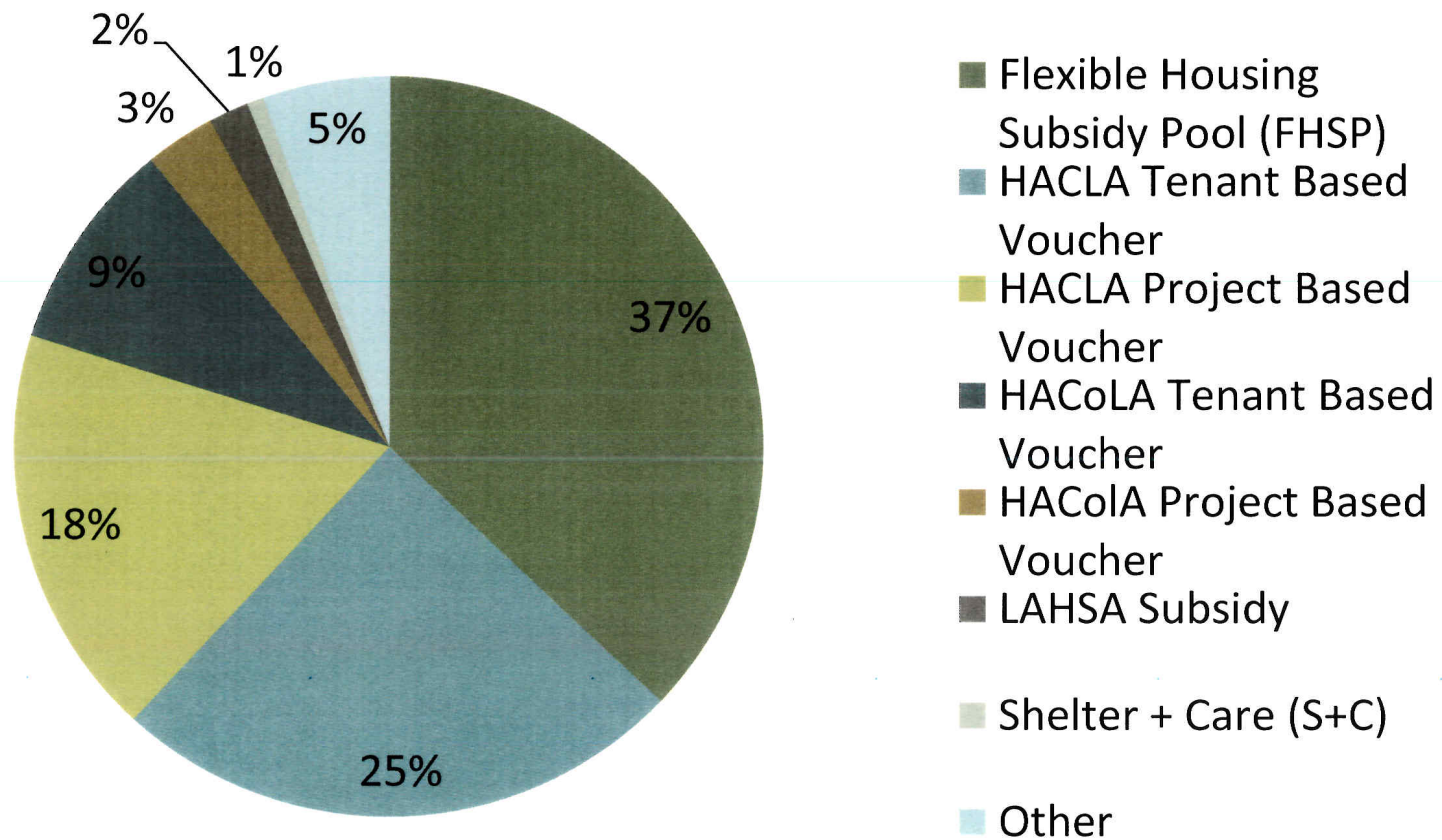
\*Refers to the number of units that have been secured under a rental subsidy agreement with the property owner and includes occupied and soon to be occupied units.

# Characteristics of Housing Units

- Units in the HFH portfolio range in size and type across the County from large apartment buildings to smaller single family homes and are appropriate to household size and composition.
- In the most recent quarter, Brilliant Corners secured an additional 85 units in Los Angeles County for the Flexible Housing Subsidy Pool. Of the 85 units, 27 are studios, 52 are one-bedrooms, 5 are two-bedrooms, and 1 is a shared housing unit.
- Brilliant Corners engages with private landlords, local developers, and local property management agencies, in an effort to provide a diverse pool of units to the program. From a wheelchair accessible studio unit located on the ground floor of a small 2 story apartment complex, to a 1-bedroom unit located in a 45 unit complex, Brilliant Corners is able to provide patients with a unit that offers the greatest chances of long-term housing success.

# Type of Housing Subsidy

Subsidy Type for Clients Housed (N=694)



# Service Integration

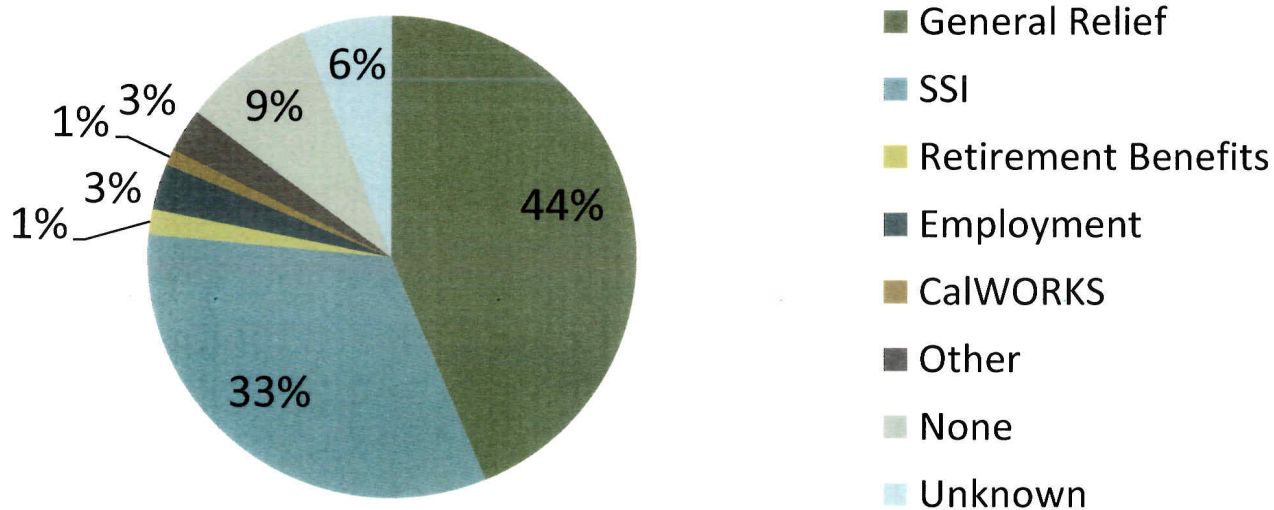
Efforts to improve County service integration:

- DHS Housing for Health (HFH) coordinates the Single Adult Model (SAM) program, a collaboration between DHS, DPH, DMH, DPSS, and the CDC to provide housing to high utilizing homeless GR recipients. A goal of the program is to identify opportunities for increased collaboration in the provision of services and benefits to homeless individuals across the County.
- DMH and the Probation Department have each made investments into the FHSP in order to provide supportive housing to the populations they serve.
- HFH participated in Operation Healthy Streets with other County Departments including DPH, DMH, and DPSS to provide linkage to services, benefits, and interim housing to individuals who are homeless in the Skid Row area in advance of city street cleaning efforts.
- HFH collaborated with DMH to establish a process for enhanced referrals and linkage between the Star Clinic and DMH service providers for care coordination between DHS and DMH clinicians for clients receiving services from both departments.

# Client Income

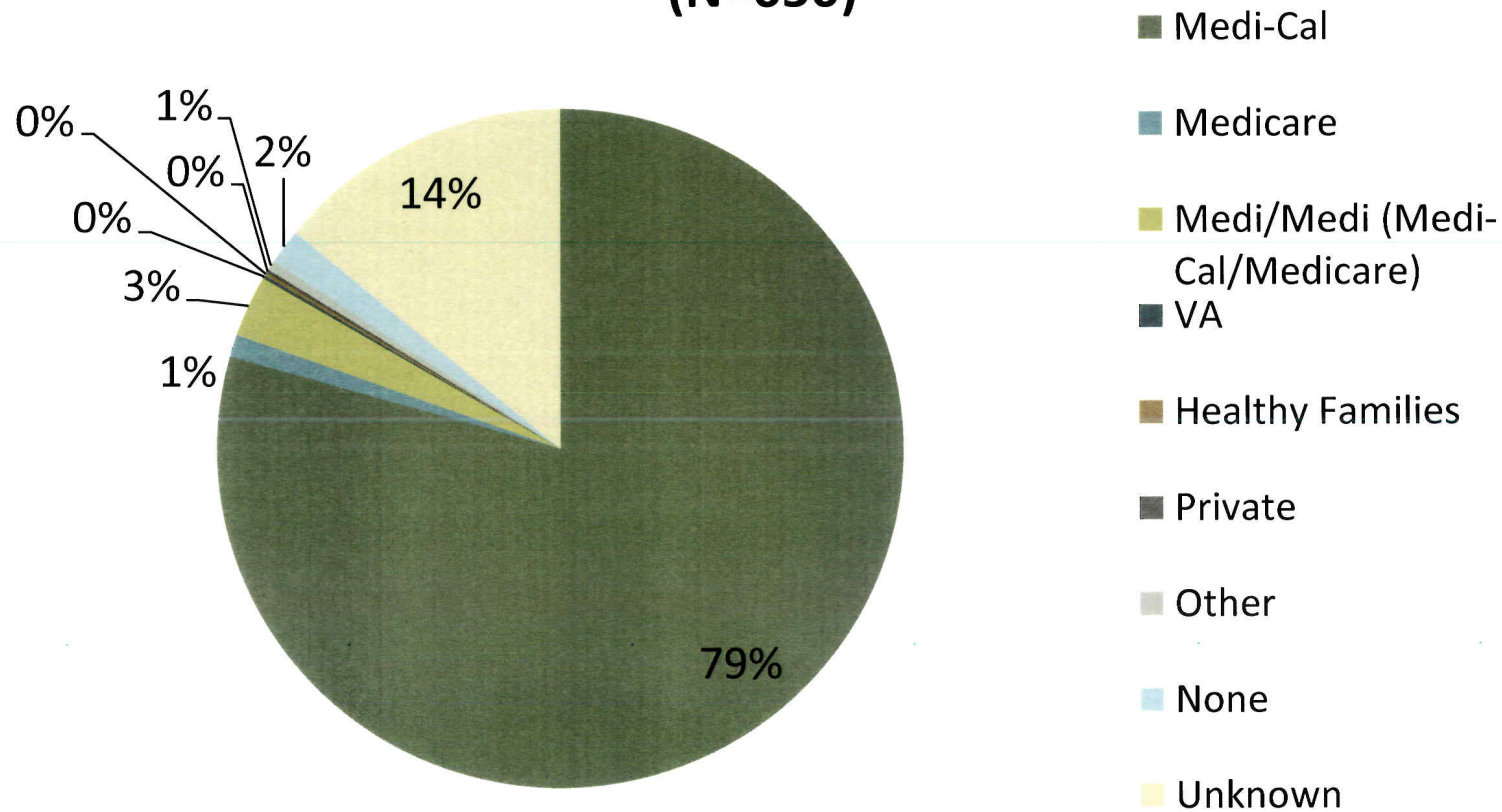
- During the client intake and assessment process, the Intensive Case Management Services (ICMS) provider obtains information on the client's income and health benefits. If the client appears to be eligible for a benefit they are not currently receiving, the ICMS provider will assist them to obtain any necessary documents and will complete and track applications for DPSS Services (CalFresh, Medi-Cal, GR, CalWORKs, and IHSS) and SSI.

## Income of Clients Housed (N=650)



# Client Health Insurance

## Health Insurance Type for Client Currently Housed (N=650)



# Permanent Supportive Housing Funding

- The source of funds for the Property Related Tenant Services work order to operate the FHSP is DHS County General Fund dollars, the Conrad N. Hilton Foundation, and the office of Supervisor Mark Ridley-Thomas . The estimated cost for Fiscal Year 2014-2015 is \$1.1 million.
- The source of funds for contracted ICMS services in permanent supportive housing is DHS County General Fund dollars. The estimated cost for contracted ICMS services in permanent supportive housing in Fiscal Year 2014-15 is \$3 million.
- The source of funds for the Property Related Tenant Services work order to operate the South Los Angeles Supportive Housing Program (a County/City initiative that provides 56 units of housing to DHS patients who are homeless) is DHS County General Fund dollars. The estimated cost for Fiscal Year 2014-15 is \$200,000.

# Featured Permanent Supportive Housing Site: Broadway Villas

- Opened January 2015
- Located in South Los Angeles
- 48 units total with 16 units set aside for HFH referrals
- Rent subsidized through Flexible Housing Subsidy Pool (FHSP)
- One bedroom and two bedroom units
- Developed and owned by Amcal
- Supportive services provided onsite by LifeSTEPS
- Community room for meetings and events, laundry facilities and ongoing health and wellness programming for all residents





# Featured Client Success Story:

## A former caregiver finds the support she now needs

When “Linda” came to California six years ago, becoming homeless wasn't part of her plan. She had been a nurse in Texas, however, her license wasn't valid in California. To land a nursing job here would cost around \$10,000 and two more years of school. Knowing she had to work, Linda received training by Los Angeles County in mental health services to work with those with Alzheimer's Disease. For six years she worked as a caregiver and didn't stop until December 2013. That's the day her life changed in ways she could never have imagined. She took a horrible fall down a flight of stairs and sustained severe injuries. Unable to work, she no longer had an income sufficient to pay rent. She was eventually evicted from her apartment. Linda was now homeless and felt hopeless.

Linda was identified by a social worker at MLK who quickly referred her to the Housing for Health program. "I was sleeping in my car." Linda said. She parked in hospital parking lots and other places where she would feel safe. Still recovering from the severity of her injuries, her sleeping arrangement made her condition worse. "I have seven degenerated bones in my back and sleeping in my car has made it worse. I'm sometimes in so much pain I can't sleep."

Linda was one of 16 people who moved into the Housing for Health units at Broadway Villas (featured in previous slide) in January 2015. Linda, understandably, was quite excited. “I went to see the property and it was beautiful. I knew I was going to be blessed. It was like a dream!”



July 27, 2015

Los Angeles County  
Board of Supervisors

Hilda L. Solis  
First District

Mark Ridley-Thomas  
Second District

Sheila Kuehl  
Third District

Don Knabe  
Fourth District

Michael D. Antonovich  
Fifth District

TO: Mayor Michael D. Antonovich  
Supervisor Hilda L. Solis  
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FROM: Mitchell H. Katz, M.D.  
Director

**SUBJECT: HOUSING FOR HEALTH (HFH) QUARTERLY REPORT**

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**BACKGROUND**

In November 2012, DHS established the HFH division to expand access to supportive housing for DHS patients who are homeless and who have complex medical and behavioral health conditions and/or are high utilizers of DHS services.

HFH utilizes a full range of community-based housing options, including non-profit owned supportive housing, affordable housing, and private market housing. Tenants receive federal rental subsidies such as Section 8 Project Based or Tenant Based Vouchers or a local rental subsidy through the Flexible Housing Subsidy Pool (FHSP). All individuals who are housed through HFH programs are assigned to a homeless services provider to receive Intensive Case Management Services (ICMS). These services include outreach and engagement; case management with on-going monitoring and follow-up; linkage to health, mental health, and substance use disorder services; assistance with benefits establishment; assistance with life skills, job skills, and educational and volunteer opportunities; crisis intervention, etc. ICMS providers provide "whatever it takes" wraparound services to assist clients in regaining stability and improved health.

**NEW EXECUTED WORK ORDER**

Pursuant to the Supportive Housing Services Master Agreement approved by the Board on June 19, 2012, this is to advise that DHS

*To ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.*

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Mayor Michael D. Antonovich, et al.  
May 6, 2015  
Page 2

has executed Work Orders to the Supportive Housing Services Master Agreement with Step Up On Second to provide intensive case management services in permanent supportive housing and with JWCH to provide intensive case management services in interim housing at MLK Recuperative Care. County Counsel has reviewed and approved the Work Orders.

**QUARTERLY REPORT**

Please find attached the quarterly report in dashboard format. If you have any questions, please contact me or Mark Ghaly, M.D., Deputy Director of Community Health, at (213) 240-7702.

MHK:mg

cc: Chief Executive Office  
County Counsel  
Executive Office, Board of Supervisors

Attachment

HOUSING  
FOR  
HEALTH

Quarterly Report

April-June 2015

# Number of Clients Housed

- Housing for Health (HFH) clients are DHS patients who are homeless and who have complex medical and behavioral health conditions and/or are high utilizers of DHS services.

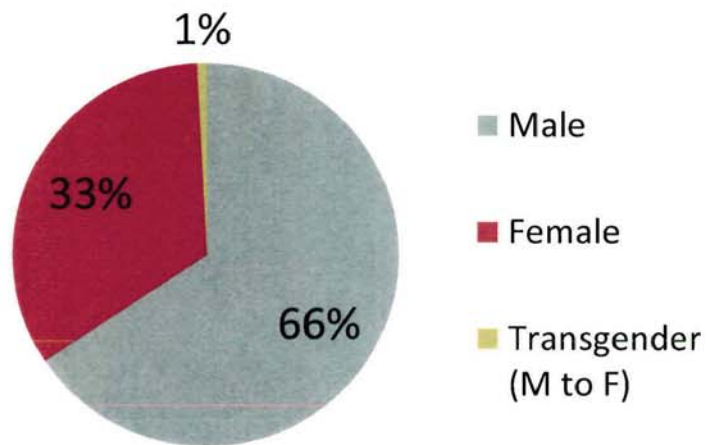


## HFH Housing Outcomes

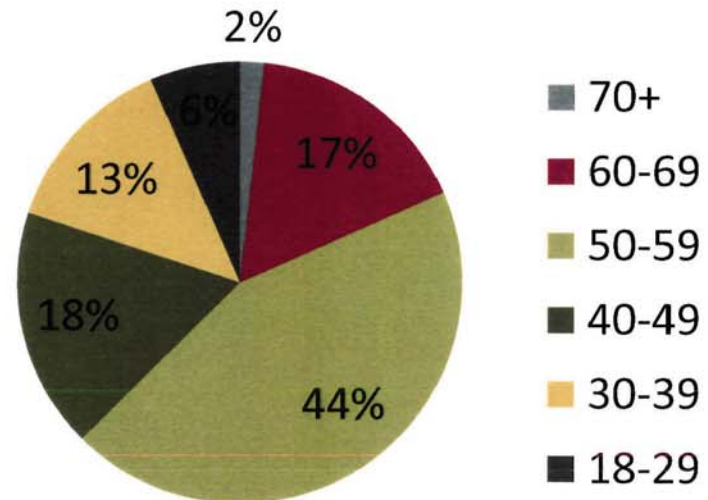
Total # of patients who have attained housing since HFH began in November 2012	882
Total # of patients who are currently housed	838
Total # of patients housed April-June 2015	188

# Demographics of Clients Housed

## Gender of Clients Housed (N=861)



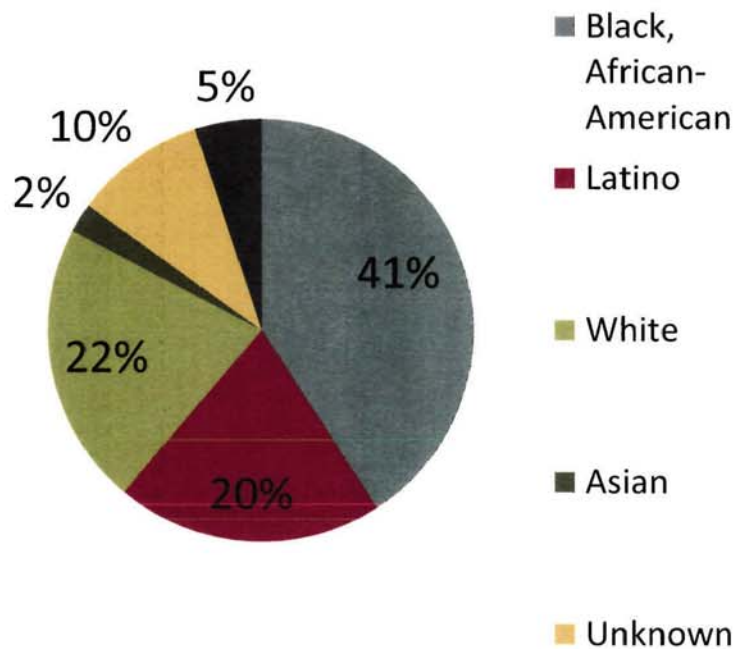
## Age of Clients Housed (N=874)



\*Patient data does not total to 882 due to clients who decline to state demographic information

# Demographics of Clients Housed (Cont.)

**Race/Ethnicity of Clients Housed (N=882)**



The most common diagnoses of HFH clients:

- Hypertension
- Diabetes
- Congestive heart failure and heart disease
- Asthma
- Cancer
- HIV/AIDS
- Hepatitis C
- Lung disease
- Depression
- Bipolar disorder
- Post-traumatic stress disorder

# Housing Status and Retention

## Homeless Status

- The average length of time that patients experienced homelessness was 4 years and the median length of time was 2 years and 2 months.
- The majority of HFH clients were chronically homeless (83%), which means they were homeless for more than one year or experienced four or more episodes of homelessness in the last three years.

## Housing retention rate

- 92% of tenants retained housing (remained in unit or exited to other permanent housing) after 12 months.

## Exits from housing this quarter

- Thirteen patients exited housing this quarter. Four passed away, three were incarcerated, one moved to other housing, one voluntarily surrendered the unit, one was evicted, one moved with family or friends, and two are unknown.



# Flexible Housing Subsidy Pool Update

FHSP Quarterly and Program-to-date Accomplishments:	
Move-ins April – June 2015	108
Total move-ins to date	380
Units secured* April– June 2015	55
Total units secured* to date	430

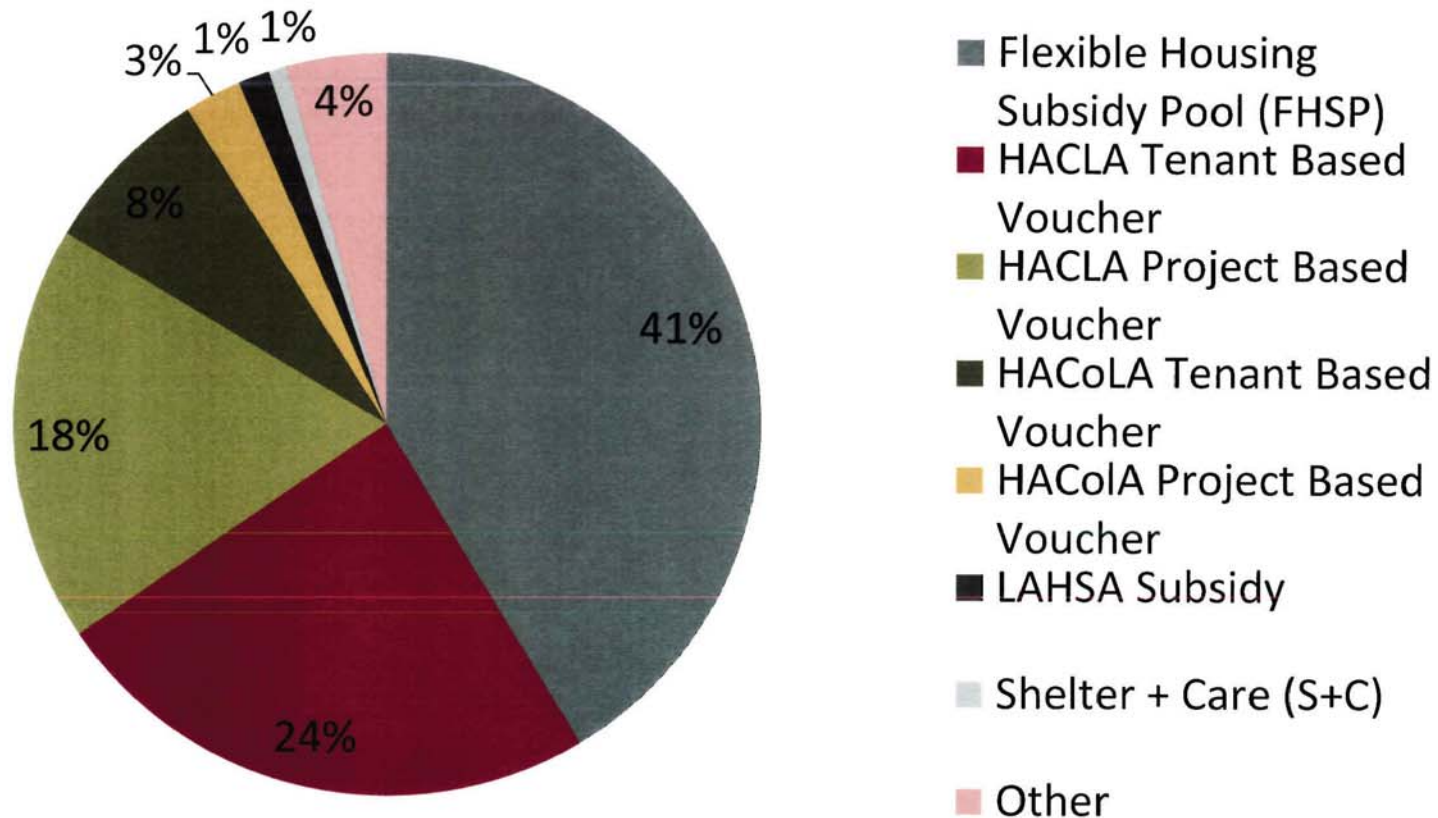
\*Refers to the number of units that have been secured under a rental subsidy agreement with the property owner and includes occupied and soon to be occupied units.

# Characteristics of Housing Units

- Units in the HFH portfolio range in size and type across the County from large apartment buildings to smaller single family homes and are appropriate to household size and composition.
- In the most recent quarter, Brilliant Corners secured an additional 55 units in Los Angeles County for the Flexible Housing Subsidy Pool. Of the 55 units, 11 are studios, 39 are one-bedrooms, 4 are two-bedrooms, and 1 is a four-bedroom.
- Brilliant Corners engages with private landlords, local developers, and local property management agencies, in an effort to provide a diverse pool of units to the program. From a wheelchair accessible studio unit located on the ground floor of a small 2 story apartment complex, to a 1-bedroom unit located in a 45 unit complex, Brilliant Corners is able to provide patients with a unit that offers the greatest chances of long-term housing success.

# Type of Housing Subsidy

Subsidy Type for Clients Housed (N=882)



# Service Integration

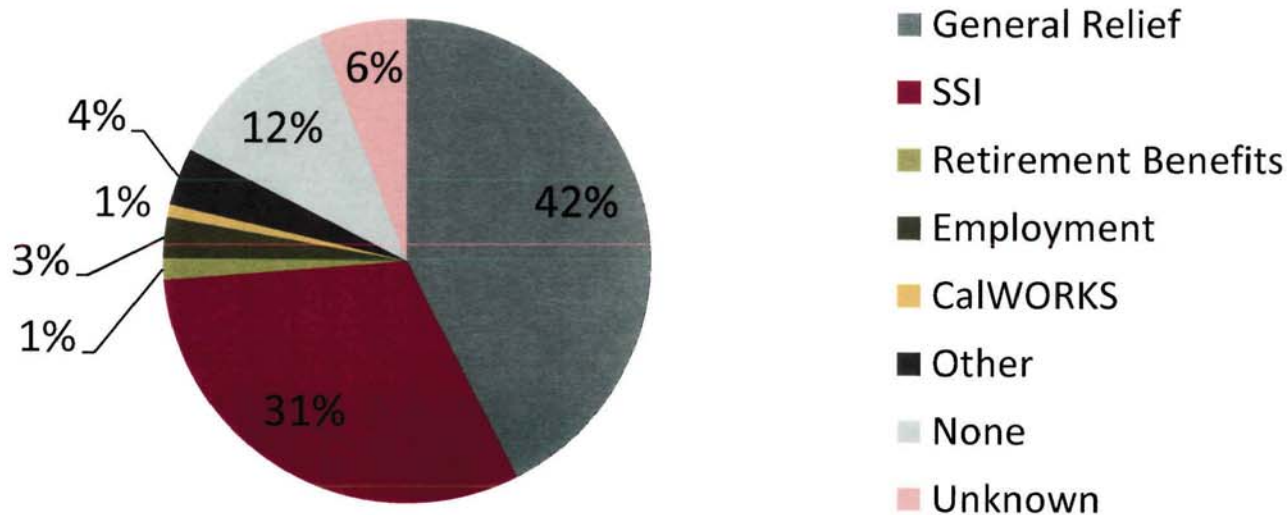
## **Efforts to improve County service integration:**

- DHS Housing for Health (HFH) coordinates the Single Adult Model (SAM) program, a collaboration between DHS, DPH, DMH, DPSS, and the CDC to provide housing to high utilizing homeless GR recipients. A goal of the program is to identify opportunities for increased collaboration in the provision of services and benefits to homeless individuals across the County.
- DMH and the Probation Department have each made investments into the FHSP in order to provide supportive housing to the populations they serve.
- HFH participates in Operation Healthy Streets with other County Departments including DPH, DMH, and DPSS to provide linkage to services, benefits, and interim housing to individuals who are homeless in the Skid Row area in order to advance city street cleaning efforts. Star Clinic staff also conduct weekly outreach in Skid Row every Wednesday morning with staff from DPH, LAHSA, and LAPD.
- HFH collaborates with DMH to establish a process for enhanced referrals and linkages between the Star Clinic and DMH service providers for care coordination between DHS and DMH clinicians for clients receiving services from both departments.
- HFH launched a new initiative with the LA County Sheriff's Department and the Mental Health Court to provide housing to homeless inmates who are leaving jail or who are on conditional release.

# Client Income

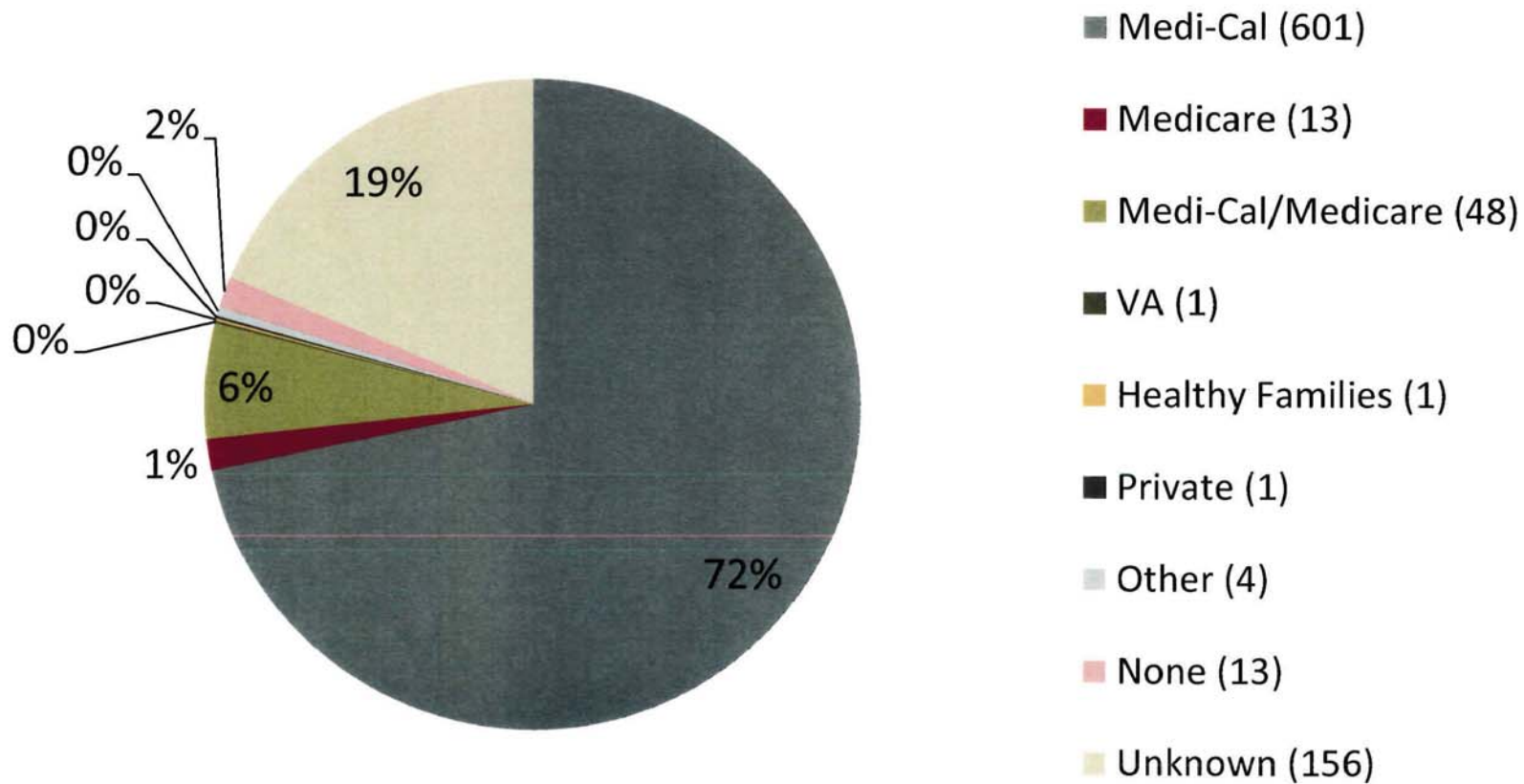
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## Income of Clients Housed (N=838)



# Client Health Insurance

## Health Insurance Type for Client Currently Housed (N=838)



# Permanent Supportive Housing Funding

- The sources of funds for the Property Related Tenant Services work order to operate the FHSP are DHS County General Fund dollars, the Conrad N. Hilton Foundation, and the office of Supervisor Mark Ridley-Thomas . The estimated cost for Fiscal Year 2014-2015 is \$1.1 million.
- The source of funds for contracted ICMS in permanent supportive housing is DHS County General Fund dollars. The estimated cost for contracted ICMS in permanent supportive housing in Fiscal Year 2014-15 is \$3 million.
- The source of funds for the Property Related Tenant Services work order to operate the South Los Angeles Supportive Housing Program (a County/City initiative that provides 56 units of housing to DHS patients who are homeless) is DHS County General Fund dollars. The estimated cost for Fiscal Year 2014-15 is \$200,000.

# Featured Permanent Supportive Housing Site: New Pershing Apartments

- Opened in April 2015, after a major rehab. The new design maintained the historic façade and staircase.
- Located in Downtown Los Angeles.
- 65 units total with 47 units set aside for HFH referrals.
- Developed and owned by Skid Row Housing Trust (SRHT).
- Building has large courtyard on ground floor to promote community building. On-site services provided by SRHT.





# Featured Client Success Story:

## From the Streets to Recuperative Care to a Permanent Home

When Tim\* came in for his first visit at the Star Clinic, he had been homeless for over 4 years living on the streets at Pico and Robertson. His homelessness was precipitated by a severe on the job injury from a fall off of a two story building. The fall left him unable to work and with vertebral fractures and severe orthopedic and neurologic damage to his left hand, arm and leg. He also suffered from depression and chronic obstructive pulmonary disease. On his first visit to the clinic he was diagnosed with severe bronchitis made worse by malnutrition and exposure to the elements that comes with living on the streets. During subsequent visits his condition deteriorated with worsening leg and back pain, leg function, and a new symptom of incontinence. Tim was later assaulted while sleeping on the streets with additional injury to his left hand and wrist.

At that time Lynda, his nurse practitioner at the Star Clinic, admitted him to a recuperative care bed through Housing for Health, which started his path to permanent supportive housing. The following week Lynda could hardly recognize Tim--he was clean with new clothes and his gait was improved. He was no longer incontinent and his pain was under control. He attributed this to that fact that he had, for the first time in many years, a good night's sleep. HFH quickly connected Tim to a permanent supportive housing unit to call home, where he is continuing to heal and thrive.

Due to his past injuries, Tim had been put on methadone for pain which he had relied on for over 4 years. He had always wanted to end his dependence on methadone but had been unable to because of the pain associated with sleeping on the street. Since moving into his new home, Tim has begun the process of weaning himself off of methadone; the safety and security he feels in his new home has allowed him to reduce both his pain and anxiety medication. He now feels more in control of his wellbeing and life. And now that his basic needs are met, instead of being focused solely on staying safe, Tim is now looking outward and helping others in his apartment complex who are in need. He also hopes to someday join the outreach team at the Star Clinic to help others experiencing homelessness. He asked Lynda to share his story in order to "give back" and help this program in any way he can.

\*Name has been changed.



October 28, 2015

Los Angeles County Board of Supervisors

Hilda L. Solis First District

Mark Ridley-Thomas Second District

Sheila Kuehl Third District

Don Knabe Fourth District

Michael D. Antonovich Fifth District

Mitchell H. Katz, M.D. Director

Hal F. Yee, Jr., M.D., Ph.D. Chief Medical Officer

TO: Mayor Michael D. Antonovich Supervisor Hilda L. Solis Supervisor Mark Ridley-Thomas Supervisor Sheila Kuehl Supervisor Don Knabe

FROM: Mitchell H. Katz, M.D. Director

SUBJECT: HOUSING FOR HEALTH (HFH) QUARTERLY REPORT

On January 14, 2014, the Board instructed the Director of the Department of Health Services (DHS) to submit quarterly reports to the Board on Housing for Health (HFH) permanent supportive housing outcomes including funds, costs, number and composition of clients housed; integrated health, mental health, substance use disorder and benefits establishment results; utilization rate and duration of housing subsidies; number of clients transitioning off of housing subsidies; and characteristics of housing units secured.

BACKGROUND

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HFH utilizes a full range of community-based housing options, including non-profit owned supportive housing, affordable housing, and private market housing. Tenants receive federal rental subsidies such as Section 8 Project Based or Tenant Based Vouchers or a local rental subsidy through the Flexible Housing Subsidy Pool (FHSP). All individuals who are housed through HFH programs are assigned to a homeless services provider to receive Intensive Case Management Services (ICMS). These services include outreach and engagement; case management with on-going monitoring and follow-up; linkage to health, mental health, and substance use disorder services; assistance with benefits establishment; assistance with life skills, job skills, and educational and volunteer opportunities; crisis intervention, etc. ICMS providers provide "whatever it takes" wraparound services to assist clients in regaining stability and improved health.

NEW EXECUTED WORK ORDER

Pursuant to the Supportive Housing Services Master Agreement approved by the Board on June 19, 2012, this is to advise that DHS has executed Work Orders to the Supportive Housing Services Master Agreement with Gettlove, Alliance for Housing and Healing, Downtown Women's Center, Mental Health America of Los Angeles,

313 N. Figueroa Street, Suite 912 Los Angeles, CA 90012

Tel: (213) 240-8101 Fax: (213) 481-0503

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Mayor Michael D. Antonovich, et al.

May 6, 2015

Page 2

SRO Housing, Special Services for Groups, and St. Joseph's Center to provide intensive case management services in permanent supportive housing. County Counsel has reviewed and approved the Work Orders.

**QUARTERLY REPORT**

Please find attached the quarterly report in dashboard format. If you have any questions, please contact me or Mark Ghaly, M.D., Deputy Director of Community Health, at (213) 240-7702.

MHK:mg

cc: Chief Executive Office  
County Counsel  
Executive Office, Board of Supervisors

Attachment

# HOUSING

FOR

# HEALTH

Quarterly Report July-September 2015



Health Services  
LOS ANGELES COUNTY

# GOALS

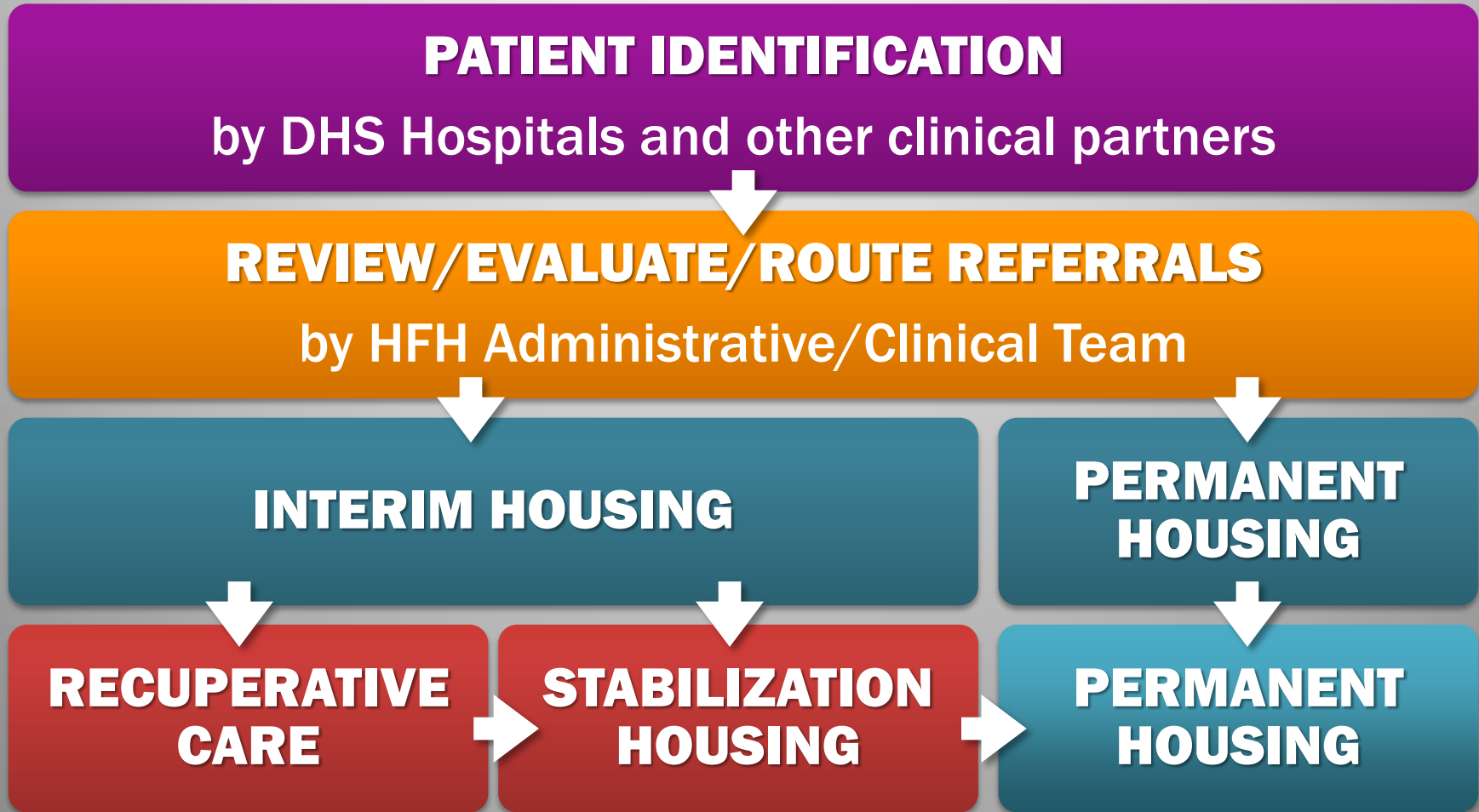
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- 1. Create 10,000 units of housing**
- 2. End homelessness in LA County**
- 3. Reduce inappropriate use of expensive health care resources**
- 4. Improve health outcomes for vulnerable populations.**

# CLIENTS HOUSED

- Housing for Health (HFH) clients are DHS patients who are homeless and who have complex medical and behavioral health conditions and are high utilizers of DHS services.

# HFH CLIENT PROCESS



# Permanent Supportive Housing Quarterly and Program-to-Date Outcomes

**Total # of patients who have attained housing since HFH began in November 2012**

**1110**

**Total # of patients who are currently housed**

**1045**

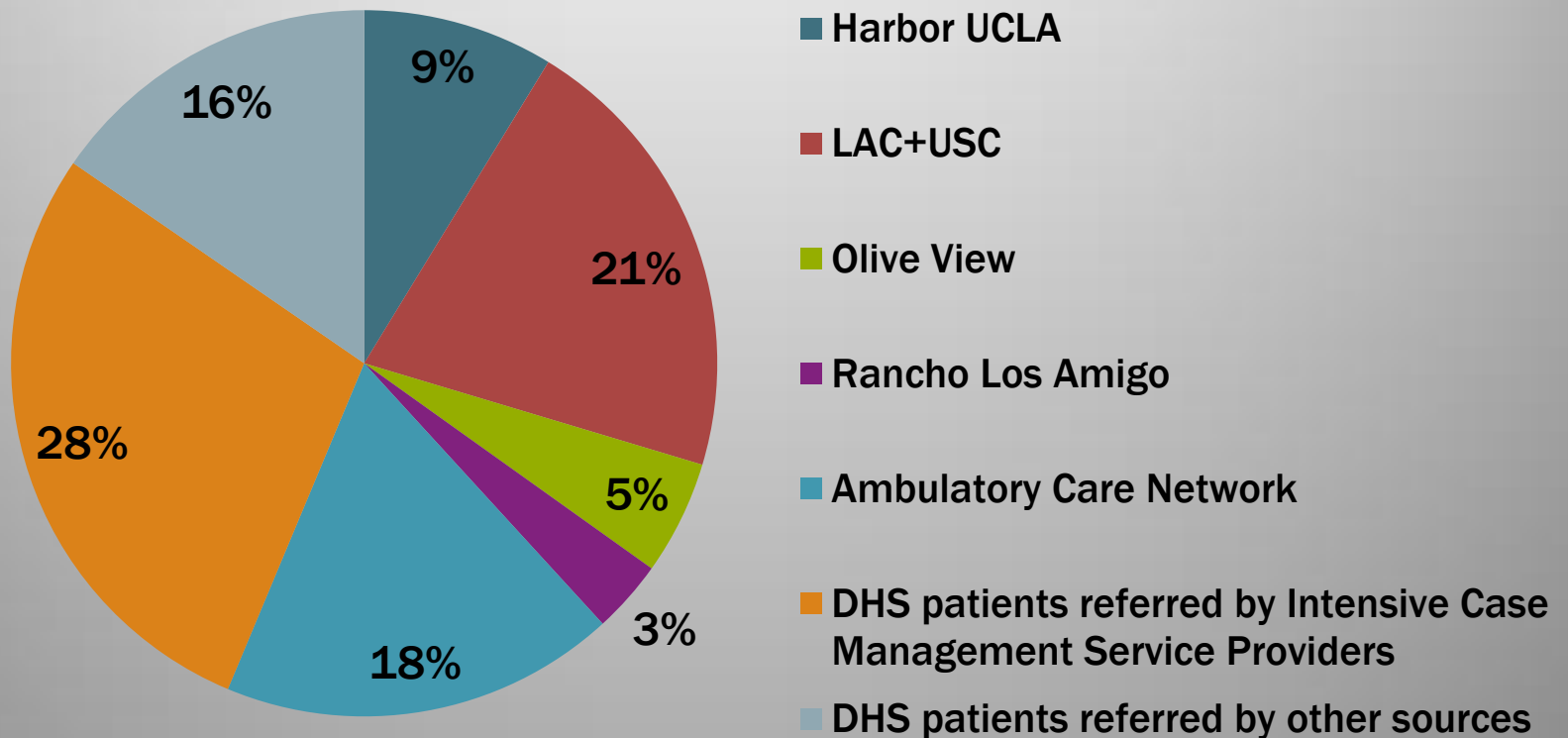
**Total # of patients housed July-September 2015**

**198**



# WHERE DO HFH REFERRALS COME FROM?

Referral Source of Clients Housed (N=1110)



# HEALTH CONDITIONS OF CLIENTS HOUSED

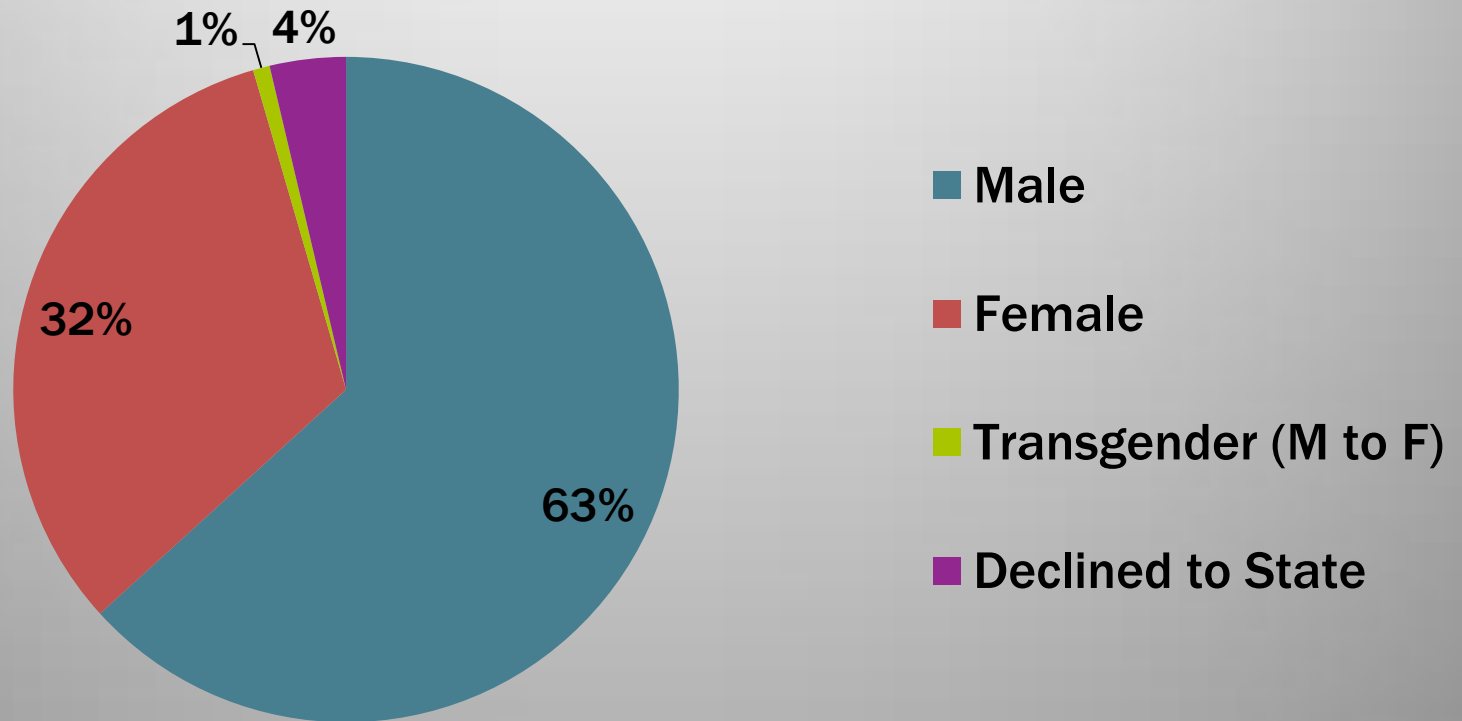
## MOST COMMON CONDITIONS:

- Hypertension
- Diabetes
- Asthma
- Heart disease
- Congestive heart failure
- Cancer
- HIV/AIDS
- Hepatitis
- Depression
- Bipolar disorder
- PTSD
- Schizophrenia

Most HFH clients have **MULTIPLE CHRONIC HEALTH CONDITIONS**

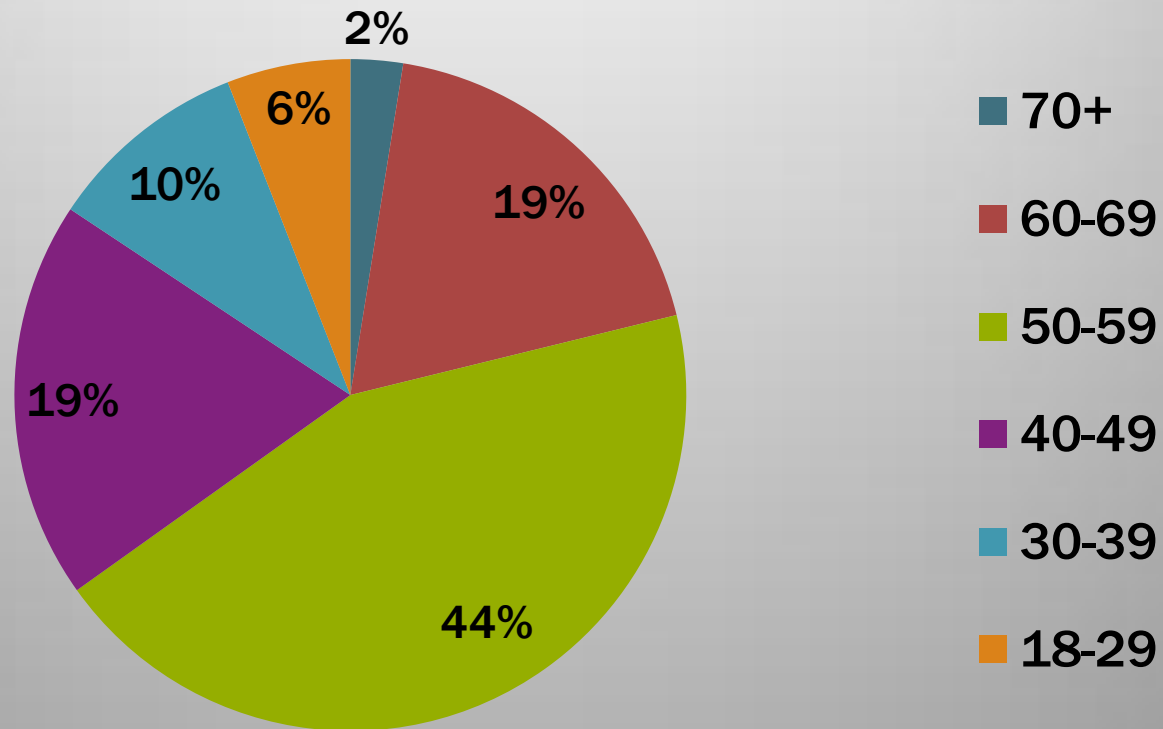
# DEMOGRAPHICS OF CLIENTS HOUSED

Gender of Clients Housed (N=1110)



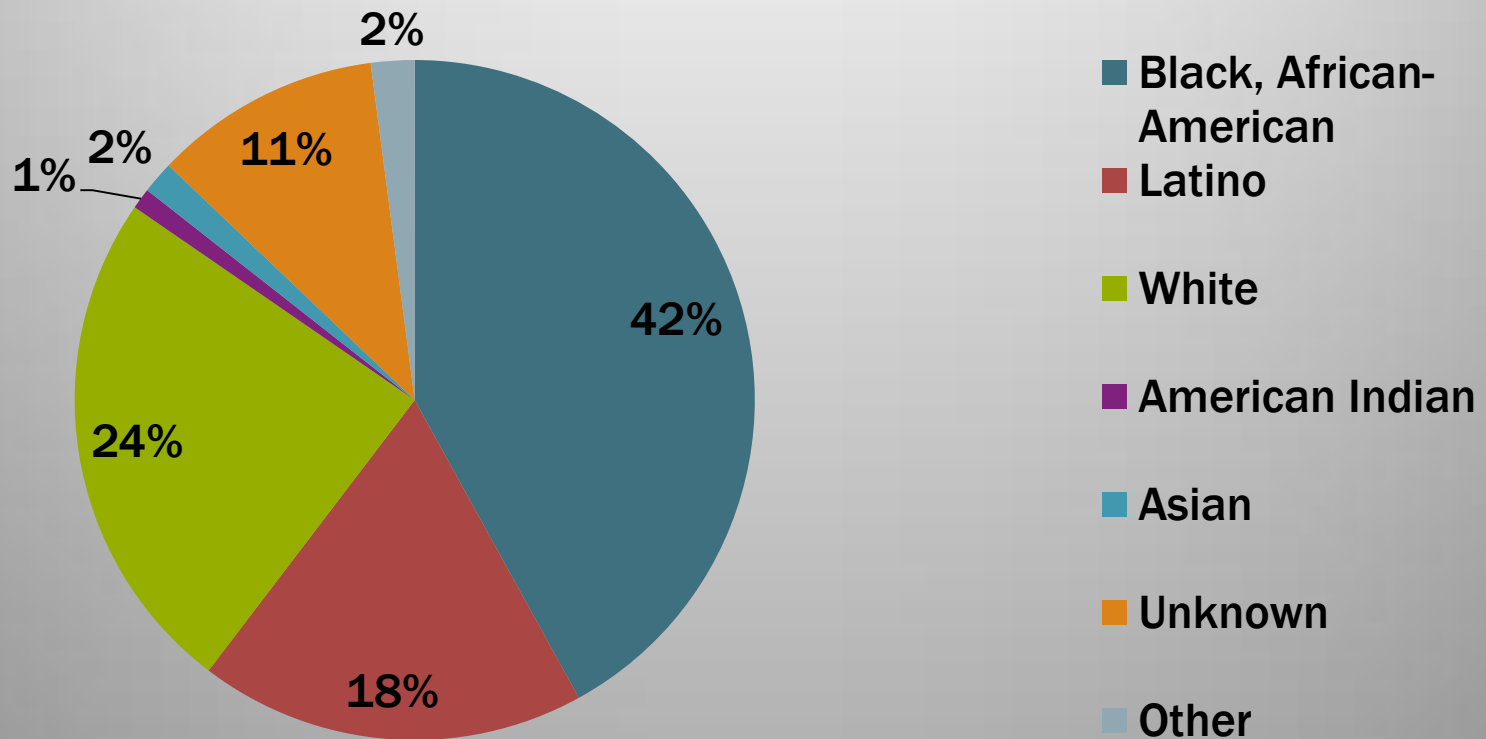
# DEMOGRAPHICS OF CLIENTS HOUSED

Age of Clients Housed (N=1110)



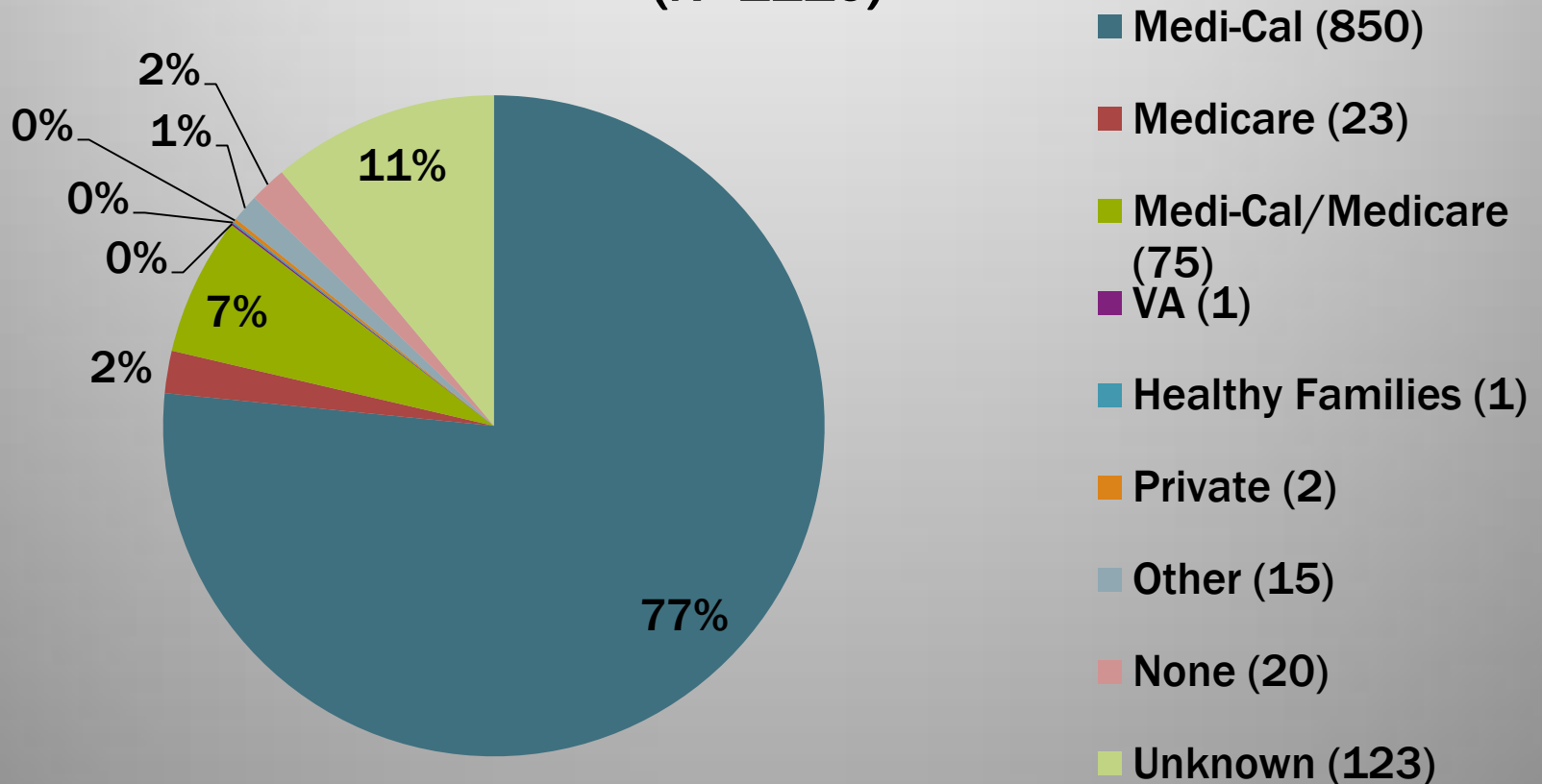
# DEMOGRAPHICS OF CLIENTS HOUSED

Race/Ethnicity of Clients Housed (N=1110)



# CLIENT HEALTH INSURANCE

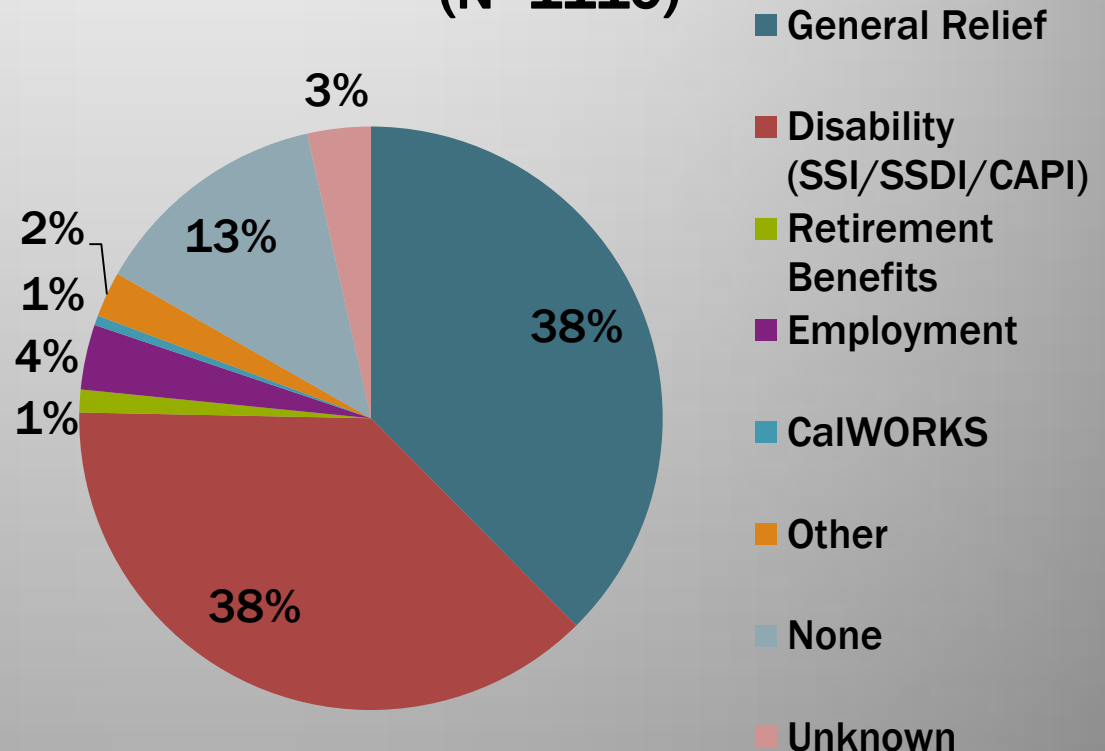
## Health Insurance Type for Clients Currently Housed (N=1110)



# CLIENT INCOME

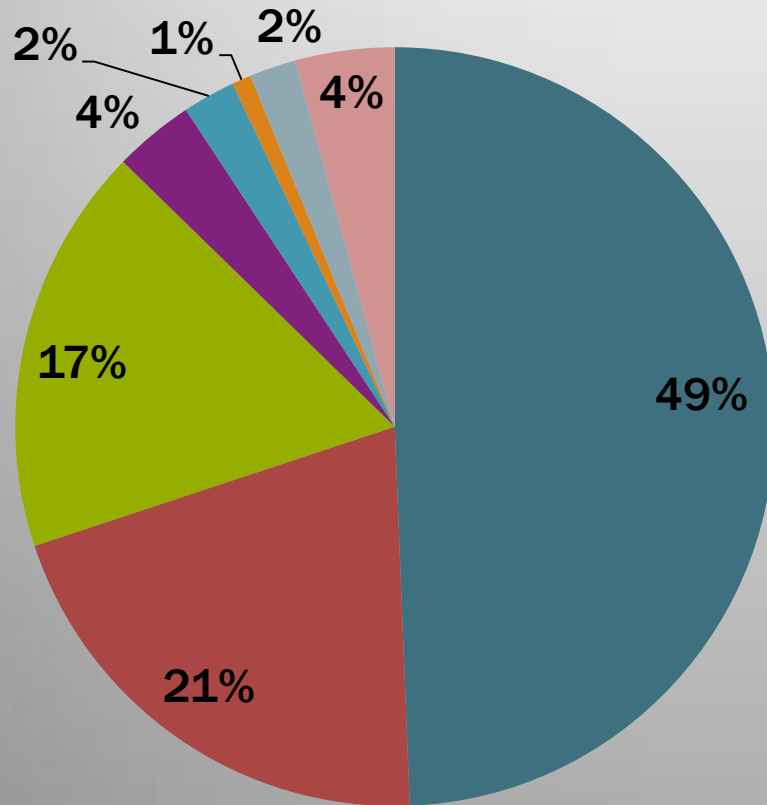
- During the client intake and assessment process, the Intensive Case Management Services (ICMS) provider obtains information on the client's income and health benefits. If the client appears to be eligible for a benefit they are not currently receiving, the ICMS provider will assist them to obtain any necessary documents and will complete and track applications for DPSS Services (CalFresh, Medi-Cal, GR, CalWORKs, and IHSS) and SSI.

## Income of Clients Housed (N=1110)



# TYPE OF HOUSING SUBSIDY

Subsidy Type for Clients Housed (N=1110)



- Flexible Housing Subsidy Pool (FHSP)
- Housing Authority of the City of Los Angeles (HACLA) Tenant Based Voucher
- Housing Authority of the City of Los Angeles (HACLA) Project Based Voucher
- Housing Authority of the County of Los Angeles (HACoLA) Tenant Based Voucher
- Housing Authority of the County of Los Angeles (HACoLA) Project Based Voucher
- Los Angeles Homeless Services Authority (LAHSA) Subsidy
- Shelter + Care (S+C)
- Other



# INTENSIVE CASE MANAGEMENT

---

- **Every client** connected to services.
- **Individualized service** planning and linkages to health, mental health, and substance use disorder services.
- **Help clients retain** housing and reach health and wellbeing goals.
- **Services provided by** on-site staff or mobile teams.

# HOUSING STATUS AND RETENTION

---

## Homeless Status

- The average length of time that patients experienced homelessness was 4 years and 2 months and the median length of time was 2 years.
- The majority of HFH clients were chronically homeless (83%), which means they were homeless for more than one year or experienced four or more episodes of homelessness in the last three years.

## Housing retention rate

- 96% of tenants retained housing (remained in unit or exited to other permanent housing) after 12 months.

## Exits from housing this quarter

- Nine patients exited housing this quarter. Three passed away, one was incarcerated, four voluntarily surrendered their unit, one needed higher level of care.

# EFFORTS TO IMPROVE COUNTY SERVICE INTEGRATION

---

- DHS Housing for Health (HFH) coordinates the Single Adult Model (SAM) program, a collaboration between DHS, DPH, DMH, DPSS, and the CDC to provide housing to high utilizing homeless GR recipients. A goal of the program is to identify opportunities for increased collaboration in the provision of services and benefits to homeless individuals across the County.
- DMH and the Probation Department have each made investments into the FHSP in order to provide supportive housing to the populations they serve.
- HFH participates in Operation Healthy Streets with other County Departments including DPH, DMH, and DPSS to provide linkage to services, benefits, and interim housing to individuals who are homeless in the Skid Row area in order to advance city street cleaning efforts. Star Clinic staff also conduct weekly outreach in Skid Row every Wednesday morning with staff from DPH, LAHSA, and LAPD.
- HFH collaborates with DMH to establish a process for enhanced referrals and linkages between the Star Clinic and DMH service providers for care coordination between DHS and DMH clinicians for clients receiving services from both departments.
- HFH launched a new initiative with the LA County Sheriff's Department and the Mental Health Court to provide housing to homeless inmates who are leaving jail or who are on conditional release.

# PERMANENT SUPPORTIVE HOUSING FUNDING

---

- The sources of funds for the Property Related Tenant Services (PRTS) FHSP work order is DHS County General Fund dollars . The estimated cost for Fiscal Year 2015-16 is \$9.3 million.
- The source of funds for contracted Intensive Case Management Services (ICMS) in permanent supportive housing is DHS County General Fund dollars. The estimated cost for contracted ICMS in permanent supportive housing in Fiscal Year 2015-16 is \$7.9 million.
- The source of funds for the Property Related Tenant Services (PRTS) work order to operate the South Los Angeles Supportive Housing Program (a County/City initiative that provides 56 units of housing to DHS patients who are homeless) is DHS County General Fund dollars. The estimated cost for Fiscal Year 2015-16 is \$200,000.

# FLEXIBLE HOUSING SUBSIDY POOL



# FHSP PARTNERS



Los Angeles County  
Dept. of Health  
Services



503(c) nonprofit  
coordinating community-  
based partner



Property owners  
throughout Los  
Angeles County



LADHS Supportive  
Housing Rental  
Subsidy Program

# FHSP Quarterly and Program-to-Date Outcomes

Move-ins July-September 2015	144
Total move-ins to date	522
Units secured* July-September 2015	133
Total units secured* to date	569

\*Refers to the number of units that have been secured under a rental subsidy agreement with the property owner and includes occupied and soon to be occupied units. Units will be made available to DHS patients as well as other participants of the FHSP.

# CHARACTERISTICS OF FHSP HOUSING UNITS

---

- Units in the HFH portfolio range in size and type across the County from large apartment buildings to smaller single family homes and are appropriate to household size and composition.
- In the most recent quarter, Brilliant Corners secured an additional 133 units in Los Angeles County for the Flexible Housing Subsidy Pool. Of the 133 units, 47 are studios, 79 are one-bedrooms, 5 are two-bedrooms and 2 are three-bedroom.
- Brilliant Corners engages with private landlords, local developers, and local property management agencies, in an effort to provide a diverse pool of units to the program. From a wheelchair accessible studio unit located on the ground floor of a small 2 story apartment complex, to a 1-bedroom unit located in a 45 unit complex, Brilliant Corners is able to provide patients with a unit that offers the greatest chances of long-term housing success.



# FEATURED HOUSING SITE AND PATIENT STORY



Health Services  
LOS ANGELES COUNTY

# HOLLENBECK TERRACE

- Opened in September 2015, after a major rehab. The building was once a hospital built for railroad employees (originally known as Santa Fe Railroad Hospital built in 1904 and then rebuilt in 1924). The new design maintained the historic façade, indoor tile work, stained glass and other original design aspects.
- Located in Boyle Heights (across the street from Hollenbeck Park).
- 100 units total with 24 units set aside for HFH referrals.
- Developed and owned by Amcal with on-site services provided by LifeSTEPS.
- Building has several gathering/community spaces for tenants and a large meeting space and patio on the top floor to promote community building.



# PATIENT SUCCESS STORY

Janice\* used to spend her days outside the New Pershing Apartments near the intersection of 5<sup>th</sup> and Main streets. The irony of a homeless woman staying on the sidewalks bordering a permanent supportive housing development was not lost on Housing For Health Outreach Worker Richard Myers.

Richy reached out to Janice in July and noticed that her speech and demeanor softened when engaged in conversation. Due to mental health issues and over a decade of living on the streets, Janice was wary of service providers and was initially reluctant to be placed in interim housing. Due to prior involuntary hospitalizations, she associated housing with unwanted mental health treatment.

Janice's past was riddled with hardship. She had spent 15 years homeless. She would take cover where ever it was dry and would wash up in a Jack In The Box bathroom.

Driven by the changes he saw when Janice received attention and support, Richy continued to work with her and within a few weeks had her apply for an ID and social security card. By late August, she was willing to enter interim housing at the Russ Hotel in Downtown Los Angeles. There, Janice quickly flourished. She established primary care at the STAR clinic and was able to secure benefits with the Department of Public Social Services during her month-long stay at the Russ. Soon, she was offered permanent supportive housing east of Downtown Los Angeles. LifeSTEPS Regional Director Rudy Contreras said her hair was matted and it was clear she had not bathed in a while. "She had nothing but a smile on her face. Once she opened the door to her apartment, that smile grew so much. It made everything we do worthwhile." Richy echoes that sentiment, "I am so grateful to be a part of her journey."

The new home is ideal for Janice. It is the second HFH project in partnership with LifeSTEPS to get clients housed quickly. The building has sweeping views of downtown from the rooftop terrace and Brilliant Corners equipped her 500-square-foot one-bedroom unit with furnishings and housing basics like bed sheets and dinnerware. Janice praises the work that DHS and LifeSTEPS have done together. She has started working with her LifeSTEPS case manager to manage her money and get herself settled.

A day after moving in, Richy and HFH Project Manager Leepi Shimkhada were eager to drop off some items for Janice's pantry, but they were made to wait at her front door. She was a little busy doing something many of us take for granted. She was taking a shower.

\*Name changed



**Health Services**  
LOS ANGELES COUNTY

February 8, 2016

**Los Angeles County  
Board of Supervisors**

**Hilda L. Solis**  
First District

**Mark Ridley-Thomas**  
Second District

**Sheila Kuehl**  
Third District

**Don Knabe**  
Fourth District

**Michael D. Antonovich**  
Fifth District

**TO:** Supervisor Hilda L. Solis, Chair  
Supervisor Mark Ridley-Thomas  
Supervisor Sheila Kuehl  
Supervisor Don Knabe  
Supervisor Michael D. Antonovich

**FROM:**  Mitchell H. Katz, M.D.  
Director

**SUBJECT: HOUSING FOR HEALTH (HFH) QUARTERLY  
REPORT**

**Mitchell H. Katz, M.D.**  
Director

**Hai F. Yee, Jr., M.D., Ph.D.**  
Chief Medical Officer

**Christina R. Ghaly, M.D.**  
Deputy Director, Strategy and Operations

On January 14, 2014, the Board instructed the Director of the Department of Health Services (DHS) to submit quarterly reports to the Board on Housing for Health (HFH) permanent supportive housing outcomes including funds, costs, number and composition of clients housed; integrated health, mental health, substance use disorder and benefits establishment results; utilization rate and duration of housing subsidies; number of clients transitioning off of housing subsidies; and characteristics of housing units secured.

**BACKGROUND**

In November 2012, DHS established the HFH division to expand access to supportive housing for DHS patients who are homeless and who have complex medical and behavioral health conditions and/or are high utilizers of DHS services.

HFH utilizes a full range of community-based housing options, including non-profit owned supportive housing, affordable housing, and private market housing. Tenants receive federal rental subsidies such as Section 8 Project Based or Tenant Based Vouchers or a local rental subsidy through the Flexible Housing Subsidy Pool (FHSP). All individuals who are housed through HFH programs are assigned to a homeless services provider to receive Intensive Case Management Services (ICMS). These services include outreach and engagement; case management with on-going monitoring and follow-up; linkage to health, mental health, and substance use disorder services; assistance with benefits establishment; assistance with life skills, job skills, and educational and volunteer opportunities; crisis intervention, etc. ICMS providers provide "whatever it takes" wraparound services to assist clients in regaining stability and improved health.

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Fax: (213) 481-0503

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*To ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.*

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Each Supervisor  
February 8, 2016  
Page 2

**QUARTERLY REPORT**

Please find attached the quarterly report in dashboard format. If you have any questions, please contact me or Mark Ghaly, M.D., Deputy Director of Community Health, at (213) 240-7702.

MHK:mg

Attachment

cc: Chief Executive Office  
County Counsel  
Executive Office, Board of Supervisors

# HOUSING FOR HEALTH

Quarterly Report October-December 2015



Health Services  
LOS ANGELES COUNTY

# GOALS

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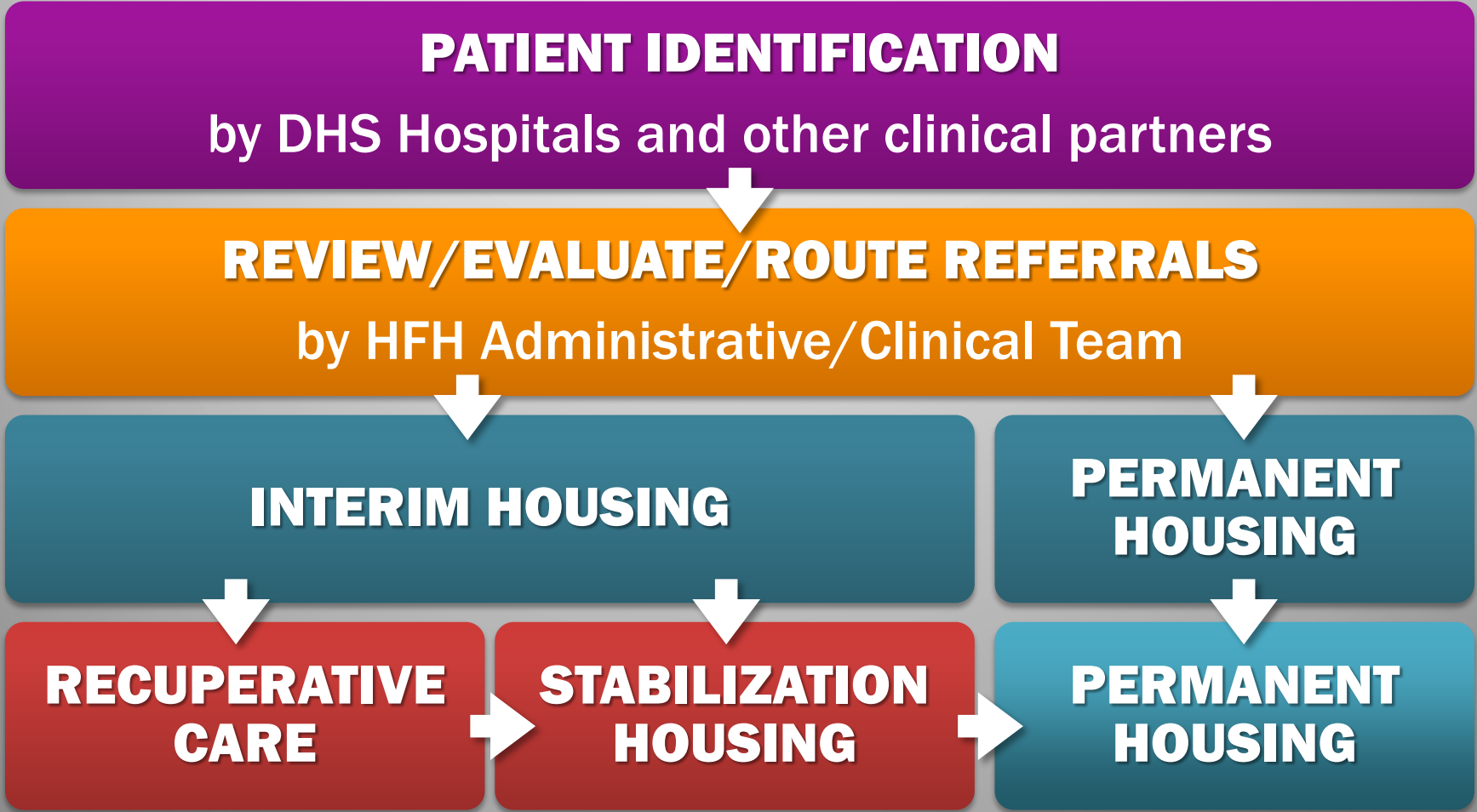
- 1. Create 10,000 units of housing**
- 2. End homelessness in LA County**
- 3. Reduce inappropriate use of expensive health care resources**
- 4. Improve health outcomes for vulnerable populations.**

# CLIENTS HOUSED

- Housing for Health (HFH) clients are DHS patients who are homeless and who have complex medical and behavioral health conditions and are high utilizers of DHS services.



# HFH CLIENT PROCESS

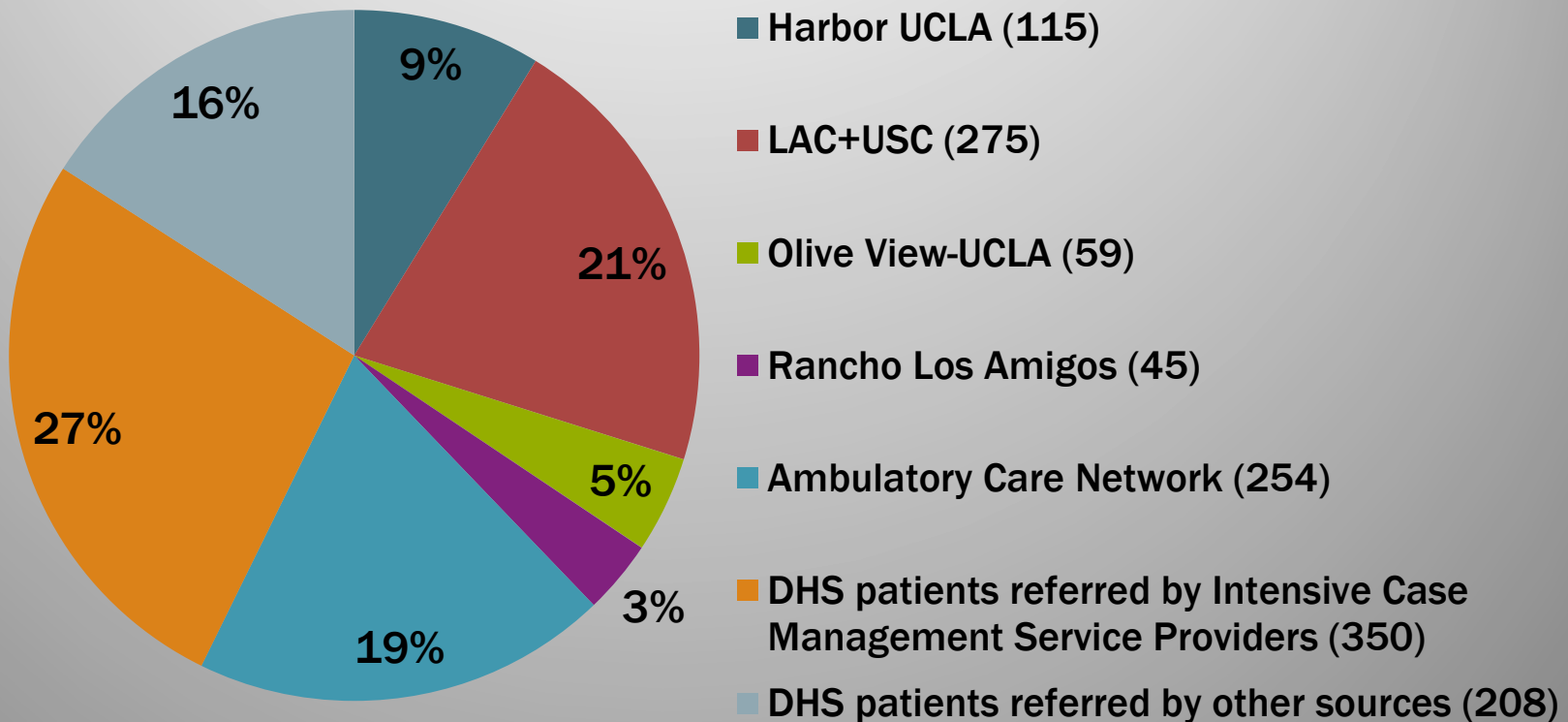


# Permanent Supportive Housing Quarterly and Program-to-Date Outcomes

<b>Total # of patients who have attained housing since HFH began in November 2012</b>	<b>1306</b>
<b>Total # of patients who are currently housed</b>	<b>1197</b>
<b>Total # of patients housed October-December 2015</b>	<b>198</b>

# WHERE DO HFH REFERRALS COME FROM?

Referral Source of Clients Housed (N=1306)



# HEALTH CONDITIONS OF CLIENTS HOUSED

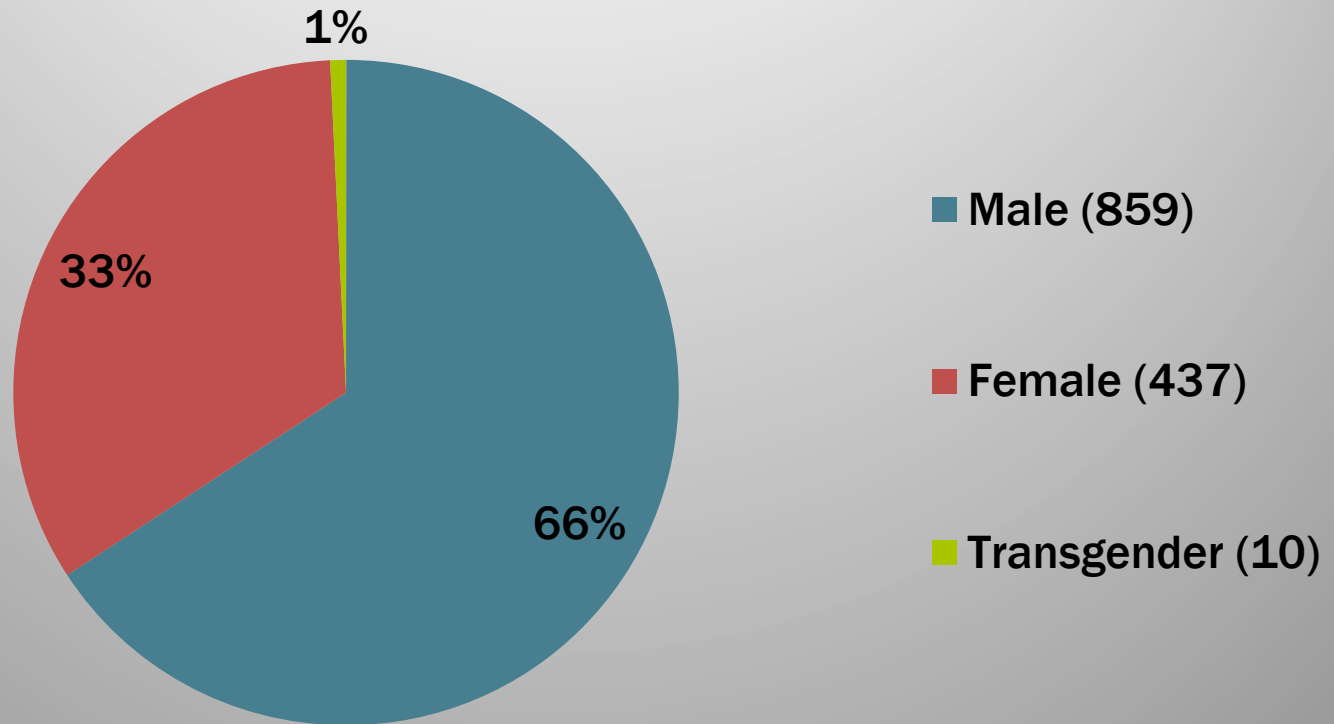
## MOST COMMON CONDITIONS:

- Hypertension
- Diabetes
- Asthma
- Heart disease
- Congestive heart failure
- Cancer
- HIV/AIDS
- Hepatitis
- Depression
- Bipolar disorder
- PTSD
- Schizophrenia

Most HFH clients have **MULTIPLE CHRONIC HEALTH CONDITIONS**

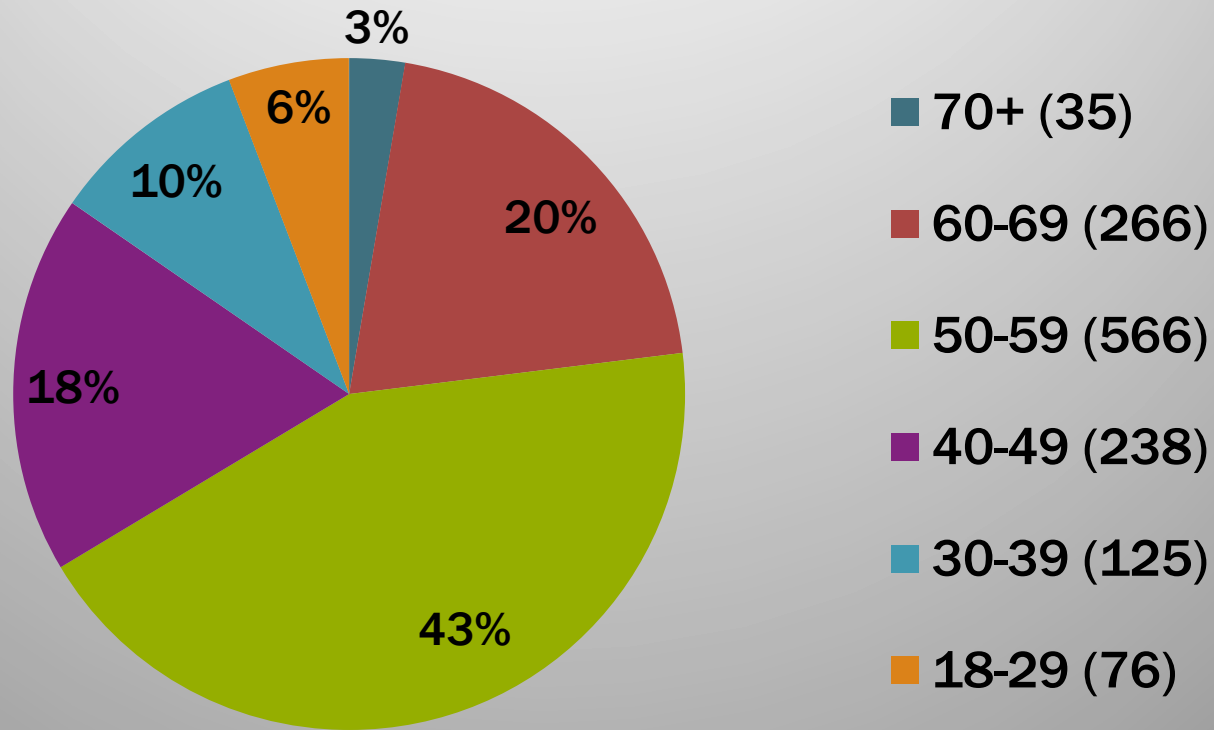
# DEMOGRAPHICS OF CLIENTS HOUSED

Gender of Clients Housed (N=1306)



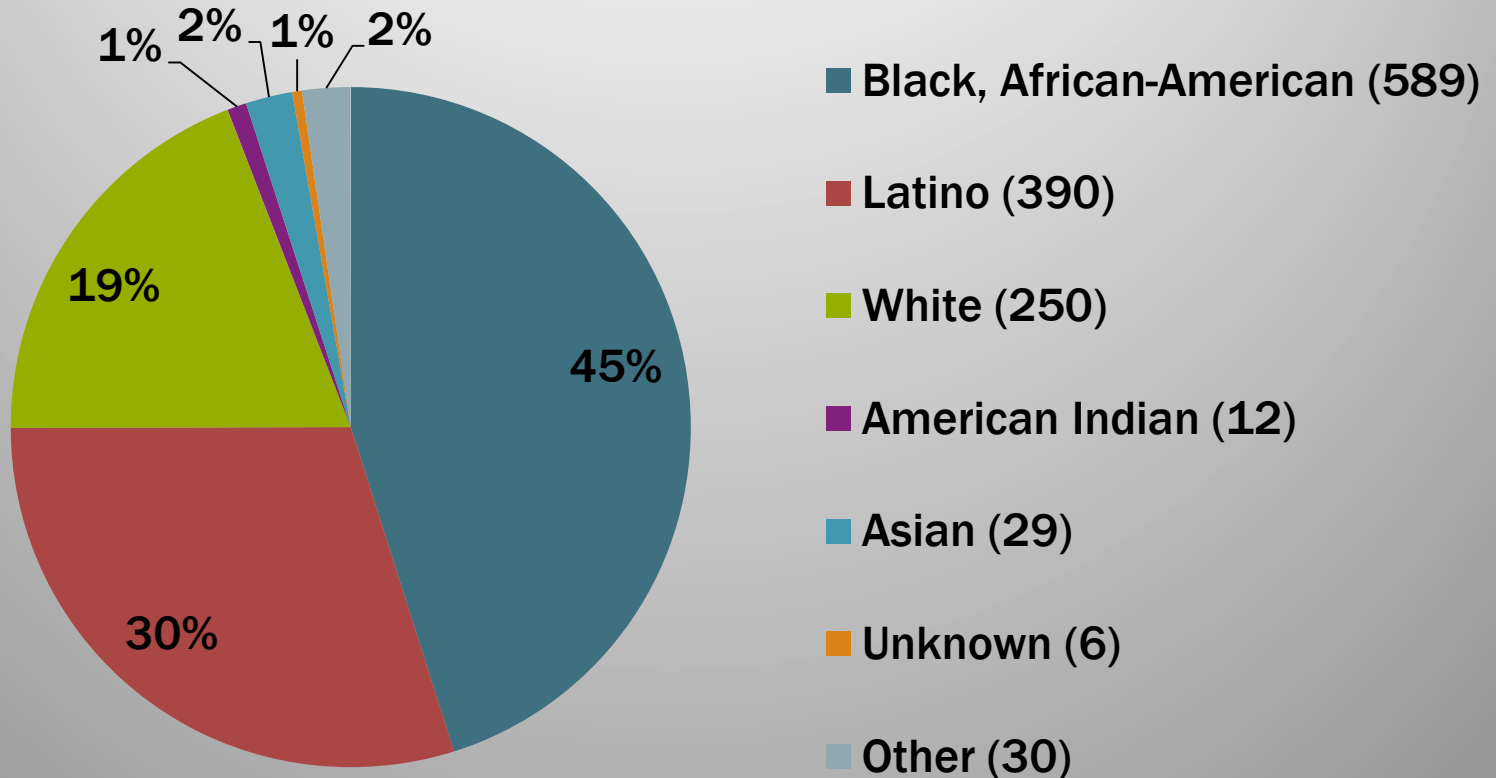
# DEMOGRAPHICS OF CLIENTS HOUSED

## Age of Clients Housed (N=1306)



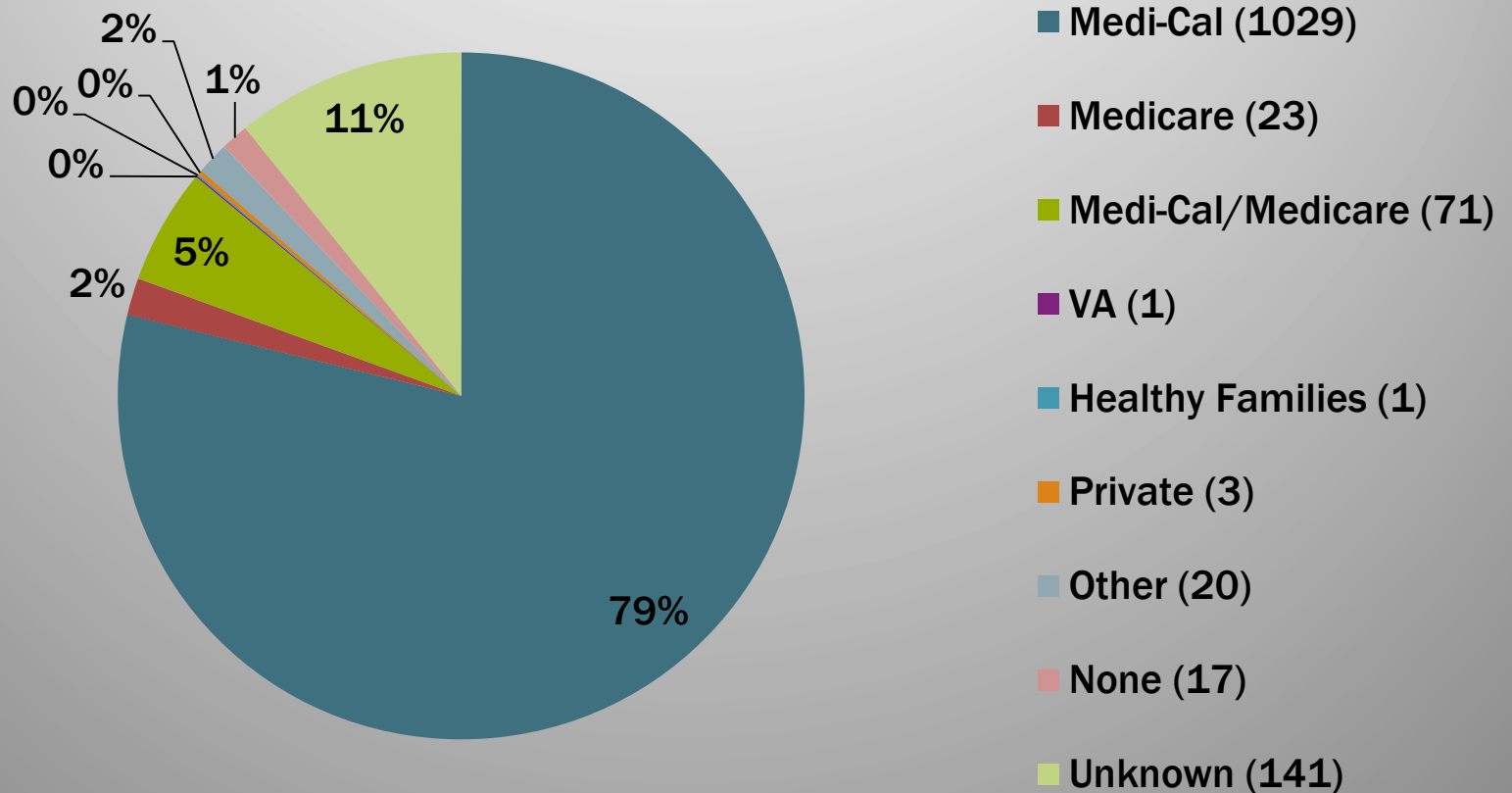
# DEMOGRAPHICS OF CLIENTS HOUSED

## Race/Ethnicity of Clients Housed (N=1306)



# CLIENT HEALTH INSURANCE

Health Insurance Type for Clients Currently Housed  
(N=1306)

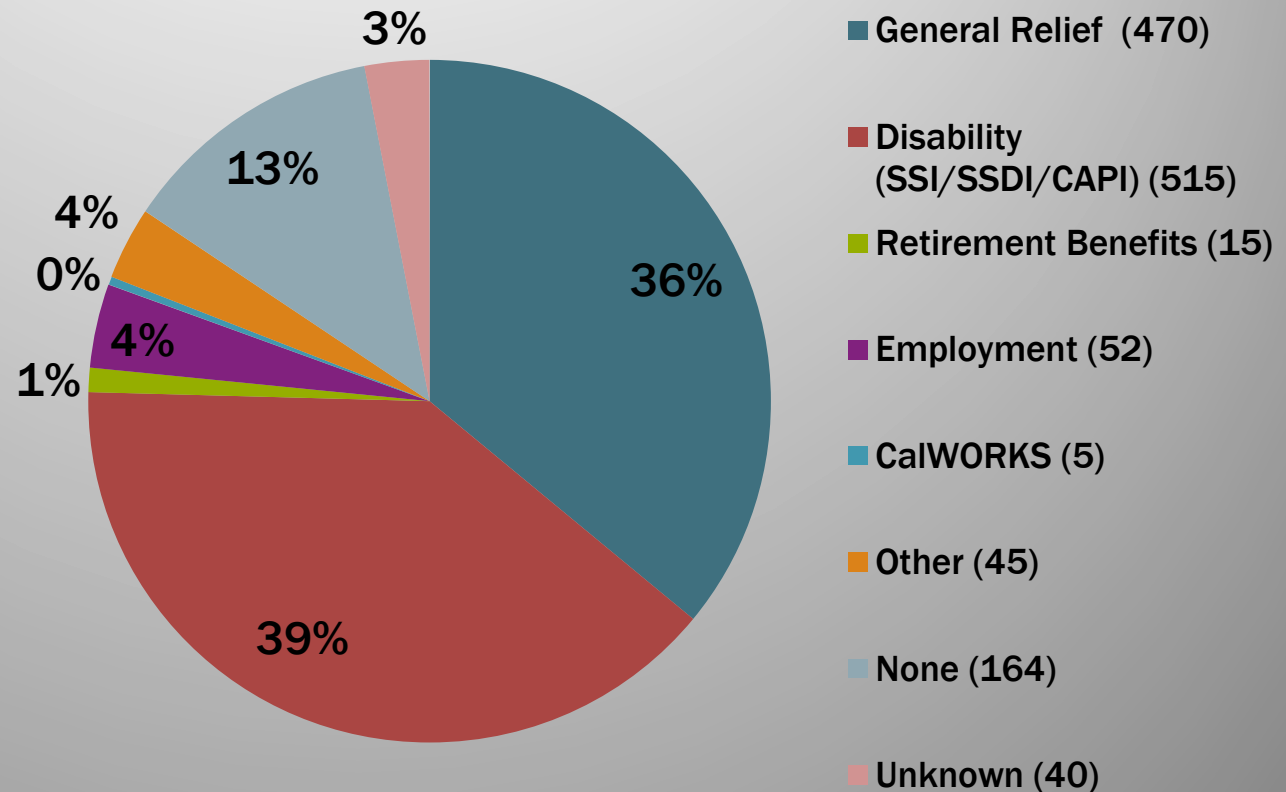




# CLIENT INCOME

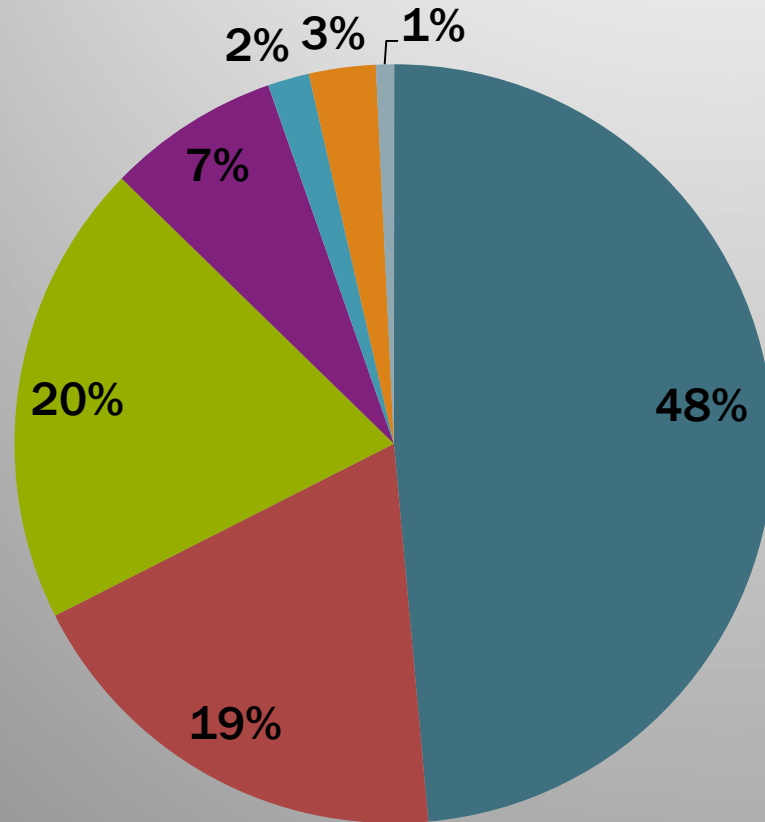
- During the client intake and assessment process, the Intensive Case Management Services (ICMS) provider obtains information on the client's income and health benefits. If the client appears to be eligible for a benefit they are not currently receiving, the ICMS provider will assist them to obtain any necessary documents and will complete and track applications for DPSS Services (CalFresh, Medi-Cal, GR, CalWORKs, and IHSS) and SSI.

## Income of Clients Housed (N=1306)



# TYPE OF HOUSING SUBSIDY

Subsidy Type for Clients Housed (N=1306)



- Flexible Housing Subsidy Pool (634)
- Housing Authority of the City of Los Angeles Tenant Based Voucher (248)
- Housing Authority of the City of Los Angeles Project Based Voucher (258)
- Housing Authority of the County of Los Angeles (96)
- Los Angeles Homeless Services Authority Subsidy (23)
- Shelter + Care (37)
- Other (10)

# INTENSIVE CASE MANAGEMENT

---

- **Every client** connected to services.
- **Individualized service** planning and linkages to health, mental health, and substance use disorder services.
- **Help clients retain** housing and reach health and wellbeing goals.
- **Services provided by** on-site staff or mobile teams.

# HOUSING STATUS AND RETENTION

---

## Homeless Status

- The average length of time that patients experienced homelessness was 4 years and 2 months and the median length of time was 2 years.
- The majority of HFH clients were chronically homeless (84%), which means they were homeless for more than one year or experienced four or more episodes of homelessness in the last three years.

## Housing retention rate

- 97% of tenants retained housing (remained in unit or exited to other permanent housing) after 12 months.

## Exits from housing this quarter

- Twenty-eight (28) patients exited housing this quarter. Thirteen (13) passed away, one (1) was incarcerated, seven (7) voluntarily surrendered their unit, two (2) abandoned their unit, one (1) was evicted and four (4) moved to another independent living situation or moved in with friends.

# **EFFORTS TO IMPROVE COUNTY SERVICE INTEGRATION**

---

- **DHS Housing for Health (HFH) coordinates the Single Adult Model (SAM) program, a collaboration between DHS, DPH, DMH, DPSS, and the CDC to provide housing to high utilizing homeless GR recipients. A goal of the program is to identify opportunities for increased collaboration in the provision of services and benefits to homeless individuals across the County.**
- **DMH has an ongoing investment in the FHSP in order to provide supportive housing and move-in assistance to DMH clients.**
- **HFH collaborates with DMH to establish a process for enhanced referrals and linkages between the Star Clinic and DMH service providers for care coordination between DHS and DMH clinicians for clients receiving services from both departments.**

# **EFFORTS TO IMPROVE COUNTY SERVICE INTEGRATION**

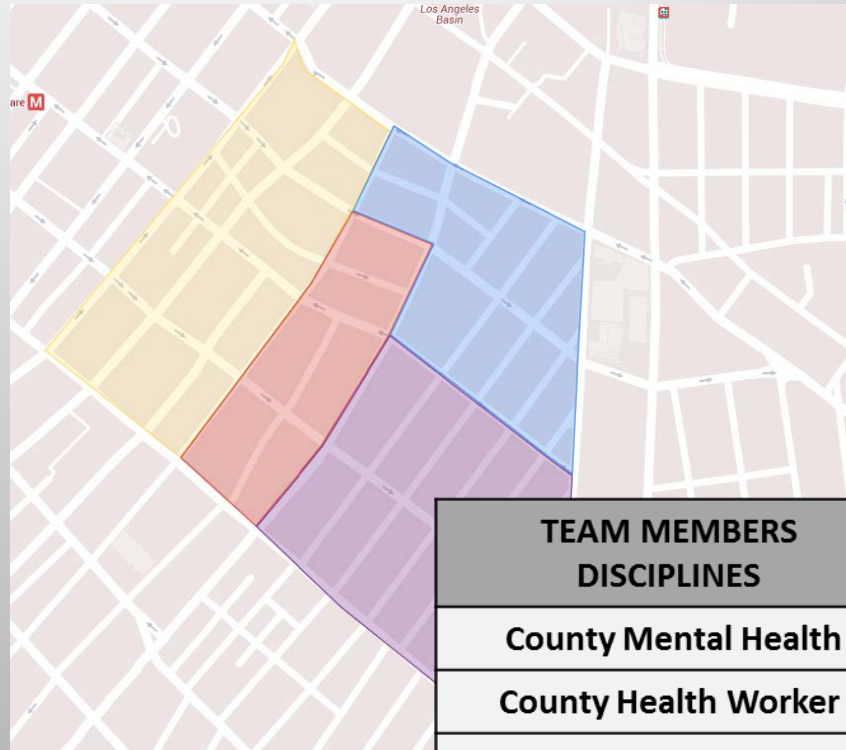
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**HFH leads or supports the following diversion and reentry related efforts:**

- **Breaking Barriers-a partnership with the Probation Department to provide rapid rehousing and employment services to homeless probationers**
- **MIST-an effort to provide supportive housing as an alternative to custody for homeless inmates who are charged with a misdemeanor and deemed incompetent to stand trial**
- **Sheriff's Department Pilot-a pilot program to provide jail in-reach and permanent supportive housing to homeless inmates who have a physical and/or behavioral health condition.**
- **Board and Care for AB109 probationers-an initiative to provide board and care housing for medically fragile homeless AB109 probationers**

# EFFORTS TO IMPROVE COUNTY SERVICE INTEGRATION

- In December, HFH launched C3, or County + City + Community, the Skid Row street-based outreach and engagement team
- Four multidisciplinary teams (with staff from DHS, DMH, DPH, and LAHSA) will be providing outreach and engagement to each quadrant of Skid Row five days a week
- The goal of C3 is to reduce street homelessness in the area by 25% each year for the next four years



TEAM MEMBERS DISCIPLINES	STAFF
County Mental Health	1 Staff
County Health Worker	1 Staff
County Substance Abuse	1 Staff
LAHSA ERT	1 Staff
AmeriCorps Members	2 Staff
<b>TOTAL</b>	<b>6 staff per Team</b>

# PERMANENT SUPPORTIVE HOUSING FUNDING

---

- The sources of funds for the Property Related Tenant Services (PRTS) FHSP work order is DHS County General Fund dollars. The estimated cost for Fiscal Year 2015-16 is \$9.3 million.
- The source of funds for contracted Intensive Case Management Services (ICMS) in permanent supportive housing is DHS County General Fund dollars. The estimated cost for contracted ICMS in permanent supportive housing in Fiscal Year 2015-16 is \$7.9 million.
- The source of funds for the Property Related Tenant Services (PRTS) work order to operate the South Los Angeles Supportive Housing Program (a County/City initiative that provides 56 units of housing to DHS patients who are homeless) is DHS County General Fund dollars. The estimated cost for Fiscal Year 2015-16 is \$200,000.



# FLEXIBLE HOUSING SUBSIDY POOL



# FHSP PARTNERS



Los Angeles County  
Dept. of Health  
Services



503(c) nonprofit  
coordinating community-  
based partner



Property owners  
throughout Los  
Angeles County



LADHS Supportive  
Housing Rental  
Subsidy Program

# FHSP Quarterly and Program-to-Date Outcomes

Move-ins October-December 2015	97
Total move-ins to date	634
Units secured* October-December 2015	112
Total units secured* to date	681

\*Refers to the number of units that have been secured under a rental subsidy agreement with the property owner and includes occupied and soon to be occupied units. Units will be made available to DHS patients as well as other participants of the FHSP.

# CHARACTERISTICS OF FHSP HOUSING UNITS

---

- Units in the HFH portfolio range in size and type across the County from large apartment buildings to smaller single family homes and are appropriate to household size and composition.
- In the most recent quarter, Brilliant Corners secured an additional **112** units in Los Angeles County for the Flexible Housing Subsidy Pool. Of the **112** units, **33** are studios, **71** are one-bedrooms, **1** is a three-bedroom, **1** is a four-bedroom and **6** are rooms in Residential Care Facilities.
- Brilliant Corners engages with private landlords, local developers, and local property management agencies, in an effort to provide a diverse pool of units to the program. From a wheelchair accessible studio unit located on the ground floor of a small 2 story apartment complex, to a 1-bedroom unit located in a 45 unit complex, Brilliant Corners is able to provide patients with a unit that offers the greatest chances of long-term housing success.

# FEATURED HOUSING SITE AND PATIENT STORY



Health Services  
LOS ANGELES COUNTY

# THE SIX

Starting in World War II, soldiers would tell each other, “I got your six” as a way to say “I’ve got your back.” Whereas your twelve is right in front of you, your six is directly behind you and your most vulnerable spot.

The Six Apartments opened on September 11, 2015 with 52 units, offices for case management and social services as well as multiple therapeutic and rehabilitative spaces. The courtyard, rooftop garden and community space serve as social hubs.

True to its name, the building offers help to its residents at their most vulnerable and offers them housing and support when they need it the most.

Located in the Westlake neighborhood near MacArthur Park, the Skid Row Housing Trust-developed building was designed by Brooks + Scarpa Architects.



# FEATURED CLIENT SUCCESS STORY

Living with end-stage renal disease, severe scoliosis of the spine, hypertension and muscular atrophy allowed Miguel\* to stay at a medical facility, but he could not leave his blind mother behind on the streets alone. For months, Gloria\* slept under her son's hospital bed and hid in a small closet in his room until they were referred to Housing for Health.

The mother and son had been living in El Monte until Miguel's health deteriorated to the point he could no longer work and support the family. They lost their home and were on the streets for more than a year before their time at the medical facility.

Their health and homelessness left them feeling very vulnerable and wary to the prospect of receiving assistance. When they were offered Intensive Case Management Services from GettLOVE, they would whisper to each other before answering basic assessment questions. When GettLOVE's Program Manager Keegan Hornbeck informed them that their new home would be supplied with new furniture, the family was skeptical and continued to spend almost all of their money on a storage unit that housed the only things they owned.

Finding the family housing was a unique challenge for the GettLOVE team. The ideal unit would have to be completely accessible for Miguel's wheelchair and have an open and easily-navigated layout for Gloria's needs. The team found that locating a unit – even on the ground floor—that does not require someone to climb at least a few stairs is incredibly rare. Over the course of months, GettLOVE's Housing Specialist reached out to property owners and advocated for the family until they found their home.

The large ground-level unit has dual entries that allow wheelchair access and have a handrail for Gloria. The unit has its own washer and dryer, meaning the family would not have to transport their clothing to and from a laundromat. GettLOVE provided assistance with the family's move – including emptying out their storage unit.

At the medical facility, Miguel would share his diet-specific meals with his mother at the expense of receiving the nutrients he needed for his disease. Now, in their own kitchen, they are able to plan and prepare their own meals. They have both reported greater adherence to their medical treatment due to having stable housing. Laughter has replaced their quiet whispers. When handed the keys, to their new home, Gloria stated, "I don't know if this is just a really good dream or if I have been having a nightmare for the last five years and I am just now waking up".

\*Names have been changed



**Health Services**  
LOS ANGELES COUNTY

April 29, 2016

**Los Angeles County  
Board of Supervisors**

**Hilda L. Solis**  
First District

**Mark Ridley-Thomas**  
Second District

**Sheila Kuehl**  
Third District

**Don Knabe**  
Fourth District

**Michael D. Antonovich**  
Fifth District

**TO:** Supervisor Hilda Solis, Chair  
Supervisor Mark Ridley-Thomas  
Supervisor Sheila Kuehl  
Supervisor Don Knabe  
Supervisor Michael D. Antonovich

**FROM:** Mitchell H. Katz, M.D.  
Director

**SUBJECT: HOUSING FOR HEALTH QUARTERLY REPORT**

**Mitchell H. Katz, M.D.**  
Director

**Hal F. Yee, Jr., M.D., Ph.D.**  
Chief Medical Officer

**Christina R. Ghaly, M.D.**  
Chief Operations Officer

On January 14, 2014, the Board instructed the Director of the Department of Health Services (DHS) to submit quarterly reports to the Board on Housing for Health (HFH) permanent supportive housing outcomes including funds, costs, number and composition of clients housed; integrated health, mental health, substance use disorder and benefits establishment results; utilization rate and duration of housing subsidies; number of clients transitioning off of housing subsidies; and characteristics of housing units secured.

**BACKGROUND**

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*To ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.*

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Each Supervisor  
April 29, 2016  
Page 2

## **NEW EXECUTED WORK ORDER**

Pursuant to the Supportive Housing Services Master Agreement (SHSMA) approved by the Board on June 19, 2012, this is to advise that DHS has executed Work Orders to the SHSMA with Downtown Women's Center to provide intensive case management services in supportive housing to clients who are homeless in the Second Supervisorial District, especially women, and with Mental Health America of Los Angeles, PATH, Special Service for Groups, St. Joseph's Center, LAMP, L.A. Family Housing, and Union Station to provide ICMS in rapid rehousing. County Counsel has reviewed and approved the Work Orders.

## **SUPPORTIVE HOUSING SERVICES MASTER AGREEMENT EXTENSION**

In order to meet the goals of the Board's Countywide Strategic Initiatives (Homeless Initiative – Affordable Housing), DHS has secured the aforementioned SHSMA with ICMS providers and secured commitments from housing developers that are preparing more housing units Countywide for use by DHS clients through SHSMA Property Related Tenant Services (PRTS) agreements.

Accordingly, DHS intends to exercise its delegated authority to execute a five-year extension of the SHSMA for the period July 1, 2017 to June 30, 2022, on or after July 1, 2016. The extension of existing SHSMA ICMS and PRTS work orders and execution of new work orders, subject to review and approval of County Counsel, will enable DHS to continue partnering with ICMS and PRTS contractors to leverage their expertise in the implementation of new housing programs including Office of Diversion and Reentry Housing and County Homeless Initiative programs.

## **QUARTERLY REPORT**

Please find the attached quarterly report in dashboard format. If you have any questions, please contact me or Mark Ghaly, M.D., Deputy Director of Community Health, at (213) 240-7702.

MHK:mg

cc: Chief Executive Office  
County Counsel  
Executive Office, Board of Supervisors

Attachment

# HOUSING FOR HEALTH

Quarterly Report January-March 2016



Health Services  
LOS ANGELES COUNTY

# GOALS

---

- 1. Create 10,000 units of housing**
- 2. End homelessness in LA County**
- 3. Reduce inappropriate use of expensive health care resources**
- 4. Improve health outcomes for vulnerable populations.**

# CLIENTS HOUSED

- Housing for Health provides housing and supportive services to homeless clients with physical and/or behavioral health conditions, high utilizers of county services, and other vulnerable populations.

# HFH CLIENT PROCESS

## CLIENT IDENTIFICATION

by DHS facilities, County departments, CES, and other partners

## REVIEW/EVALUATE/ROUTE REFERRALS

by HFH Administrative/Clinical Team

## INTERIM HOUSING

RECUPERATIVE  
CARE

STABILIZATION  
HOUSING

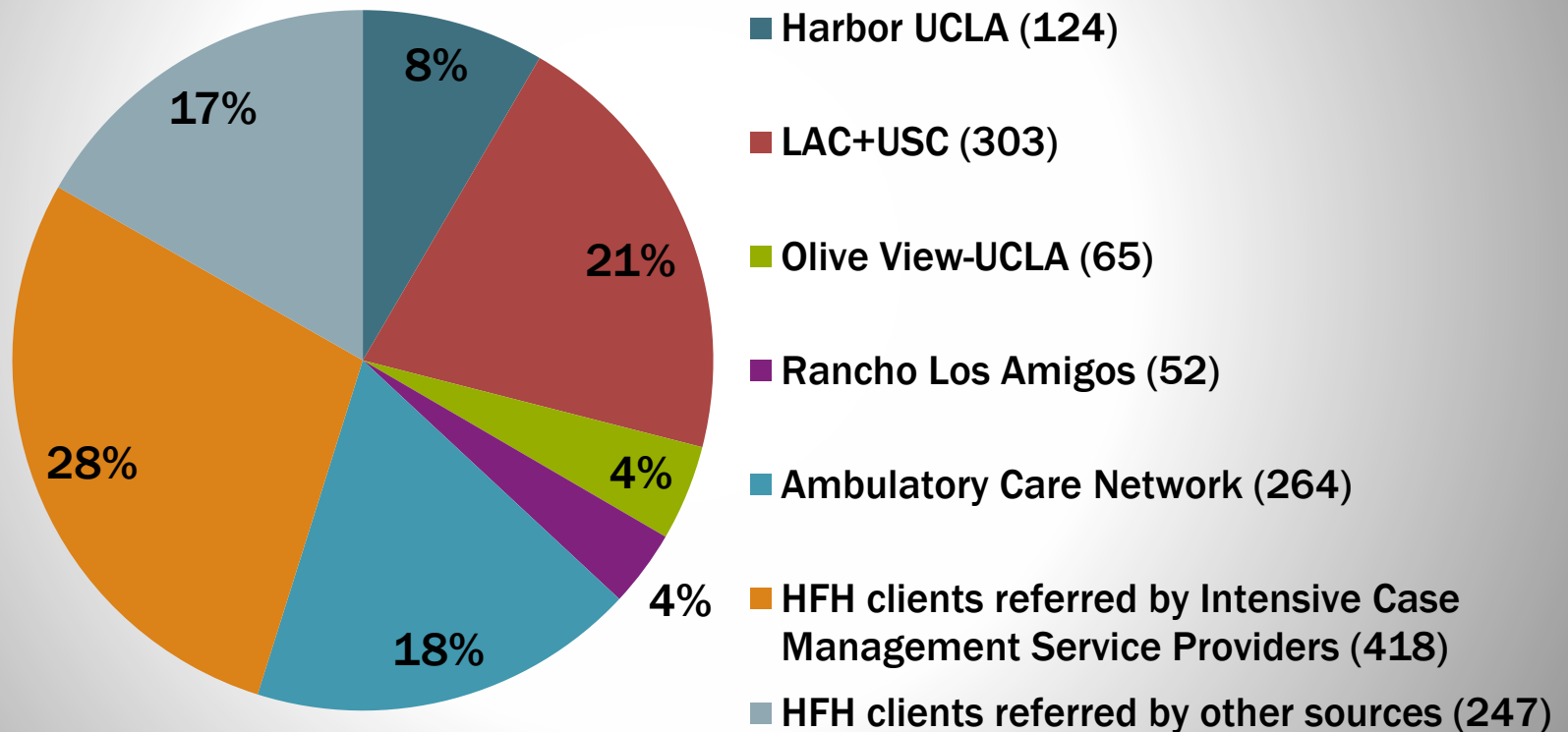
PERMANENT  
HOUSING

# Permanent Supportive Housing Quarterly and Program-to-Date Outcomes

<b>Total # of clients who have attained housing since HFH began in November 2012</b>	<b>1473</b>
<b>Total # of clients who are currently housed</b>	<b>1332</b>
<b>Total # of clients housed January-March 2016</b>	<b>146</b>

# WHERE DO HFH REFERRALS COME FROM?

Referral Source of Clients Housed (N=1473)



# HEALTH CONDITIONS OF CLIENTS HOUSED

## MOST COMMON CONDITIONS:

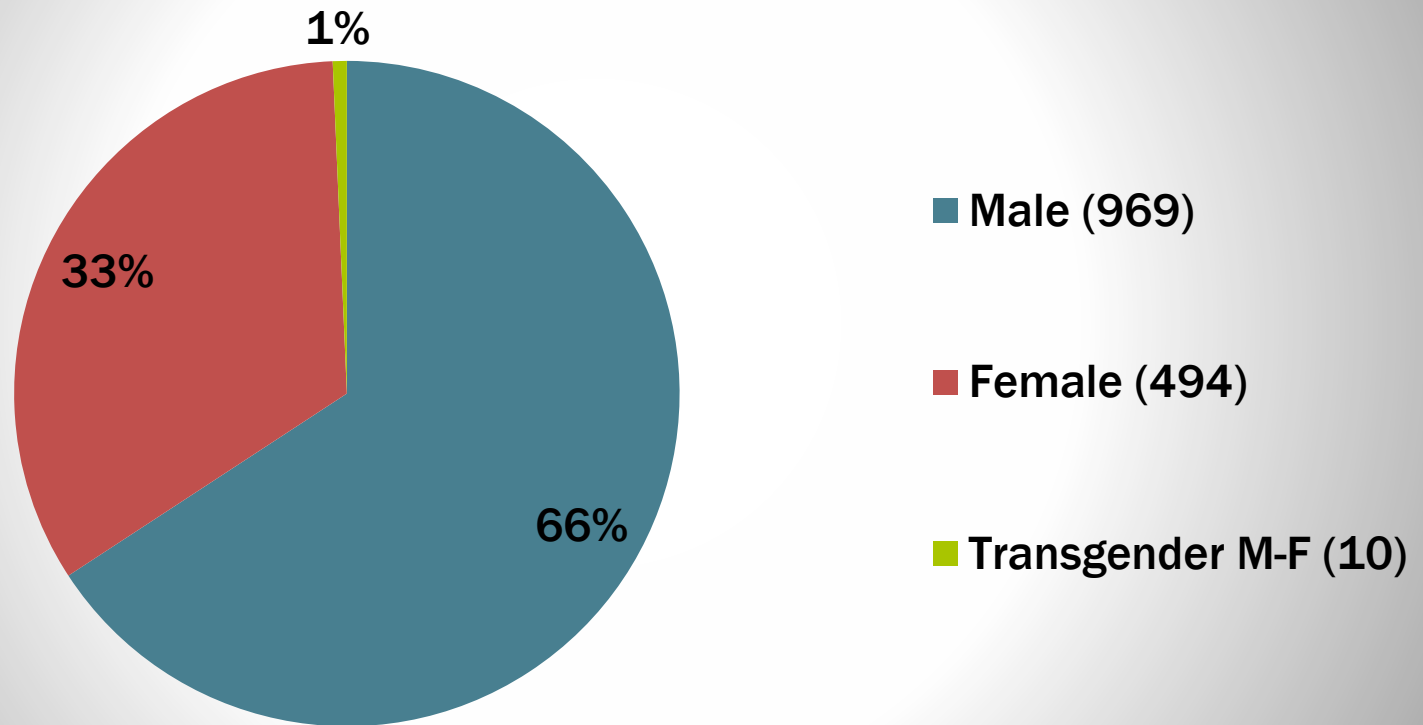
- Hypertension
- Diabetes
- Asthma
- Heart disease
- Congestive heart failure
- Cancer
- HIV/AIDS
- Hepatitis
- Depression
- Bipolar disorder
- PTSD
- Schizophrenia

Most HFH clients have **MULTIPLE CHRONIC HEALTH CONDITIONS**



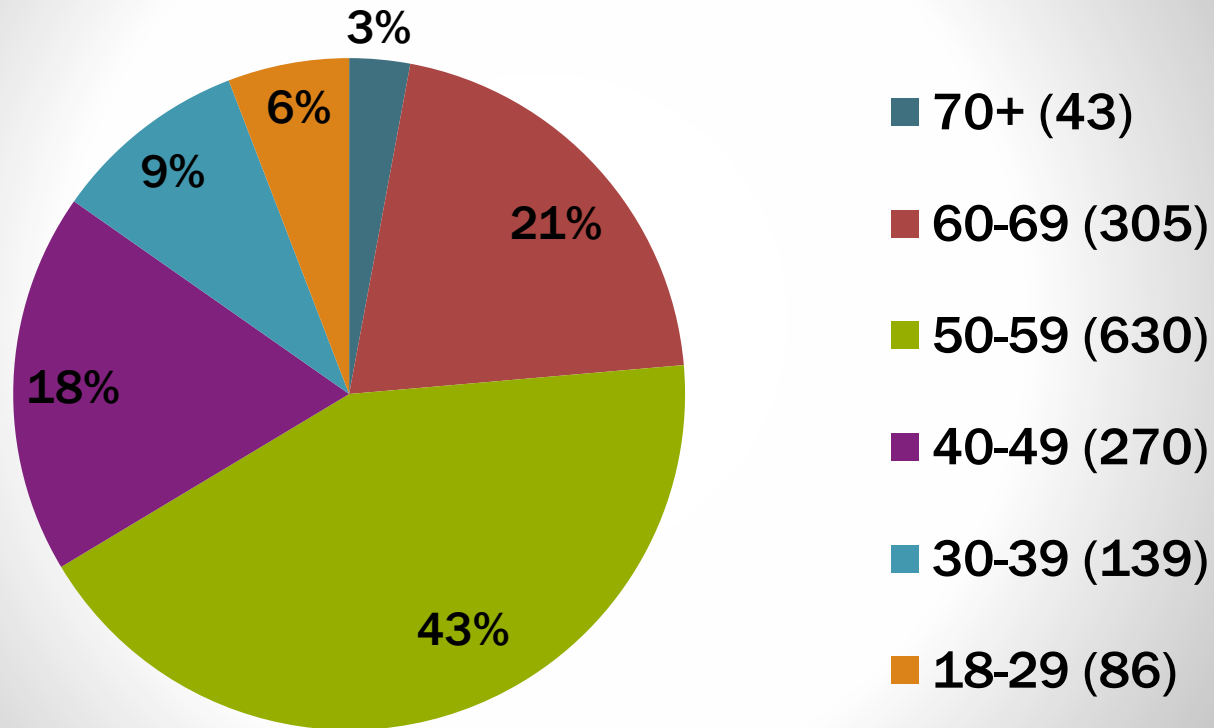
# DEMOGRAPHICS OF CLIENTS HOUSED

## Gender of Clients Housed (N=1473)



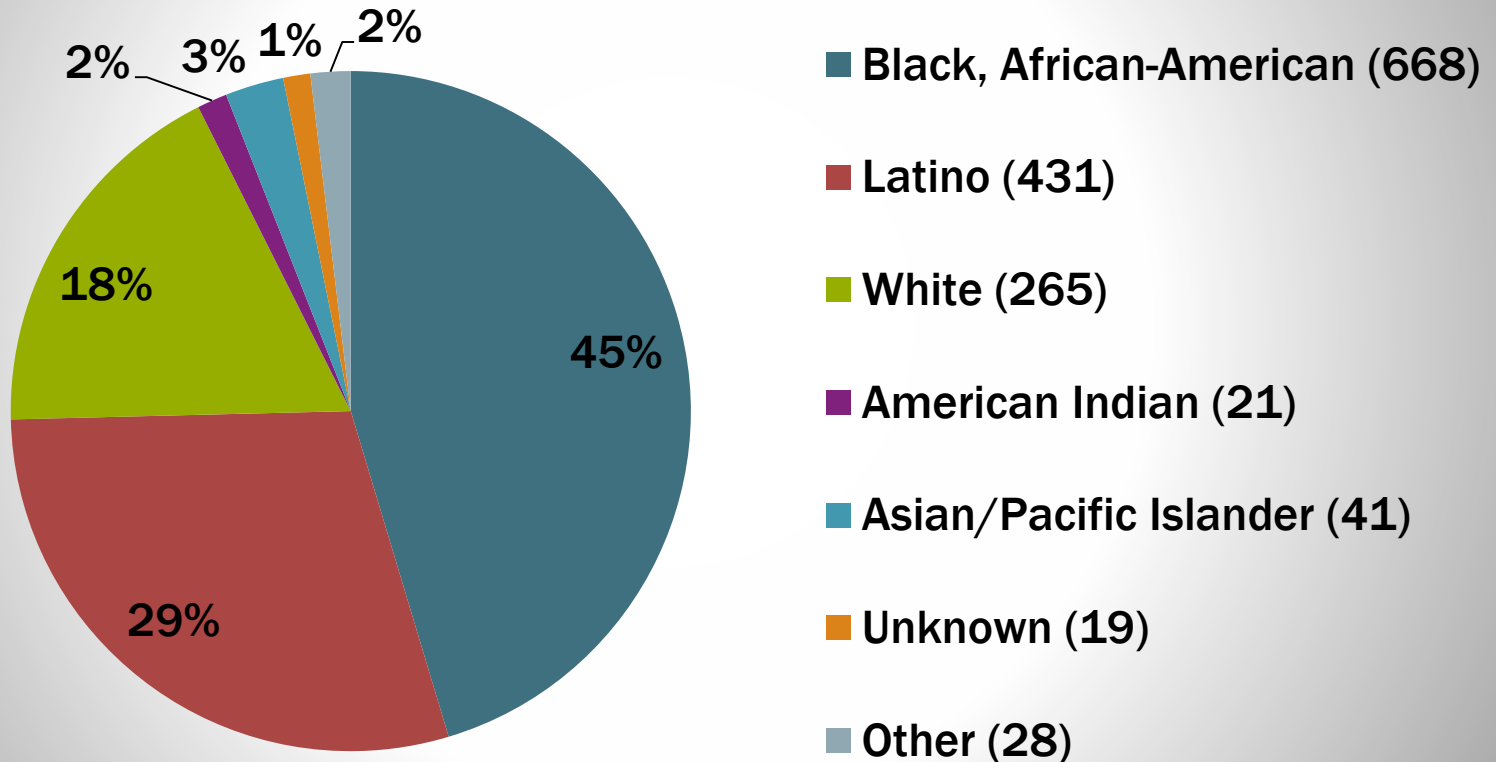
# DEMOGRAPHICS OF CLIENTS HOUSED

Age of Clients Housed (N=1473)



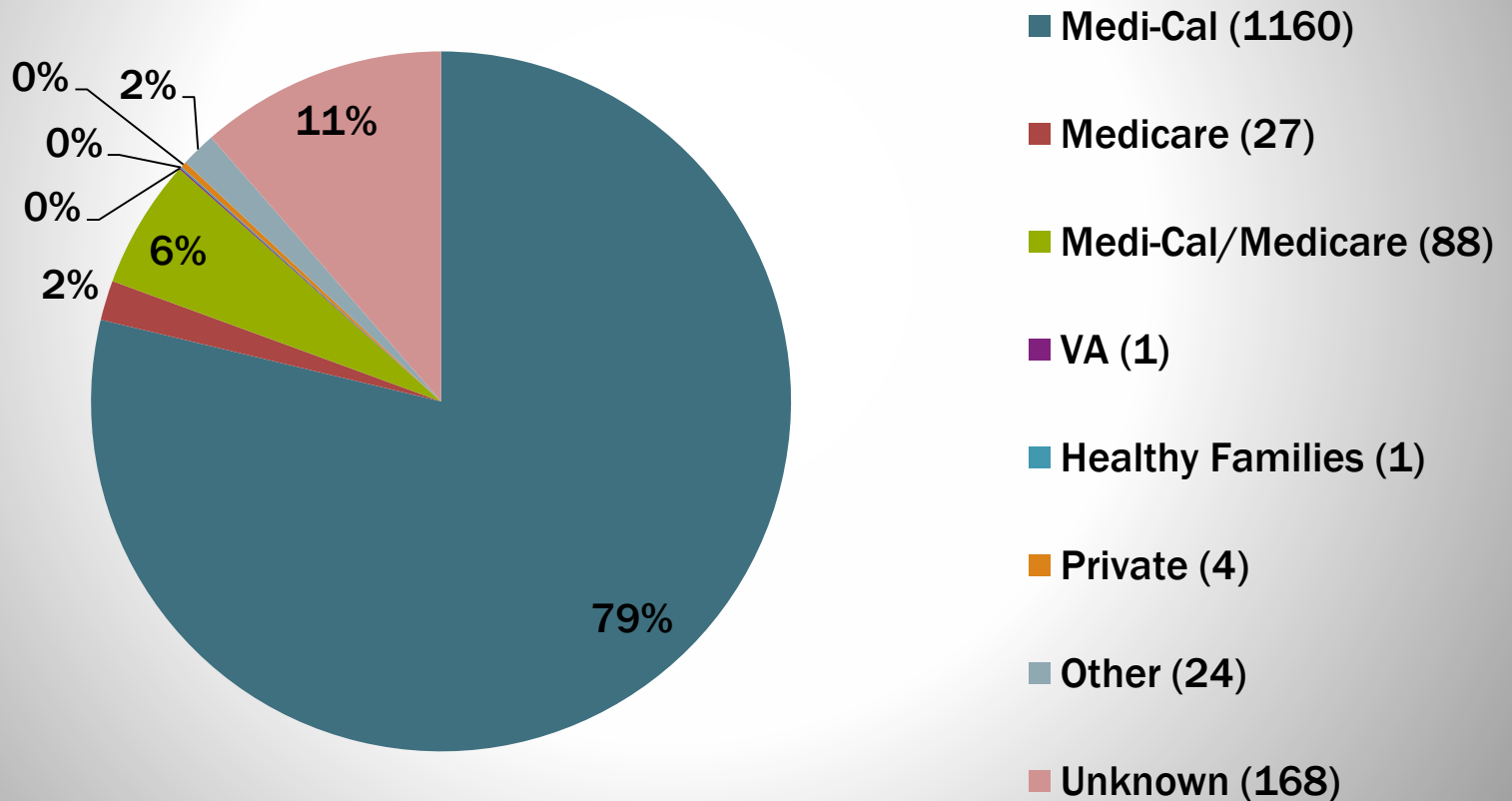
# DEMOGRAPHICS OF CLIENTS HOUSED

## Race/Ethnicity of Clients Housed (N=1473)



# CLIENT HEALTH INSURANCE

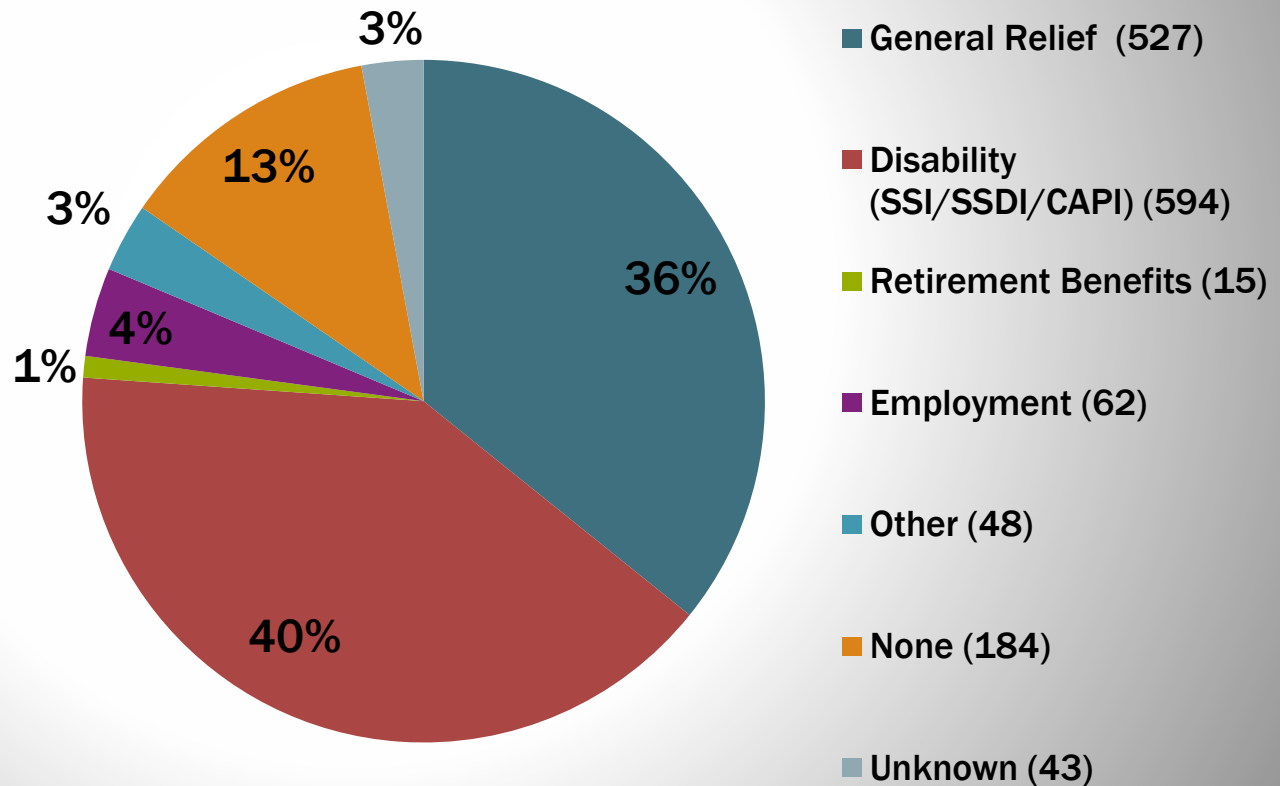
Health Insurance Type for Clients Currently Housed  
(N=1473)



# CLIENT INCOME

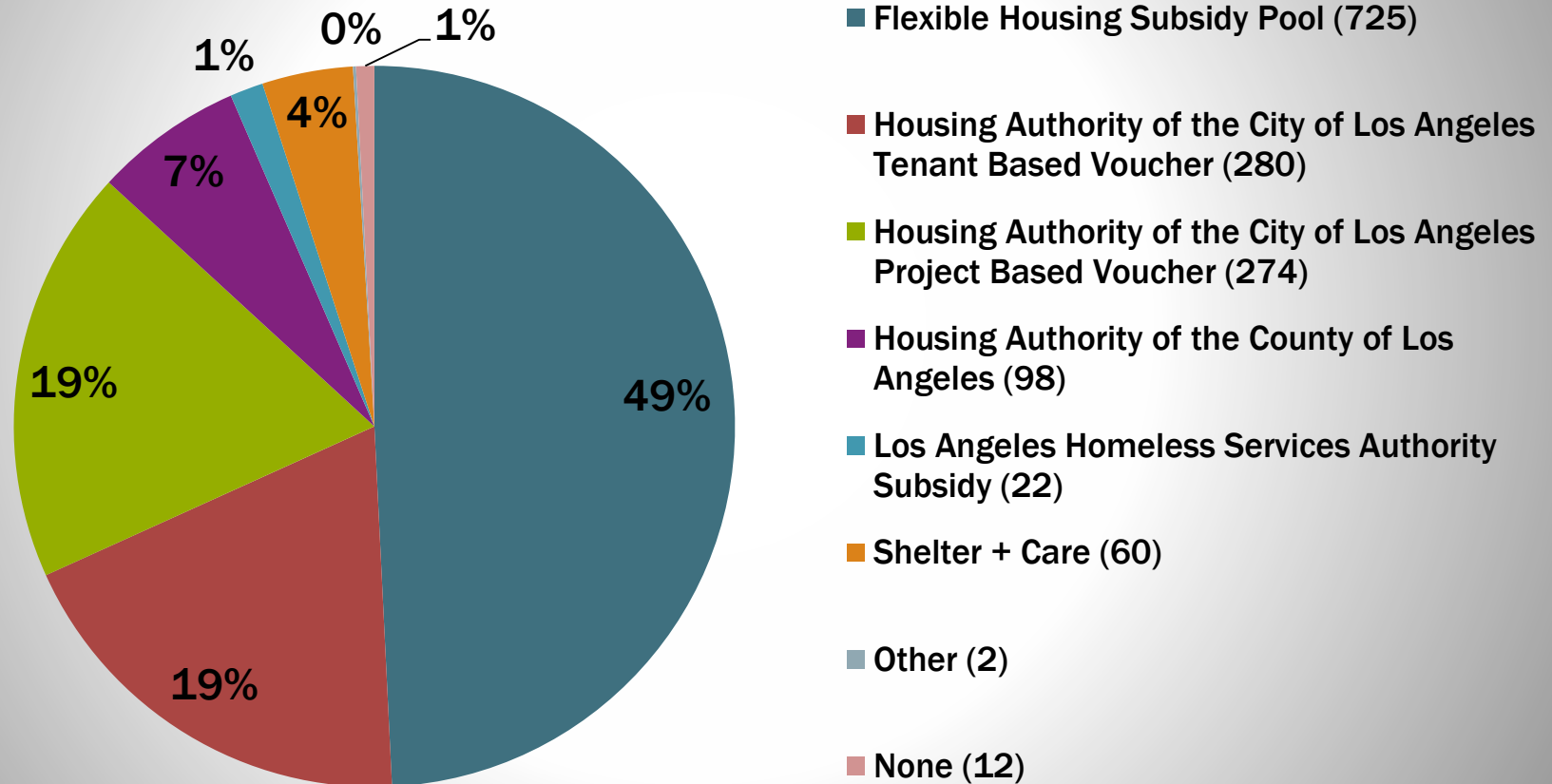
- During the client intake and assessment process, the Intensive Case Management Services (ICMS) provider obtains information on the client's income and health benefits. If the client appears to be eligible for a benefit they are not currently receiving, the ICMS provider will assist them to obtain any necessary documents and will complete and track applications for DPSS Services (CalFresh, Medi-Cal, GR, CalWORKs, and IHSS) and SSI.

## Income of Clients Housed (N=1473)



# TYPE OF HOUSING SUBSIDY

## Subsidy Type for Clients Housed (N=1473)



# INTENSIVE CASE MANAGEMENT

---

- **Every client** connected to services.
- **Individualized service** planning and linkages to health, mental health, and substance use disorder services.
- **Help clients retain** housing and reach health and wellbeing goals.
- **Services provided by** on-site staff or mobile teams.

# HOUSING STATUS AND RETENTION

---

## Homeless Status

- The average length of time that clients experienced homelessness was 4 years and 8 months and the median length of time was 3 years.
- The majority of HFH clients were chronically homeless (88%), which means they were homeless for more than one year or experienced four or more episodes of homelessness in the last three years.

## Housing retention rate

- 97% of clients retained housing (remained in unit or exited to other permanent housing) after 12 months.

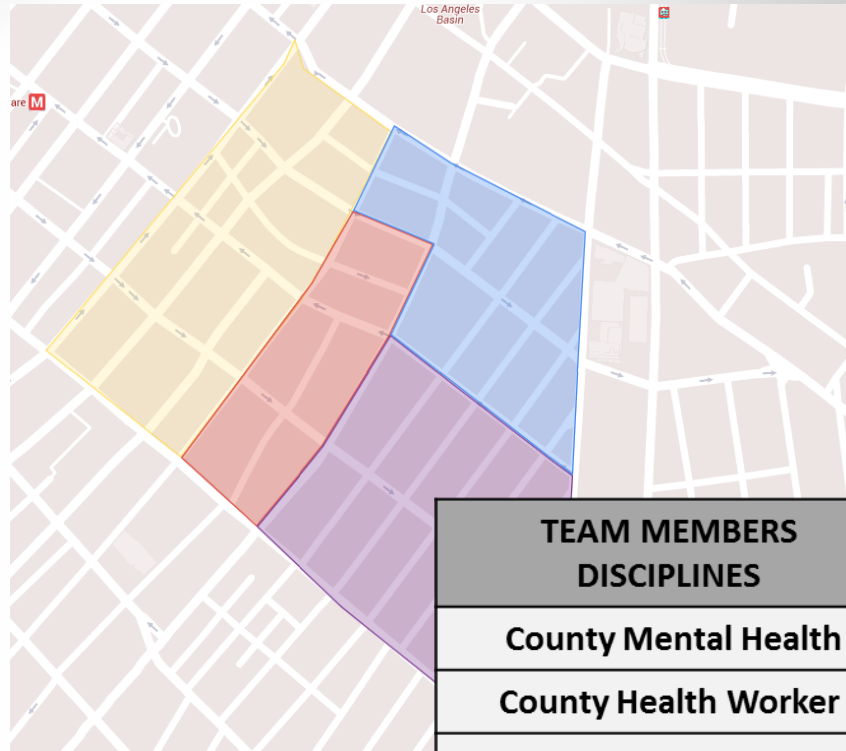
## Exits from housing this quarter

- Twenty-eight (28) clients exited housing this quarter. Ten (10) passed away, four (4) needed higher level of care, six (6) voluntarily surrendered their unit, three (3) moved into other independent living situation or moved in with family and friends, three (3) were evicted, and two (2) were incarcerated.



# EFFORTS TO IMPROVE COUNTY SERVICE INTEGRATION

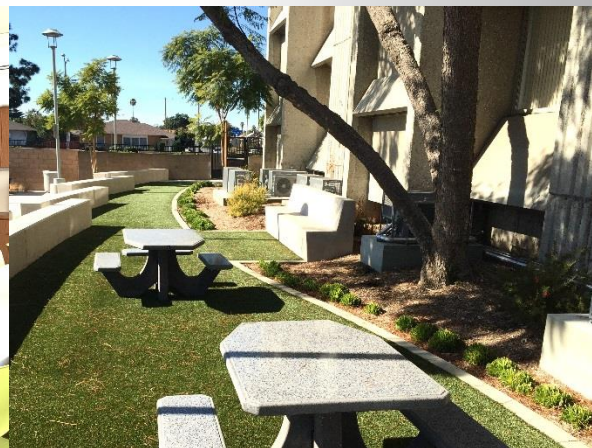
- HFH leads C3, or County + City + Community, the Skid Row street-based outreach and engagement team
- Four multidisciplinary teams (with staff from DHS, DMH, DPH, and LAHSA) will be providing outreach and engagement to each quadrant of Skid Row five days a week
- The goal of C3 is to reduce street homelessness in the area by 25% each year for the next four years



TEAM MEMBERS DISCIPLINES	STAFF
County Mental Health	1 Staff
County Health Worker	1 Staff
County Substance Abuse	1 Staff
LAHSA ERT	1 Staff
AmeriCorps Members	2 Staff
<b>TOTAL</b>	<b>6 staff per Team</b>

# MLK RECUPERATIVE CARE CENTER

- In January 2016 HFH opened the 100-bed MLK Recuperative Care Center on the campus of the Martin Luther King, Jr. Outpatient Center in South Los Angeles. Recuperative care is a program that provides interim housing combined with health monitoring for individuals who are homeless and recovering from an acute illness or injury. Clinical oversight addresses the medical needs of these patients whose conditions would be exacerbated by living on the street or in a shelter. For homeless individuals with complex medical and psycho-social conditions, recovering in a stable environment with access to medical care and other supportive services is key to the successful transition into permanent supportive housing.
- DHS partners with JWCH to operate the MLK Recuperative Care Center. DHS staff provide onsite clinical services and overall program management. JWCH provides a range of operational and intensive case management services including 24/7 health monitoring, assistance with activities of daily living, linkage to health, mental health, and substance use disorder services, benefits establishment, group and social activities, transportation, and coordination with permanent housing providers to support the transition of clients to permanent housing.



# PERMANENT SUPPORTIVE HOUSING FUNDING

---

- The sources of funds for the Property Related Tenant Services (PRTS) FHSP work order is DHS County General Fund dollars. The estimated cost for Fiscal Year 2015-16 is \$9.3 million.
- The source of funds for contracted Intensive Case Management Services (ICMS) in permanent supportive housing is DHS County General Fund dollars. The estimated cost for contracted ICMS in permanent supportive housing in Fiscal Year 2015-16 is \$7.9 million.
- The source of funds for the Property Related Tenant Services (PRTS) work order to operate the South Los Angeles Supportive Housing Program (a County/City initiative that provides 56 units of housing to DHS patients who are homeless) is DHS County General Fund dollars. The estimated cost for Fiscal Year 2015-16 is \$200,000.

# FLEXIBLE HOUSING SUBSIDY POOL



# FHSP PARTNERS



Los Angeles County  
Dept. of Health  
Services



503(c) nonprofit  
coordinating community-  
based partner



Property owners  
throughout Los  
Angeles County



LAC-DHS Supportive  
Housing Rental  
Subsidy Program

# FHSP Quarterly and Program-to-Date Outcomes

Move-ins January-March 2016	106
Total move-ins to date	725
Units secured* January-March 2016	80
Total units secured* to date	761

**\*Refers to the number of units that have been secured under a rental subsidy agreement with the property owner and includes occupied and soon to be occupied units. Units will be made available to DHS patients as well as other participants of the FHSP.**

# CHARACTERISTICS OF FHSP HOUSING UNITS

---

- Units in the HFH portfolio range in size and type across the County from large apartment buildings to smaller single family homes and are appropriate to household size and composition.
- In the most recent quarter, Brilliant Corners secured an additional 80 units in Los Angeles County for the Flexible Housing Subsidy Pool. Of the 80 units, 15 are studios, 42 are one-bedrooms, 7 are three-bedrooms, and 16 are rooms in Residential Care Facilities.
- Brilliant Corners engages with private landlords, local developers, and local property management agencies, in an effort to provide a diverse pool of units to the program. From a wheelchair accessible studio unit located on the ground floor of a small 2 story apartment complex, to a 1-bedroom unit located in a 45 unit complex, Brilliant Corners is able to provide patients with a unit that offers the greatest chances of long-term housing success.

# FEATURED HOUSING SITE AND PATIENT STORY



Health Services  
LOS ANGELES COUNTY



# THE GATEWAY

A permanent supportive housing development for those transitioning out of homelessness might seem like an unwelcome addition in the upscale Del Rey neighborhood. In fact, it was quite the opposite. The neighborhood council supported the project and immediate neighbors have provided nothing but positive feedback about the design of the building and its inclusion in the neighborhood.

Securing the land was the largest hurdle for The Gateway, a 20-unit LEED-certified building with a sprawling rooftop garden and community room developed by the Hollywood Community Housing Corporation and the Venice Community Housing Corporation. DHS Housing for Health is providing the rental subsidies and supportive services which helped make the project a reality. Intensive Case Management Services are provided to Gateway residents by the nonprofit St. Joseph's Center.

It's important to affordable housing developers, service providers, and community members to explore ways to ensure neighborhoods remain diverse and accessible to low-income and homeless residents – and this project contributes to that vision. Bus lines, affordable restaurants, and groceries are all within walking distance of the building.



The Brooks + Scarpa Architects design features full-length windows to maximize light in each one-bedroom unit, a beautiful roof-top patio with gardening space for tenants, a large community room for group activities, a second floor public balcony, hallways open to the fresh air, and offices for service providers.

# FEATURED CLIENT SUCCESS STORY

Angela\* had been homeless for more than 25 years, roaming from corner to corner on Skid Row under a drug-induced fog. “There is nowhere in downtown I haven’t been. Some places were dark and spooky,” she said recently. “I went to some places nobody should ever go.”

After losing custody of her five children and seeing friends pass away in the streets, she decided she wanted a different life. When outreach workers approached her, Angela immediately signed up for assistance through the Coordinated Entry System and was connected to the Star Clinic for treatment of her uncontrolled diabetes and heart disease. The ability to visit a clinic with a permanent location and see the same provider introduced Angela to some stability and created the foundation for a healthier life. She credits many of her achievements to Nurse Practitioner Lynda Stack and the rest of the Star Clinic’s staff. “Since I’ve been under [their] care, my life has changed,” Angela said.

Stack referred Angela to Housing for Health and she was placed in Interim Housing. Wanting to get away from the temptations and influences of Skid Row, Angela waited a few extra months for placement at LAMP HAUS, an interim housing site near MacArthur Park. She was connected to intensive case management services and again had to turn down an opportunity for a faster permanent housing placement near her old stomping grounds. Luckily a scattered site housing placement became available and Angela signed a lease in a neighborhood where she could thrive.

Her case manager at LAMP, Lydia Echols, said Angela is a great advocate for herself and others. “She knows what she needs and who to ask for it.” Echols continued, saying that many people in her situation are afraid to speak out in fear of not getting housed or seeming difficult, but she knew she wanted to get better, something that Angela proudly acknowledges. “My diabetes is controlled now. I’m getting treatment for my heart. I don’t want to die. If I didn’t die during my addiction I sure don’t want to die now, not for lack of care.”

Aside from her health improving, Angela has improved relations with her two youngest children, who she lost custody of when the youngest was only a few months old. “Now my daughter is 20 and has a baby of her own. I wanted to make sure I had a place that they could come and visit me in.”

\*Name has been changed



**Health Services**  
LOS ANGELES COUNTY

July 29, 2016

Los Angeles County  
Board of Supervisors

Hilda L. Solis  
First District

Mark Ridley-Thomas  
Second District

Sheila Kuehl  
Third District

Don Knabe  
Fourth District

Michael D. Antonovich  
Fifth District

TO: Supervisor Hilda Solis, Chair  
Supervisor Mark Ridley-Thomas  
Supervisor Sheila Kuehl  
Supervisor Don Knabe  
Supervisor Michael D. Antonovich

FROM: Mitchell H. Katz, M.D. *Mitchell Katz*  
Director

SUBJECT: **HOUSING FOR HEALTH QUARTERLY REPORT**

Mitchell H. Katz, M.D.  
Director

Hal F. Yee, Jr., M.D., Ph.D.  
Chief Medical Officer

Christina R. Ghaly, M.D.  
Chief Operations Officer

313 N. Figueroa Street, Suite 912  
Los Angeles, CA 90012

Tel: (213) 240-8101  
Fax: (213) 481-0503

[www.dhs.lacounty.gov](http://www.dhs.lacounty.gov)

On January 14, 2014, the Board instructed the Director of the Department of Health Services (DHS) to submit quarterly reports to the Board on Housing for Health (HFH) permanent supportive housing outcomes including funds, costs, number and composition of clients housed; integrated health, mental health, substance use disorder and benefits establishment results; utilization rate and duration of housing subsidies; number of clients transitioning off of housing subsidies; and characteristics of housing units secured.

**BACKGROUND**

In November 2012, DHS established the HFH division to expand access to supportive housing for DHS patients who are homeless and who have complex medical and behavioral health conditions and/or are high utilizers of DHS services.

HFH utilizes a full range of community-based housing options, including non-profit owned supportive housing, affordable housing, and private market housing. Tenants receive federal rental subsidies such as Section 8 Project Based or Tenant Based Vouchers or a local rental subsidy through the Flexible Housing Subsidy Pool (FHSP). All individuals who are housed through HFH programs are assigned to a homeless services provider to receive Intensive Case Management Services (ICMS). These services include outreach and engagement; case management with on-going monitoring and follow-up; linkage to health, mental health, and substance use disorder services; assistance with benefits establishment; assistance with life skills, job skills, and educational and volunteer opportunities; crisis intervention, etc. ICMS providers provide “whatever it takes” wraparound services to assist clients in regaining stability and improved health.

*To ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.*

[www.dhs.lacounty.gov](http://www.dhs.lacounty.gov)



Each Supervisor  
July 29, 2016  
Page 2

## **QUARTERLY REPORT**

Please find the attached quarterly report in dashboard format. If you have any questions, please contact me or Mark Ghaly, M.D., Deputy Director of Community Health, at (213) 240-8107.

MHK:mg

c: Chief Executive Office  
County Counsel  
Executive Office, Board of Supervisors

Attachment

# HOUSING

FOR

# HEALTH

Quarterly Report April-June 2016



Health Services  
LOS ANGELES COUNTY

# GOALS

---

- 1. Create 10,000 units of housing**
- 2. End homelessness in LA County**
- 3. Reduce inappropriate use of expensive health care resources**
- 4. Improve health outcomes for vulnerable populations.**

# CLIENTS HOUSED

- Housing for Health provides housing and supportive services to homeless clients with physical and/or behavioral health conditions, high utilizers of county services, and other vulnerable populations.

# HFH CLIENT PROCESS

## CLIENT IDENTIFICATION

by DHS facilities, County departments, CES, and other partners

## REVIEW/EVALUATE/ROUTE REFERRALS

by HFH Administrative/Clinical Team

## INTERIM HOUSING

RECUPERATIVE  
CARE

STABILIZATION  
HOUSING

PERMANENT  
HOUSING



# Permanent Supportive Housing Quarterly and Program-to-Date Outcomes

**Total # of clients who have attained housing since HFH began in November 2012**

**1780**

**Total # of clients who are currently housed**

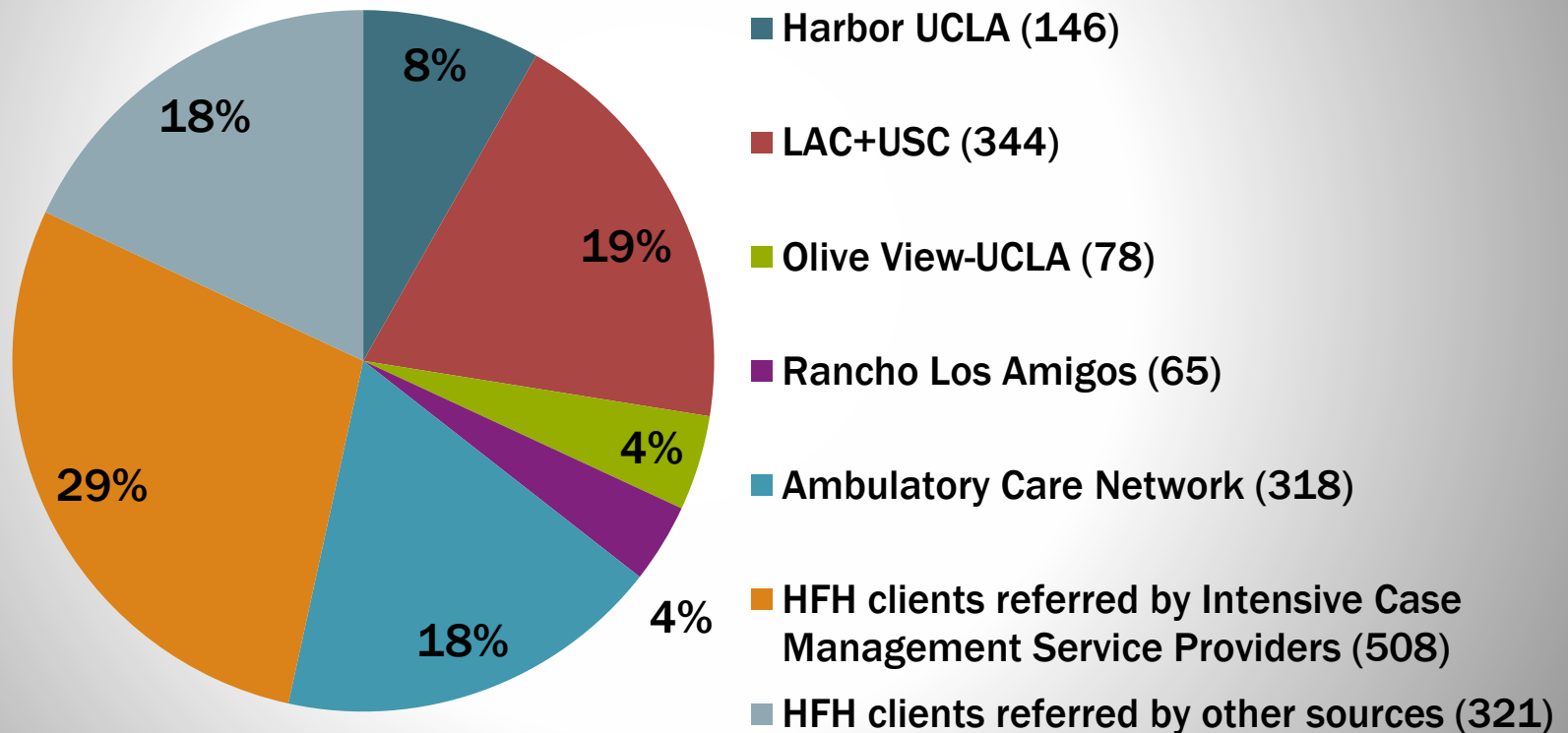
**1608**

**Total # of clients housed April-June 2016**

**274**

# WHERE DO HFH REFERRALS COME FROM?

Referral Source of Clients Housed (N=1780)



# HEALTH CONDITIONS OF CLIENTS HOUSED

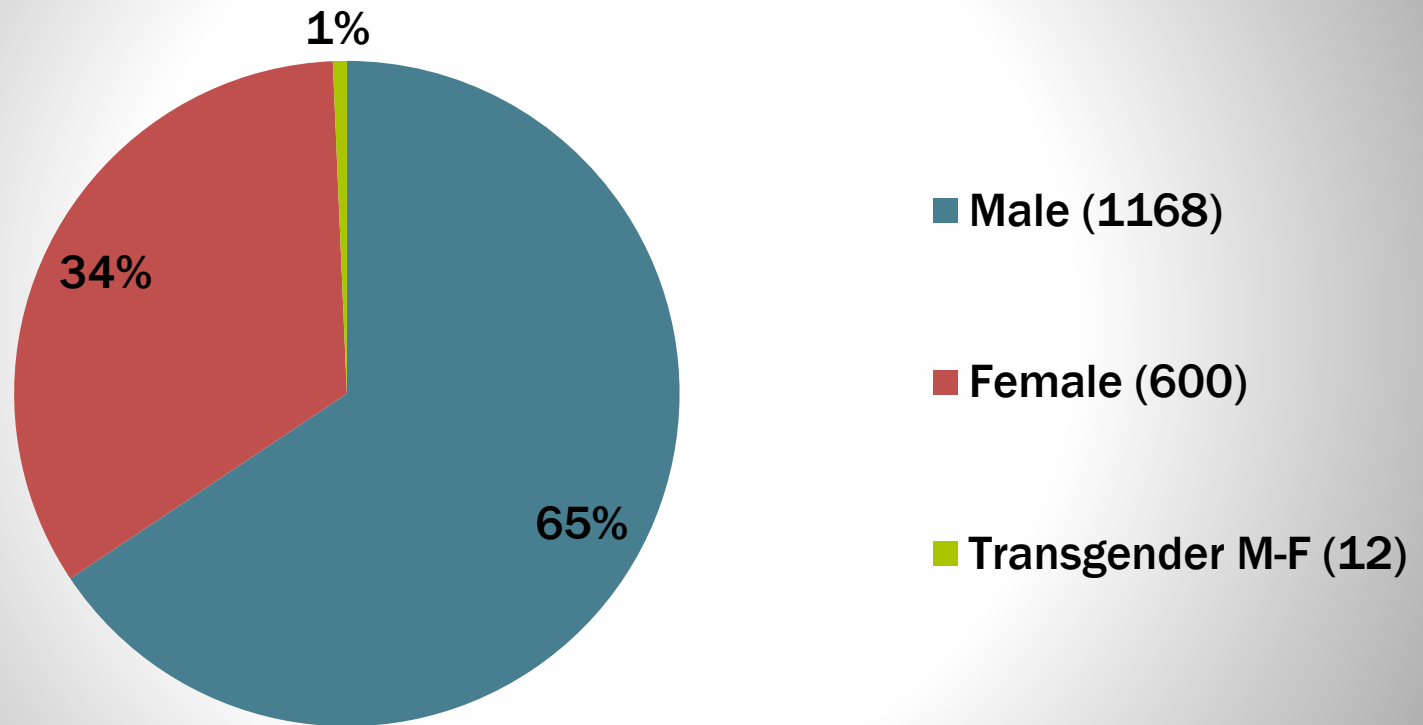
## MOST COMMON CONDITIONS:

- Hypertension
- Diabetes
- Asthma
- Heart disease
- Congestive heart failure
- Cancer
- HIV/AIDS
- Hepatitis
- Depression
- Bipolar disorder
- PTSD
- Schizophrenia

Most HFH clients have **MULTIPLE CHRONIC HEALTH CONDITIONS**

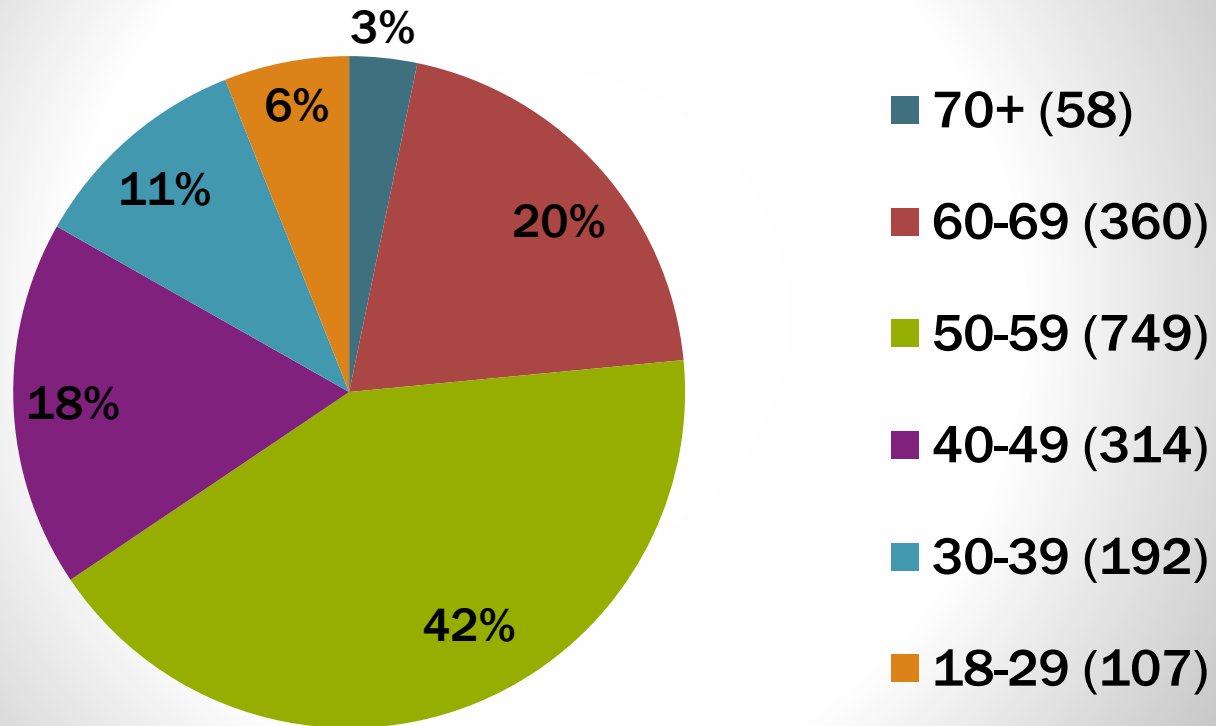
# DEMOGRAPHICS OF CLIENTS HOUSED

Gender of Clients Housed (N=1780)



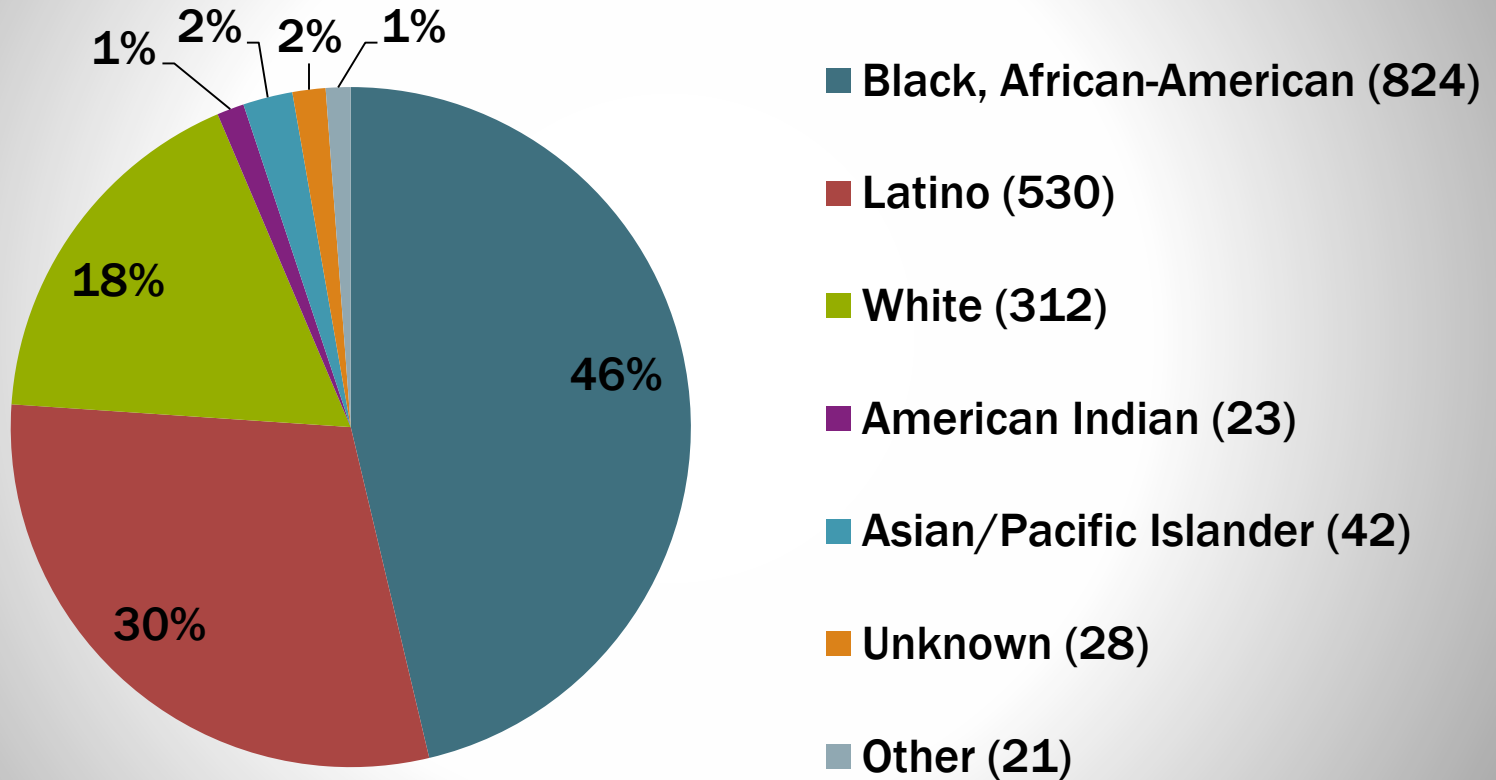
# DEMOGRAPHICS OF CLIENTS HOUSED

## Age of Clients Housed (N=1780)



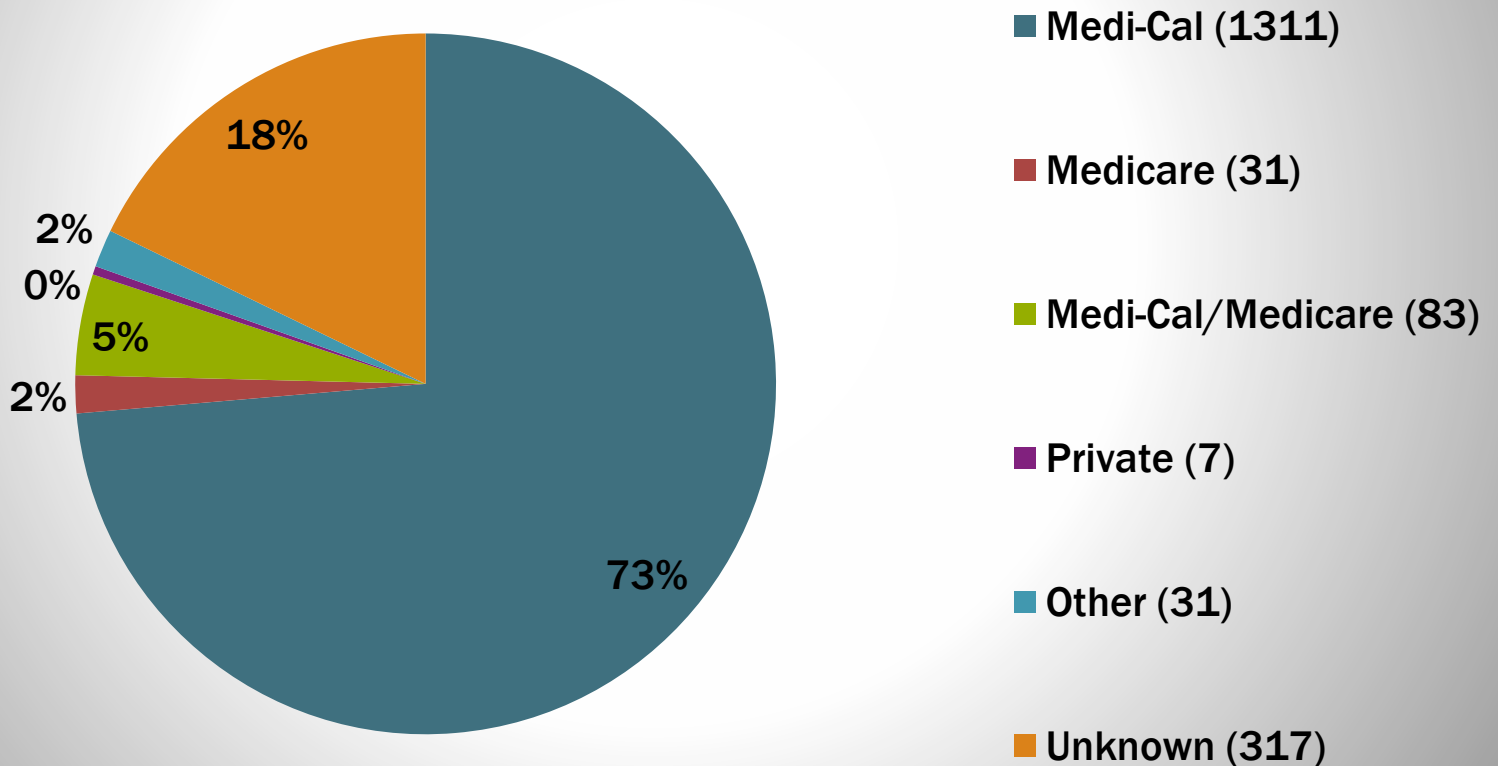
# DEMOGRAPHICS OF CLIENTS HOUSED

## Race/Ethnicity of Clients Housed (N=1780)



# CLIENT HEALTH INSURANCE

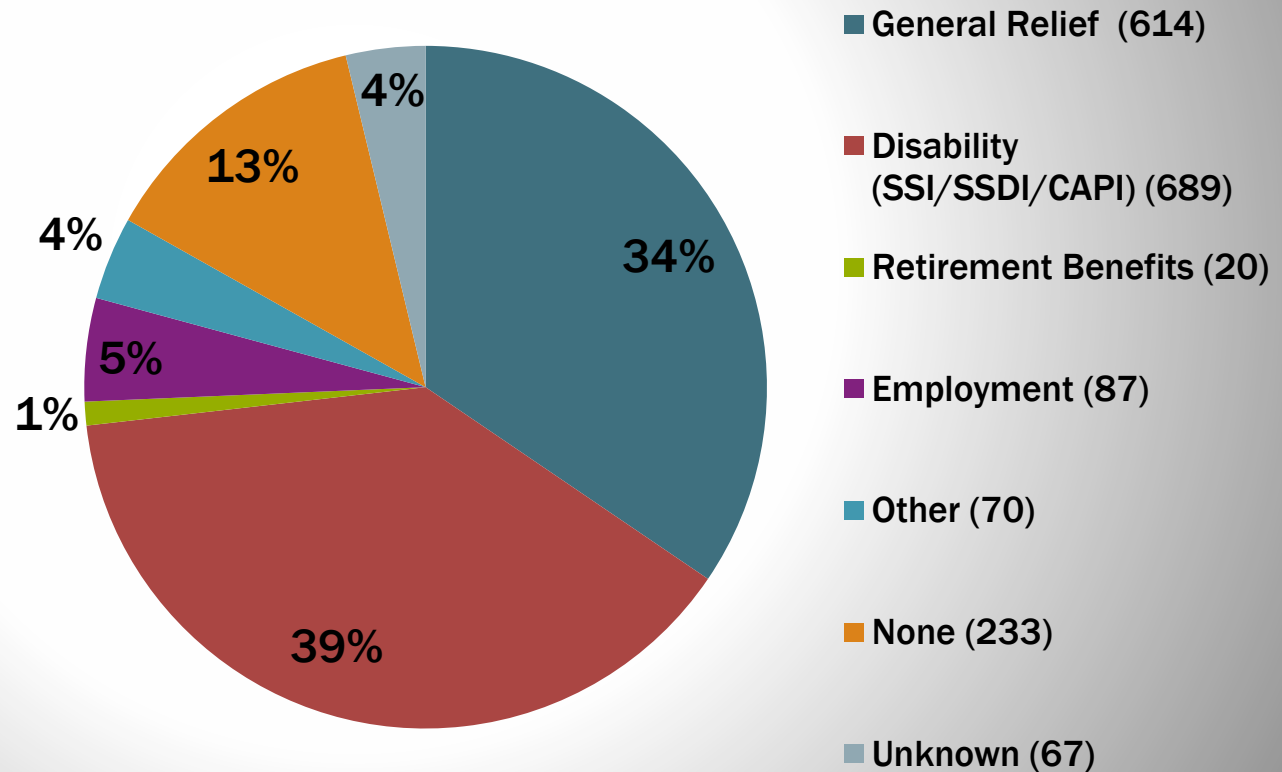
Health Insurance Type for Clients Currently Housed  
(N=1780)



# CLIENT INCOME

- During the client intake and assessment process, the Intensive Case Management Services (ICMS) provider obtains information on the client's income and health benefits. If the client appears to be eligible for a benefit they are not currently receiving, the ICMS provider will assist them to obtain any necessary documents and will complete and track applications for DPSS Services (CalFresh, Medi-Cal, GR, CalWORKs, and IHSS) and SSI.

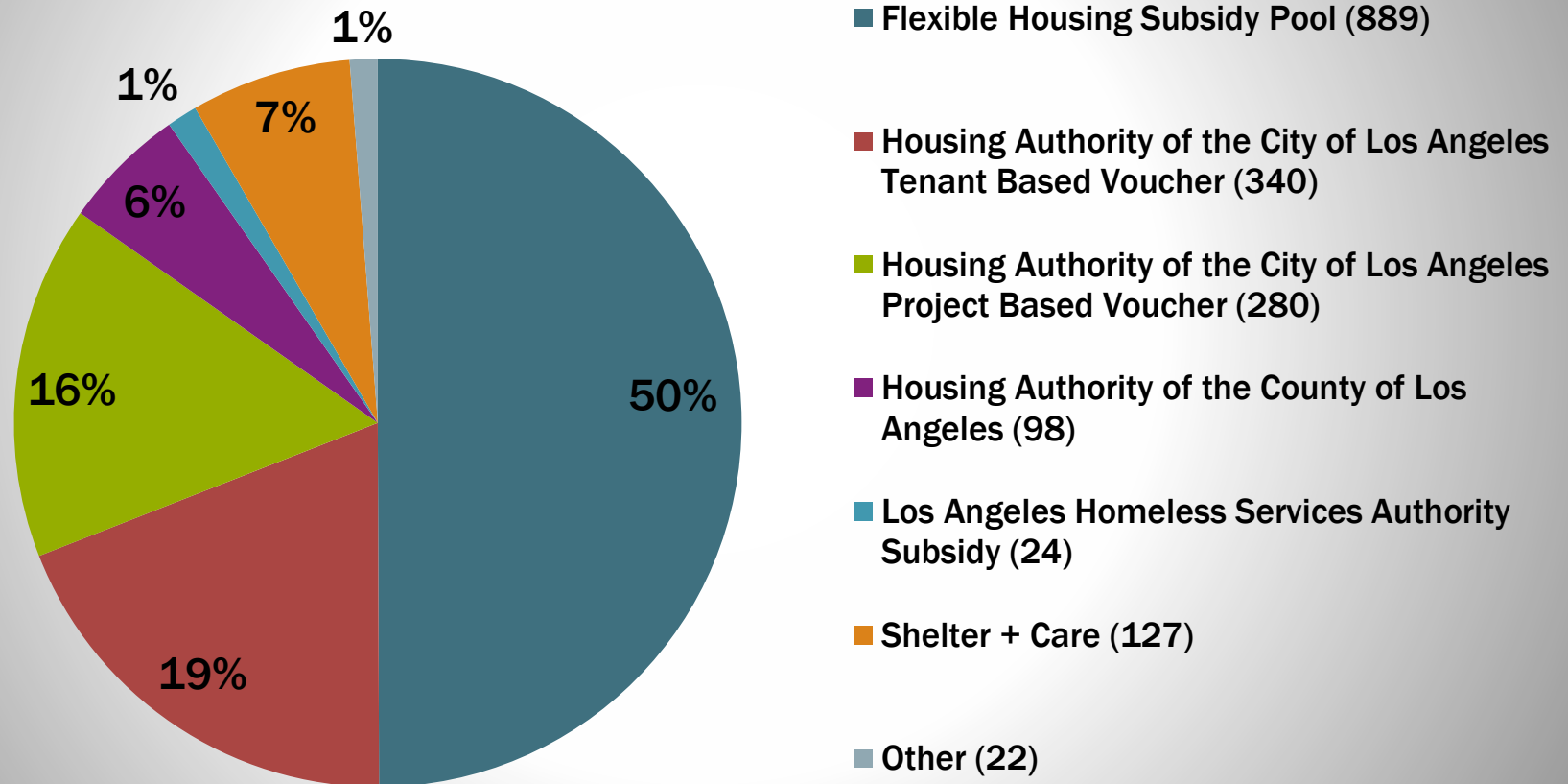
## Income of Clients Housed (N=1780)





# TYPE OF HOUSING SUBSIDY

## Subsidy Type for Clients Housed (N=1780)



# INTENSIVE CASE MANAGEMENT

---

- **Every client** connected to services.
- **Individualized service** planning and linkages to health, mental health, and substance use disorder services.
- **Help clients retain** housing and reach health and wellbeing goals.
- **Services provided by** on-site staff or mobile teams.

# HOUSING STATUS AND RETENTION

## Homeless Status

- The average length of time that clients experienced homelessness was 3 years and 11 months and the median length of time was 2 years.
- The majority of HFH clients were chronically homeless (82%), which means they were homeless for more than one year or experienced four or more episodes of homelessness in the last three years.

## Housing retention rate

- 97% of clients retained housing (remained in unit or exited to other permanent housing) after 12 months.

## Exits from housing this quarter

- Twenty-nine (29) clients exited housing this quarter. Twelve (12) voluntarily surrendered their unit, seven (7) moved into other independent living situation or moved in with family and friends, four (4) passed away, three (3) were incarcerated, two (2) were evicted and one (1) needed higher level of care.

# PERMANENT SUPPORTIVE HOUSING FUNDING

---

- The sources of funds for the Property Related Tenant Services (PRTS) FHSP work order is DHS County General Fund dollars. The estimated cost for Fiscal Year 2015-16 is \$9.3 million.
- The source of funds for contracted Intensive Case Management Services (ICMS) in permanent supportive housing is DHS County General Fund dollars. The estimated cost for contracted ICMS in permanent supportive housing in Fiscal Year 2015-16 is \$7.9 million.
- The source of funds for the Property Related Tenant Services (PRTS) work order to operate the South Los Angeles Supportive Housing Program (a County/City initiative that provides 56 units of housing to DHS patients who are homeless) is DHS County General Fund dollars. The estimated cost for Fiscal Year 2015-16 is \$200,000.

# FLEXIBLE HOUSING SUBSIDY POOL



# FHSP PARTNERS



Los Angeles County  
Dept. of Health  
Services



501(c)3 nonprofit  
coordinating community-  
based partner



Property owners  
throughout Los  
Angeles County



LAC-DHS Supportive  
Housing Rental  
Subsidy Program

# FHSP Quarterly and Program-to-Date Outcomes

Move-ins April-June 2016	157
Total move-ins to date	921
Units secured* April-June 2016	130
Total units secured* to date	891

\*Refers to the number of units that have been secured under a rental subsidy agreement with the property owner and includes occupied and soon to be occupied units.

# CHARACTERISTICS OF FHSP HOUSING UNITS

---

- Units in the HFH portfolio range in size and type across the County from large apartment buildings to smaller single family homes and are appropriate to household size and composition.
- In the most recent quarter, Brilliant Corners secured an additional 130 units in Los Angeles County for the Flexible Housing Subsidy Pool. Of the 130 units, 21 are studios, 49 are one-bedrooms, 6 are two-bedrooms and 1 is a three-bedroom. Other units include 29 rooms in shared homes and 24 rooms in Residential Care Facilities.
- Brilliant Corners engages with private landlords, local developers, and local property management agencies, in an effort to provide a diverse pool of units to the program. From a wheelchair accessible studio unit located on the ground floor of a small 2 story apartment complex, to a 1-bedroom unit located in a 45 unit complex, Brilliant Corners is able to provide patients with a unit that offers the greatest chances of long-term housing success.



# FEATURED HOUSING SITE AND PATIENT STORY



Health Services  
LOS ANGELES COUNTY

# WINNETKA SENIOR APARTMENTS



In a collaboration with Meta Housing, PATHVentures recently handed over the keys to 20 new residents of the Winnetka Village Senior Apartments. Of the Winnetka’s 94 ADA-accessible units, 47 are set aside for Housing for Health clients.

Winnetka Village takes an “aging in place” approach by supporting the residents’ independence and ability to live in the least restrictive environment for as long as possible. All services emphasize enhancing the resident’s quality of life and include community building activities and events to help residents develop a local support network and increase their sense of self-worth.

The building recently hosted a Move-In Party, in which volunteers and staff welcomed the residents to the apartments. This gave residents the chance to meet their neighbors, build relationships in the community, and develop a sense of belonging. At the end of the day, volunteers gave the residents move in kits, comprised of essential home goods such as bedding, kitchen cookware, and bathroom supplies.

# FEATURED CLIENT SUCCESS STORY

Tony\* says his troubles started at a young age. His father was in the military, moving the family around constantly, but he claims his parents' divorce sparked his self-defeating spiral. After a few stints at Los Prietos Boys Camp for delinquent young men in Santa Barbara County, Tony began doing drugs and ended up in jails across the western United States. His bender continued, driving stolen vehicles to the Midwest and back. His joyride ended with eight years in a Colorado prison. After being released, Tony still wasn't rehabilitated. Instead, he followed a woman to Lancaster and continued destroying his life with drugs.

The woman turned out to be a mixed blessing. "She made me realize that all the things I hated in life, I myself had become," Tony said. "She put a mirror to my face."

It was then that he dusted himself off and sought out the assistance of Mental Health America in early 2015, but admits he wasn't fully ready for their help. "I was so angry when I first came in. It took me a long while before I realized I had nothing to be mad at."

While Tony was sorting out his internal demons, MHA became a partner with Housing For Health's Housing and Jobs Collaborative, which aims to reduce homelessness for single adults who recently became homeless. The program provides a temporary housing voucher and helps clients gain employment so that they can become self-sufficient.

"This program gave a different opportunity to many individuals and gave them that start that they need," says Tina DeRienzo, Tony's case manager at MHA. People in the community know "this is a working program. You're not going to come here and relax. The program will give you an opportunity and it gives you nine months to prove yourself."

The client's contribution of rent increases incrementally during their enrollment in the program until they are able to resume full financial responsibility. The intensive case management service provider, in this case MHA, assists the client with their job search so they can get back on their feet while still receiving case management support.

The structure, DeRienzo says, is what empowers her clients to stay off the streets. "It's amazing to see them get their chance and run with it," she says.

Tony got the keys to his new place a few months ago and is about to receive his first paycheck at an industrial linen company. "It's grueling work," he says. "But I can either do this or sell drugs and go back to jail."

He finally sees that that's not the path he wants to follow and he wouldn't dare let his case manager down.

"I don't have everything but I have everything I need."

\*Name has been changed.



**Health Services**  
LOS ANGELES COUNTY

November 17, 2016

Los Angeles County  
Board of Supervisors

Hilda L. Solis  
First District

Mark Ridley-Thomas  
Second District

Sheila Kuehl  
Third District

Don Knabe  
Fourth District

Michael D. Antonovich  
Fifth District

TO: Supervisor Hilda Solis, Chair  
Supervisor Mark Ridley-Thomas  
Supervisor Sheila Kuehl  
Supervisor Don Knabe  
Supervisor Michael D. Antonovich

FROM: Mitchell H. Katz, M.D. *Mitchell Katz*  
Director

SUBJECT: **HOUSING FOR HEALTH QUARTERLY REPORT**

Mitchell H. Katz, M.D.  
Director

Hal F. Yee, Jr., M.D., Ph.D.  
Chief Medical Officer

Christina R. Ghaly, M.D.  
Chief Operations Officer

On January 14, 2014, the Board instructed the Department of Health Services (DHS) to submit quarterly reports to the Board on Housing for Health (HFH) permanent supportive housing outcomes including funds, costs, number and composition of clients housed; integrated health, mental health, substance use disorder and benefits establishment results; utilization rate and duration of housing subsidies; number of clients transitioning off of housing subsidies; and characteristics of housing units secured.

313 N. Figueroa Street, Suite 912  
Los Angeles, CA 90012

Tel: (213) 240-8101  
Fax: (213) 481-0503

**BACKGROUND**

[www.dhs.lacounty.gov](http://www.dhs.lacounty.gov)

In November 2012, DHS established the HFH division to expand access to supportive housing for DHS patients who are homeless and who have complex medical and behavioral health conditions and/or are high utilizers of DHS services.

HFH utilizes a full range of community-based housing options, including non-profit owned supportive housing, affordable housing, and private market housing. Tenants receive federal rental subsidies such as Section 8 Project Based or Tenant Based Vouchers or a local rental subsidy through the Flexible Housing Subsidy Pool (FHSP). All individuals who are housed through HFH programs are assigned to a homeless services provider to receive Intensive Case Management Services (ICMS). These services include outreach and engagement; case management with on-going monitoring and follow-up; linkage to health, mental health, and substance use disorder services; assistance with benefits establishment; assistance with life skills, job skills, and educational and volunteer opportunities; crisis intervention, etc. ICMS providers provide “whatever it takes” wraparound services to assist clients in regaining stability and improved health.

*To ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.*

[www.dhs.lacounty.gov](http://www.dhs.lacounty.gov)



## **NEW EXECUTED WORK ORDER**

Pursuant to the Supportive Housing Services Master Agreement (SHSMA) approved by the Board on June 19, 2012, this is to advise that DHS has executed Work Orders to the SHSMA with Exodus Recovery, Amity Foundation, Volunteer of America Los Angeles, Watts Labor Community Action Committee, and HealthRIGHT 360 to provide intensive case management services in supportive housing to clients who are homeless. County Counsel has reviewed and approved the Work Orders.

## **QUARTERLY REPORT**

Please find the attached quarterly report in dashboard format. If you have any questions, please contact me or Mark Ghaly, M.D., Deputy Director of Community Health, at (213) 240-7702.

MHK:mg

Attachment

c: Chief Executive Office  
County Counsel  
Executive Office, Board of Supervisors

# HOUSING FOR HEALTH

Quarterly Report July-September 2016



Health Services  
LOS ANGELES COUNTY

# GOALS

---

- 1. Create 10,000 units of housing**
- 2. End homelessness in LA County**
- 3. Reduce inappropriate use of expensive health care resources**
- 4. Improve health outcomes for vulnerable populations.**

# CLIENTS HOUSED

- Housing for Health provides housing and supportive services to homeless clients with physical and/or behavioral health conditions, high utilizers of county services, and other vulnerable populations.



# HFH CLIENT PROCESS

## CLIENT IDENTIFICATION

by DHS facilities, County departments, CES, and other partners

## REVIEW/EVALUATE/ROUTE REFERRALS

by HFH Administrative/Clinical Team

## INTERIM HOUSING

RECUPERATIVE  
CARE

STABILIZATION  
HOUSING

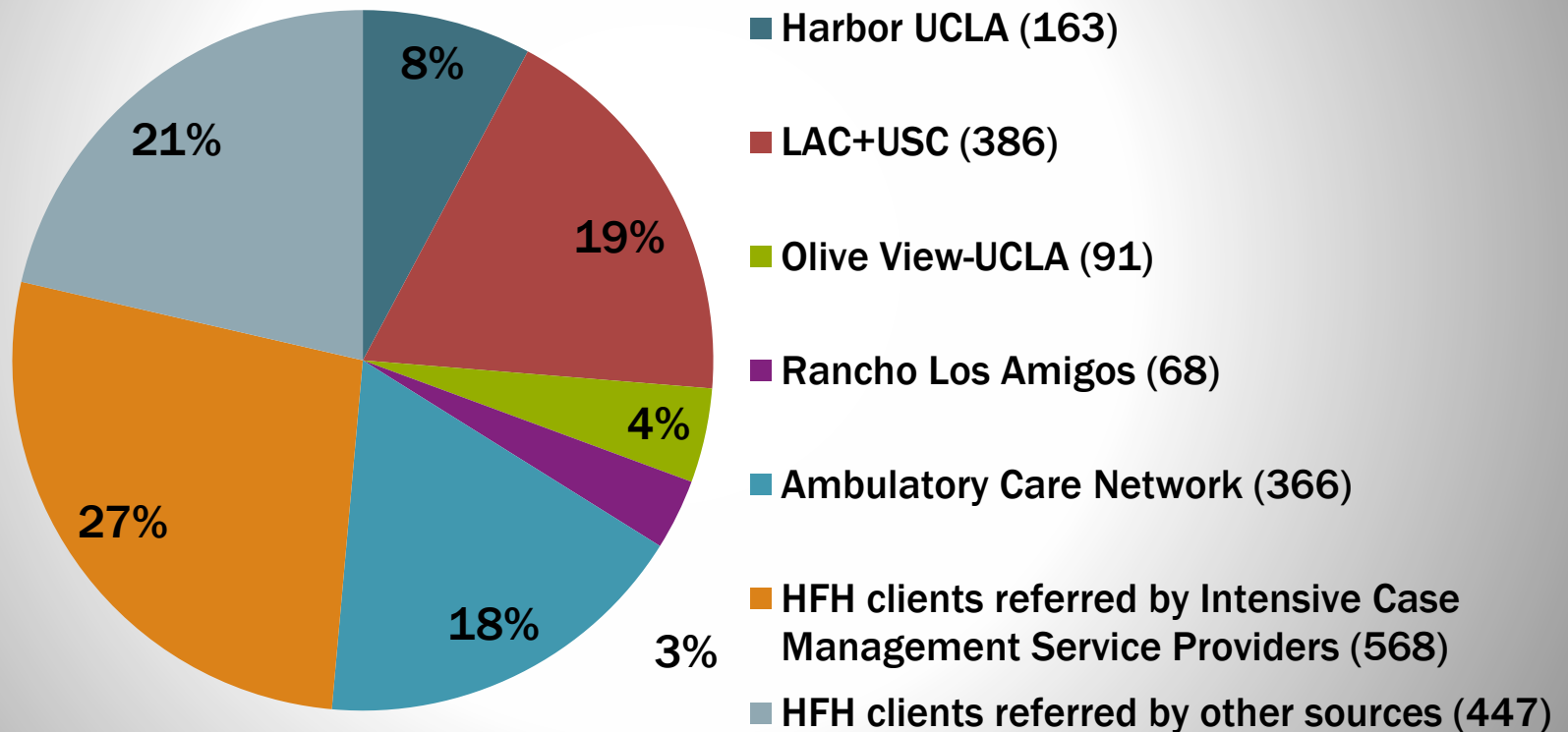
PERMANENT  
HOUSING

# Permanent Supportive Housing Quarterly and Program-to-Date Outcomes

<b>Total # of clients who have attained housing since HFH began in November 2012</b>	<b>2089</b>
<b>Total # of clients who are currently housed</b>	<b>1872</b>
<b>Total # of clients housed July-September 2016</b>	<b>314</b>

# WHERE DO HFH REFERRALS COME FROM?

## Referral Source of Clients Housed (N=2089)



# HEALTH CONDITIONS OF CLIENTS HOUSED

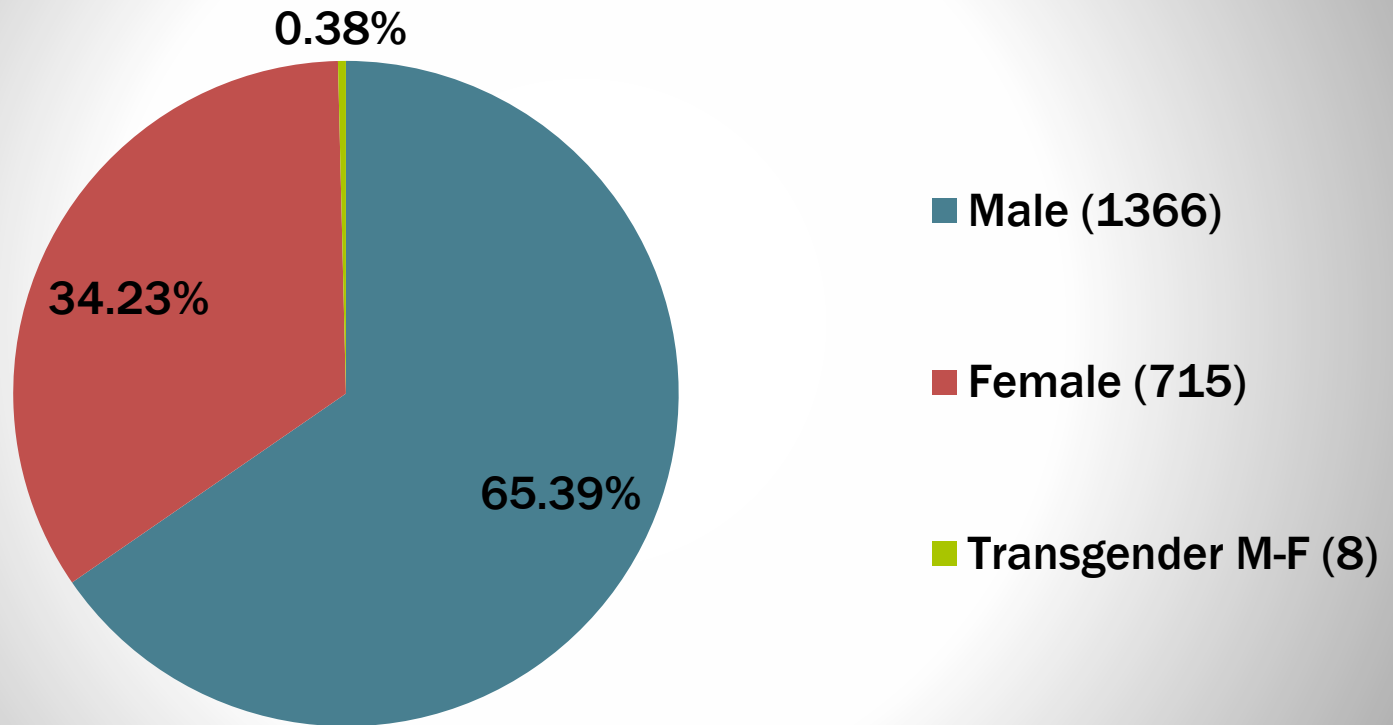
## MOST COMMON CONDITIONS:

- Hypertension
- Diabetes
- Asthma
- Heart disease
- Congestive heart failure
- Cancer
- HIV/AIDS
- Hepatitis
- Depression
- Bipolar disorder
- PTSD
- Schizophrenia

Most HFH clients have **MULTIPLE CHRONIC HEALTH CONDITIONS**

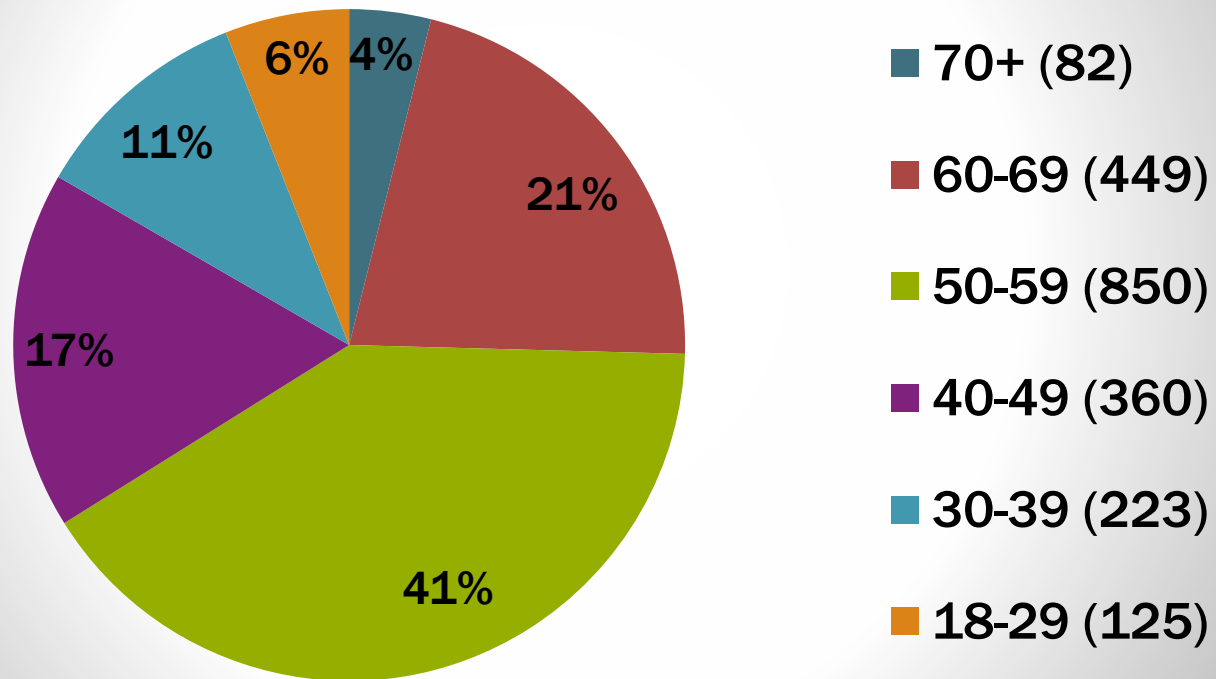
# DEMOGRAPHICS OF CLIENTS HOUSED

## Gender of Clients Housed (N=2089)



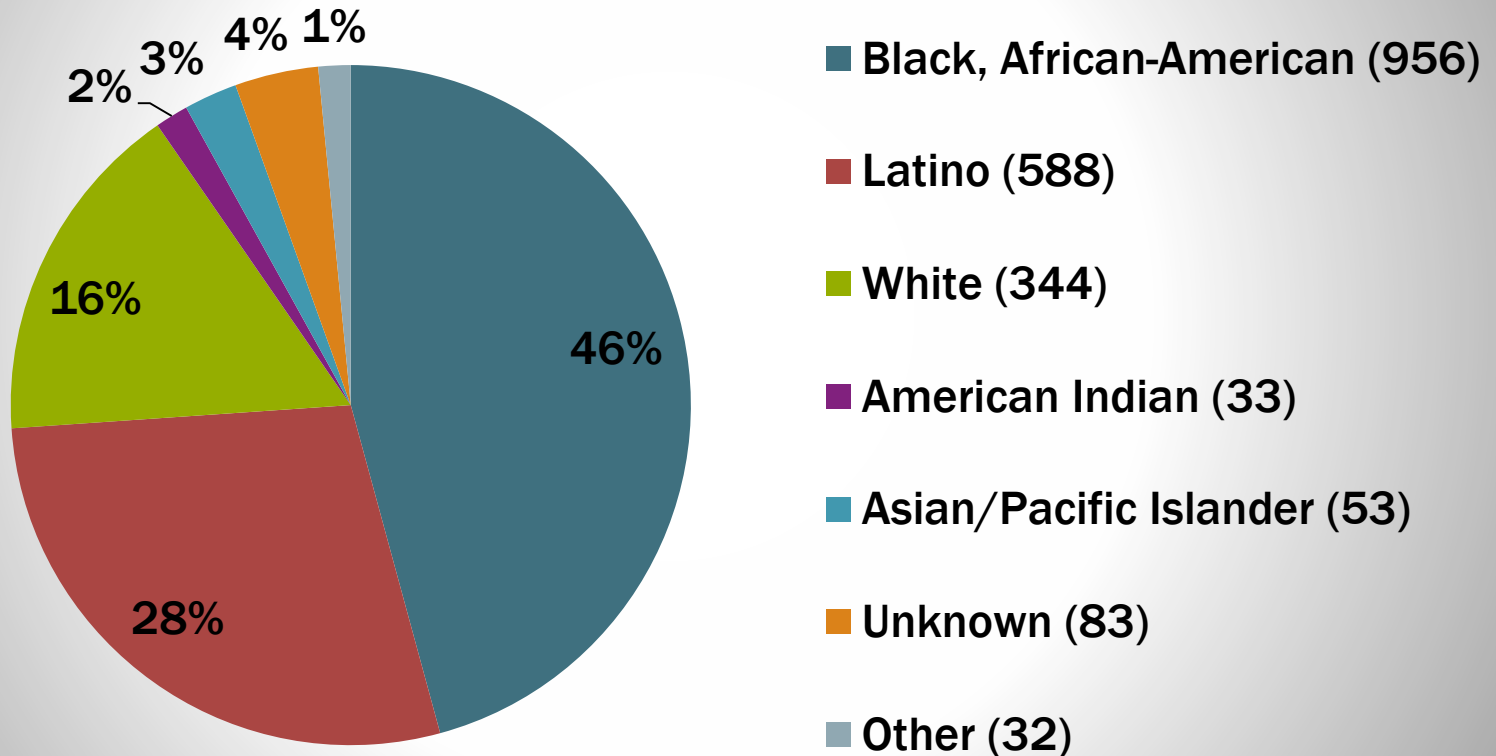
# DEMOGRAPHICS OF CLIENTS HOUSED

## Age of Clients Housed (N=2089)



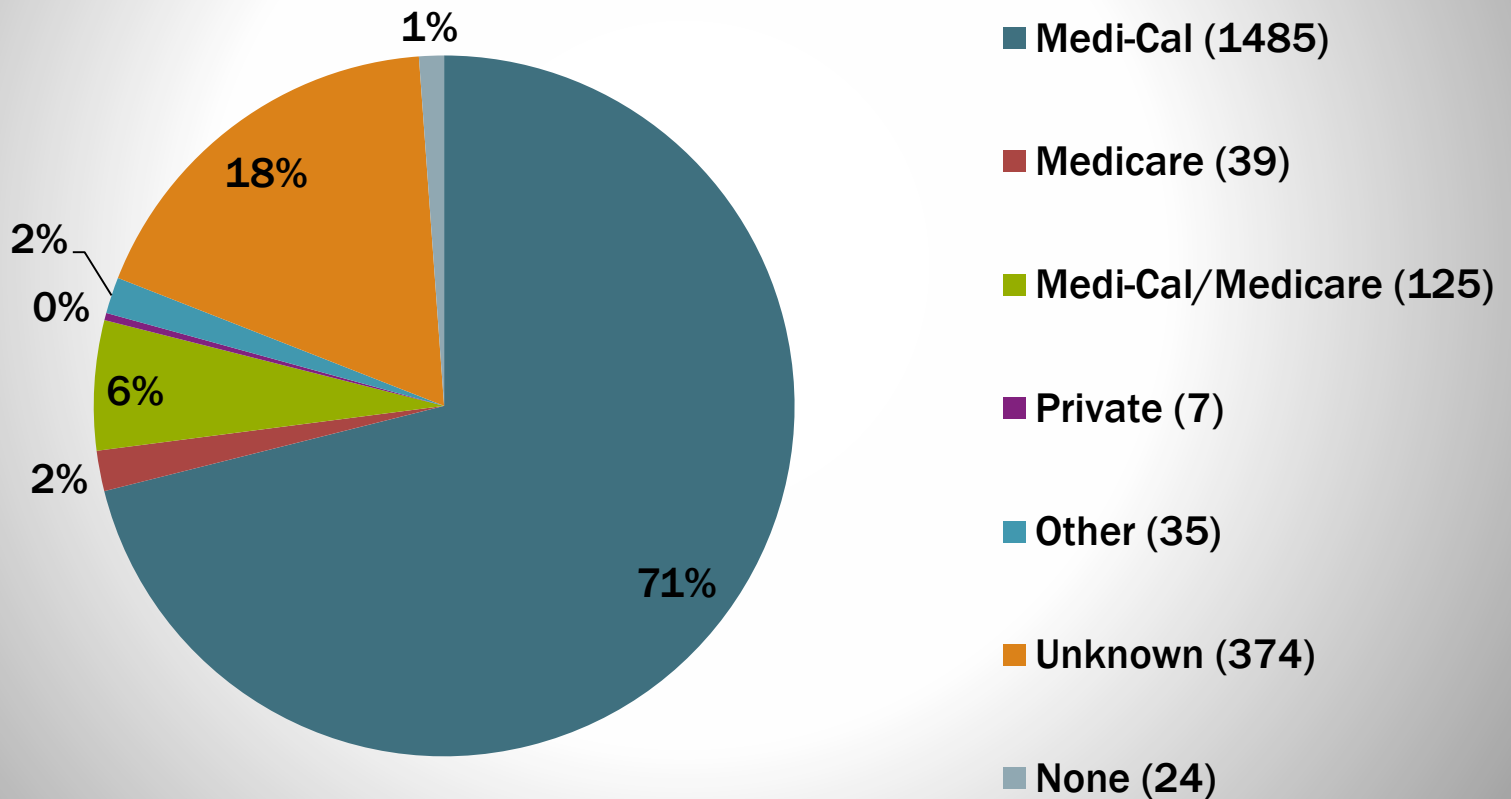
# DEMOGRAPHICS OF CLIENTS HOUSED

## Race/Ethnicity of Clients Housed (N=2089)



# CLIENT HEALTH INSURANCE

Health Insurance Type for Clients Currently Housed  
(N=2089)

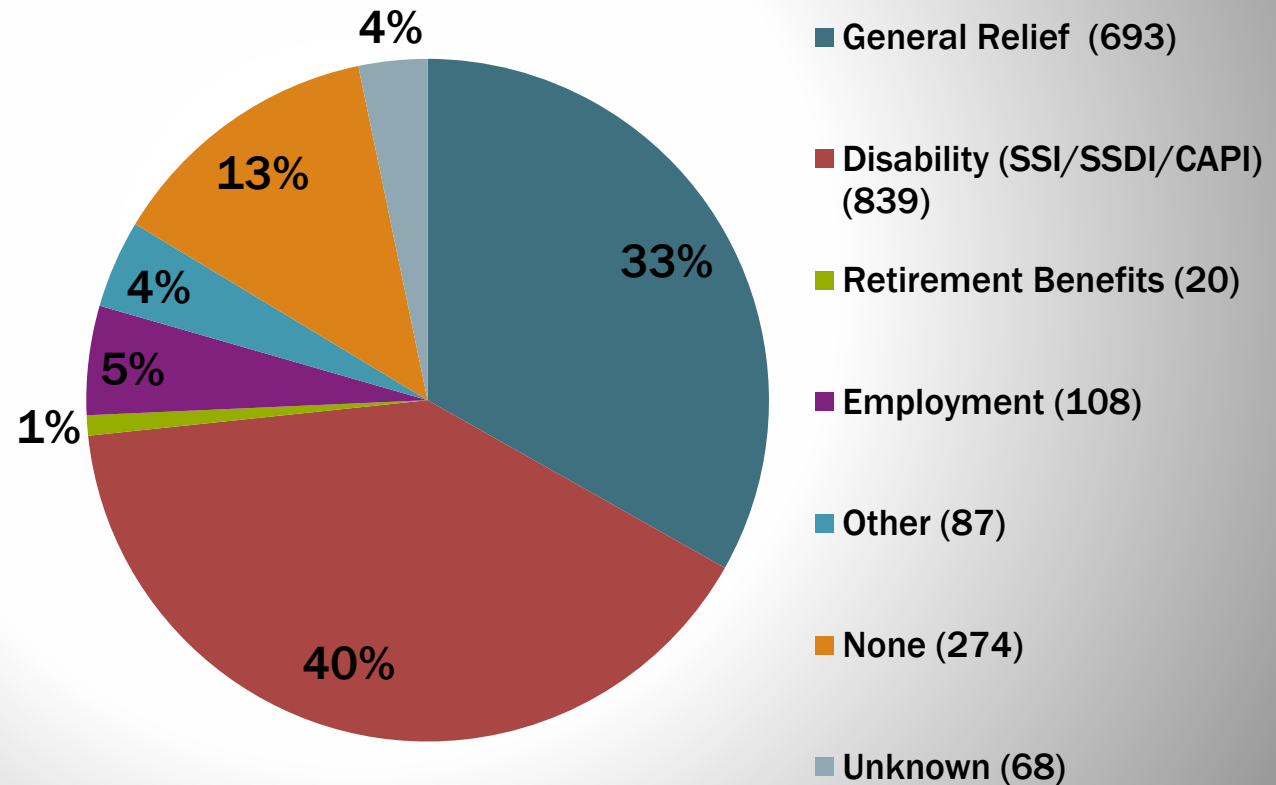




# CLIENT INCOME

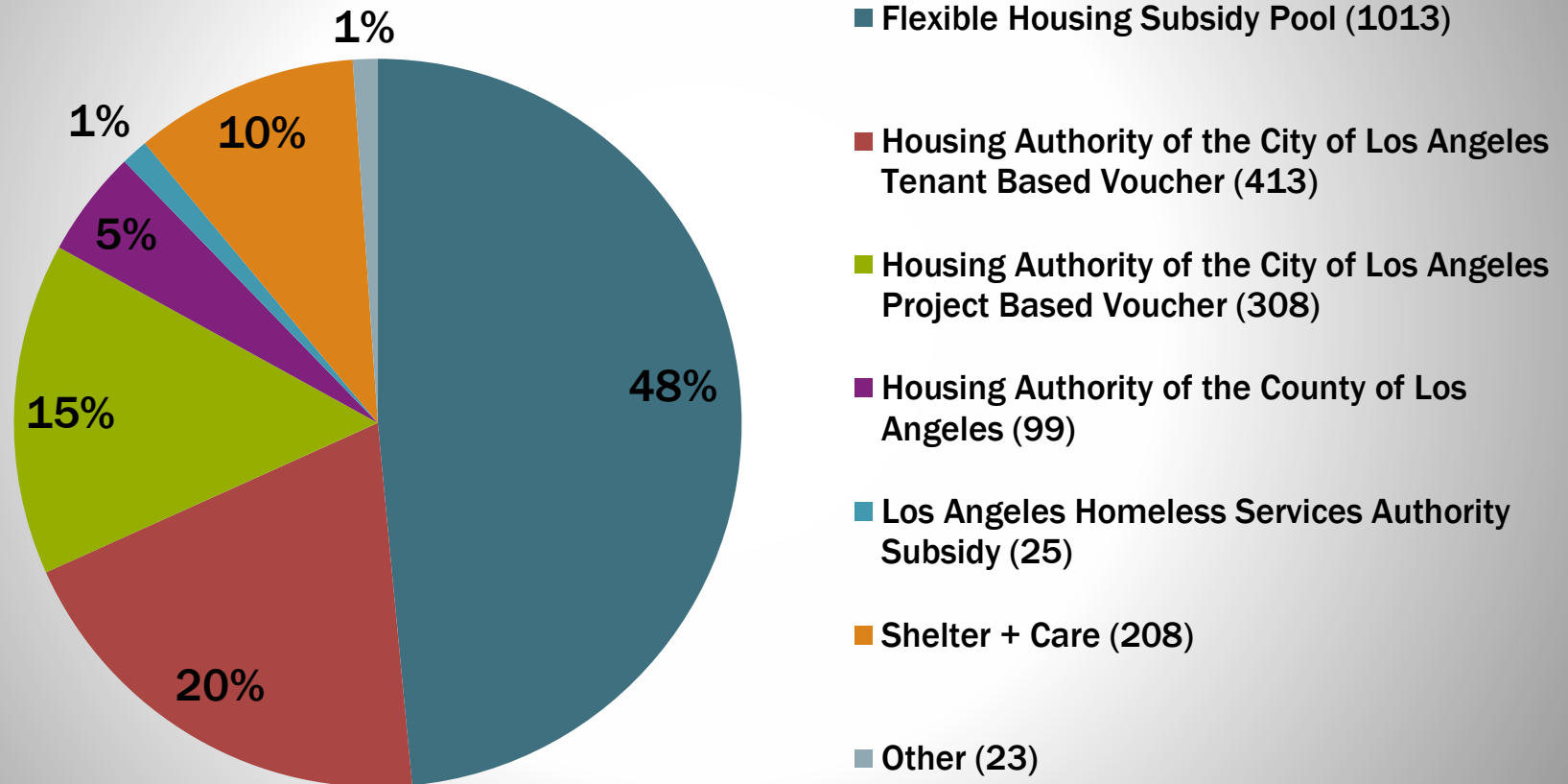
- During the client intake and assessment process, the Intensive Case Management Services (ICMS) provider obtains information on the client's income and health benefits. If the client appears to be eligible for a benefit they are not currently receiving, the ICMS provider will assist them to obtain any necessary documents and will complete and track applications for DPSS Services (CalFresh, Medi-Cal, GR, CalWORKs, and IHSS) and SSI.

## Income of Clients Housed (N=2089)



# TYPE OF HOUSING SUBSIDY

## Subsidy Type for Clients Housed (N=2089)



# INTENSIVE CASE MANAGEMENT

---

- **Every client** connected to services.
- **Individualized service** planning and linkages to health, mental health, and substance use disorder services.
- **Help clients retain** housing and reach health and wellbeing goals.
- **Services provided by** on-site staff or mobile teams.

# HOUSING STATUS AND RETENTION

---

## Homeless Status

- The average length of time that clients experienced homelessness was 3 years and 6 months and the median length of time was 2 years.
- The majority of HFH clients were chronically homeless (74%), which means they were homeless for more than one year or experienced four or more episodes of homelessness in the last three years.

## Housing retention rate

- 97% of clients retained housing (remained in unit or exited to other permanent housing) after 12 months.

## Exits from housing this quarter

- Twenty-eight (28) clients exited housing this quarter. Six (6) voluntarily surrendered their unit, nine (9) moved into other independent living situation or moved in with family and friends, eight (8) passed away, two (2) were incarcerated, one (1) was evicted and two (2) needed higher level of care.

# FLEXIBLE HOUSING SUBSIDY POOL



# FHSP PARTNERS



Los Angeles County  
Dept. of Health  
Services



503(c) nonprofit  
coordinating community-  
based partner



Property owners  
throughout Los  
Angeles County



LAC-DHS Supportive  
Housing Rental  
Subsidy Program

# FHSP Quarterly and Program-to-Date Outcomes

Move-ins July-Sept 2016	309
Total move-ins to date	1230
Units secured* July-Sept 2016	199
Total units secured* to date	1090

\*Refers to the number of units that have been secured under a rental subsidy agreement with the property owner and includes occupied and soon to be occupied units.

# CHARACTERISTICS OF FHSP HOUSING UNITS

---

- Units in the HFH portfolio range in size and type across the County from large apartment buildings to smaller single family homes and are appropriate to household size and composition.
- In the most recent quarter, Brilliant Corners secured an additional 199 units in Los Angeles County for the Flexible Housing Subsidy Pool. Of the 199 units, 35 are studios, 61 are one-bedrooms, 11 are two-bedrooms and 4 is a three-bedroom. Other units include 43 rooms in shared homes 5 are SROs and 40 rooms in Residential Care Facilities.
- Brilliant Corners engages with private landlords, local developers, and local property management agencies, in an effort to provide a diverse pool of units to the program. From a wheelchair accessible studio unit located on the ground floor of a small 2 story apartment complex, to a 1-bedroom unit located in a 45 unit complex, Brilliant Corners is able to provide patients with a unit that offers the greatest chances of long-term housing success.



# FEATURED HOUSING SITE AND PATIENT STORY



Health Services  
LOS ANGELES COUNTY

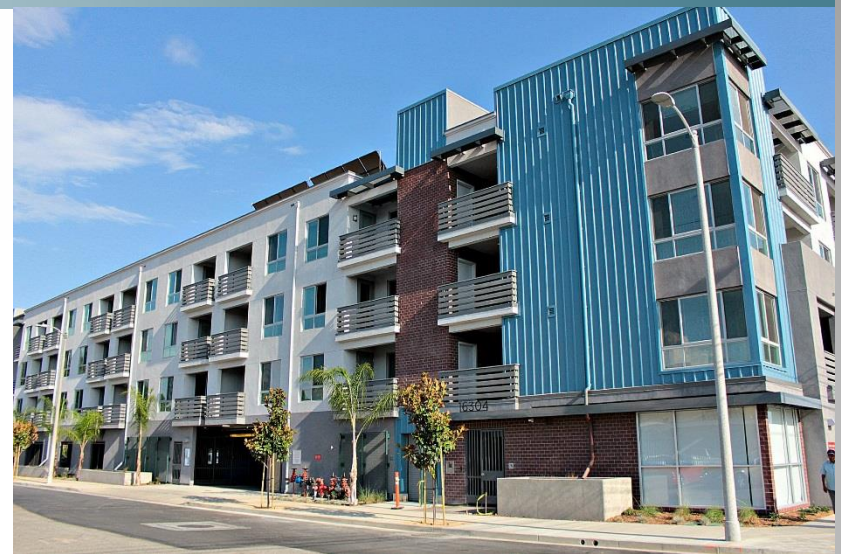
# VERMONT VILLAS SENIOR COMMUNITY

On open-air senior community made up of 80 units, Vermont Villas recently celebrated its first anniversary. The permanent supportive housing project has served as a successful partnership between the Los Angeles County Department of Health Services, PATH and the Veterans Administration, as more than half of the units are reserved for chronically homeless veterans.

The development emphasizes community and access to the outdoors as a means of supporting the health and well-being of residents. A range of communal spaces, including a lounge, community room, computer nook and teaching kitchen, offer many opportunities for gatherings. An expansive courtyard, private balconies, and open-air hallways enhance the livability of the building by cooling spaces with fresh air and providing access to the outdoors.

“It’s more than a key to safe, new start for someone, it’s a place that supports individuals to become more self-sustainable while also creating a community for them so that no one has to experience the isolation they may have felt while living on the streets or in a shelter,” said Jackie Vorhauer, a PATH spokesperson.

The building is staffed by five service coordinators and case managers who support residents in identifying barriers to holistic health, connecting them to resources in the community, and building skills to live independently and stably. On-site programs include nutritional cooking classes, a food bank, yoga and more.



# FEATURED CLIENT SUCCESS STORY

---

Jimmy\* knew he didn't want to live on the streets. He says no one he came across wanted to. "I lived among former professionals: doctors, lawyers, judges. Men, women and children. Some had been homeless for many years. Some had been raised on the streets. None of them chose to live on the street."

While living on the street, Jimmy was diagnosed with stage IV prostate cancer – a devastating blow to his already fragile mindset. "When you live on the street, you face more than hunger and lack of shelter," he said. Being homeless hindered his ability to get insurance or keep regular appointments with his doctors and oncologists. "I had developed a plan to die. I had lost my humanity so completely that I didn't think I deserved to keep living."

Jimmy found the Union Station shelter in Pasadena and was enrolled in Housing for Health in its first year, but disappeared soon after. He was a no-show to his doctor's appointments, meaning something wasn't right. His case manager found he was incarcerated, and was able to advocate on his behalf. Jimmy was released with time served on the condition that he remain in the program.

Since then, Jimmy has thrived. His case manager connected him to insurance and Supplemental Security Income (SSI). He quickly found a home and had it furnished to his liking.

Stable housing allowed him to see a doctor regularly and he is happy to report that his cancer is in remission. He is close to celebrating his second anniversary in his home.

"For the first time in my adult life, I had my own home, door and keys. I am choosing, every day, to live."

\*Name changed



**Health Services**  
LOS ANGELES COUNTY

February 23, 2017

**Los Angeles County  
Board of Supervisors**

**Hilda L. Solis**  
First District

**Mark Ridley-Thomas**  
Second District

**Sheila Kuehl**  
Third District

**Janice Hahn**  
Fourth District

**Kathryn Barger**  
Fifth District

**TO:** Supervisor Mark Ridley-Thomas, Chairman  
Supervisor Hilda L. Solis  
Supervisor Sheila Kuehl  
Supervisor Janice Hahn  
Supervisor Kathryn Barger

**FROM:** Mitchell H. Katz, M.D.  
Director

**SUBJECT: HOUSING FOR HEALTH QUARTERLY REPORT**

**Mitchell H. Katz, M.D.**  
Director

**Hal F. Yee, Jr., M.D., Ph.D.**  
Chief Medical Officer

**Christina R. Ghaly, M.D.**  
Chief Operations Officer

On January 14, 2014, the Board instructed the Director of the Department of Health Services (DHS) to submit quarterly reports to the Board on Housing for Health (HFH) permanent supportive housing outcomes including funds, costs, number and composition of clients housed; integrated health, mental health, substance use disorder and benefits establishment results; utilization rate and duration of housing subsidies; number of clients transitioning off of housing subsidies; and characteristics of housing units secured.

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**BACKGROUND**

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In November 2012, DHS established the HFH division to expand access to supportive housing for DHS patients who are homeless and who have complex medical and behavioral health conditions and/or are high utilizers of DHS services.

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HFH utilizes a full range of community-based housing options, including non-profit owned supportive housing, affordable housing, and private market housing. Tenants receive federal rental subsidies such as Section 8 Project Based or Tenant Based Vouchers or a local rental subsidy through the Flexible Housing Subsidy Pool (FHSP). All individuals who are housed through HFH programs are assigned to a homeless services provider to receive Intensive Case Management Services (ICMS). These services include outreach and engagement; case management with on-going monitoring and follow-up; linkage to health, mental health, and substance use disorder services; assistance with benefits establishment; assistance with life skills, job skills, and educational and volunteer

[www.dhs.lacounty.gov](http://www.dhs.lacounty.gov)



Each Supervisor  
February 23, 2017  
Page 2

opportunities; crisis intervention, etc. ICMS providers provide “whatever it takes” wraparound services to assist clients in regaining stability and improved health.

### **NEW EXECUTED WORK ORDER**

Pursuant to the Supportive Housing Services Master Agreement (SHSMA) approved by the Board on June 19, 2012, this is to advise that DHS has executed a Work Orders with the Anti-Recidivism Coalition to provide intensive case management services in supportive housing to clients who are homeless. County Counsel has reviewed and approved the Work Order.

### **QUARTERLY REPORT**

Please find the attached quarterly report in dashboard format. Future reports will include additional data about program performance and finances, as requested at the February 21, 2017 Board Meeting. If you have any questions, please contact me or Dr. Mark Ghaly, Deputy Director of Community Health, at (213) 240-8107.

Attachment

MHK:mg

cc: Chief Executive Office  
County Counsel  
Executive Office, Board of Supervisors

# HOUSING

FOR

# HEALTH

Quarterly Report October-December 2016



Health Services  
LOS ANGELES COUNTY

# GOALS

---

- 1. Create 10,000 units of housing**
- 2. End homelessness in LA County**
- 3. Reduce inappropriate use of expensive health care resources**
- 4. Improve health outcomes for vulnerable populations.**

# CLIENTS HOUSED

- Housing for Health provides housing and supportive services to homeless clients with physical and/or behavioral health conditions, high utilizers of county services, and other vulnerable populations.



# HFH CLIENT PROCESS

## CLIENT IDENTIFICATION

by DHS facilities, County departments, CES, and other partners

## REVIEW/EVALUATE/ROUTE REFERRALS

by HFH Administrative/Clinical Team

## INTERIM HOUSING

RECUPERATIVE  
CARE

STABILIZATION  
HOUSING

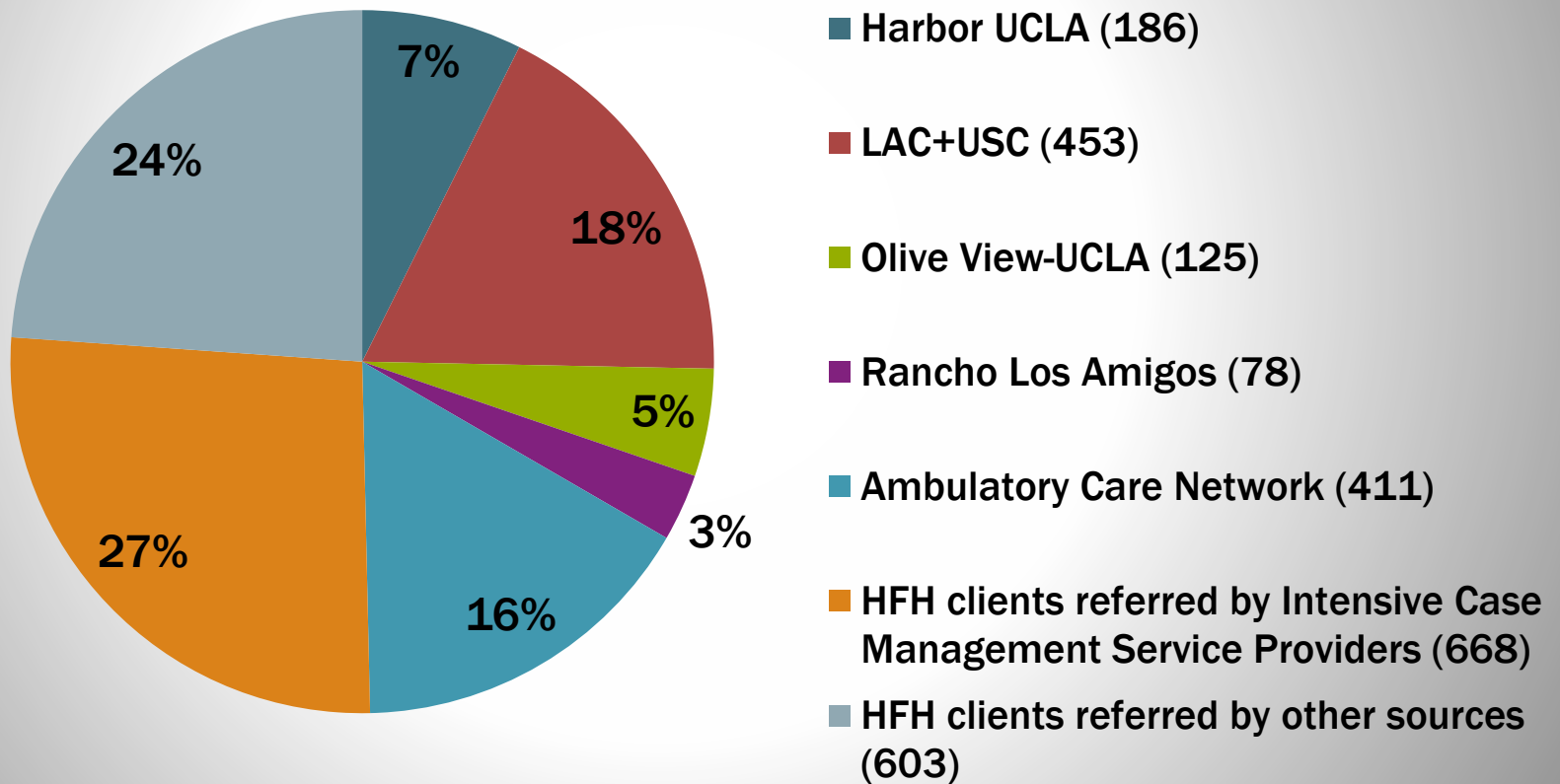
PERMANENT  
HOUSING

# Supportive Housing Quarterly and Program-to-Date Outcomes

<b>Total # of clients who have attained housing since HFH began in November 2012</b>	<b>2524</b>
<b>Total # of clients who are currently housed</b>	<b>2289</b>
<b>Total # of clients housed October-December 2016</b>	<b>355</b>

# WHERE DO HFH REFERRALS COME FROM?

Referral Source of Clients Housed (N=2524)



# HEALTH CONDITIONS OF CLIENTS HOUSED

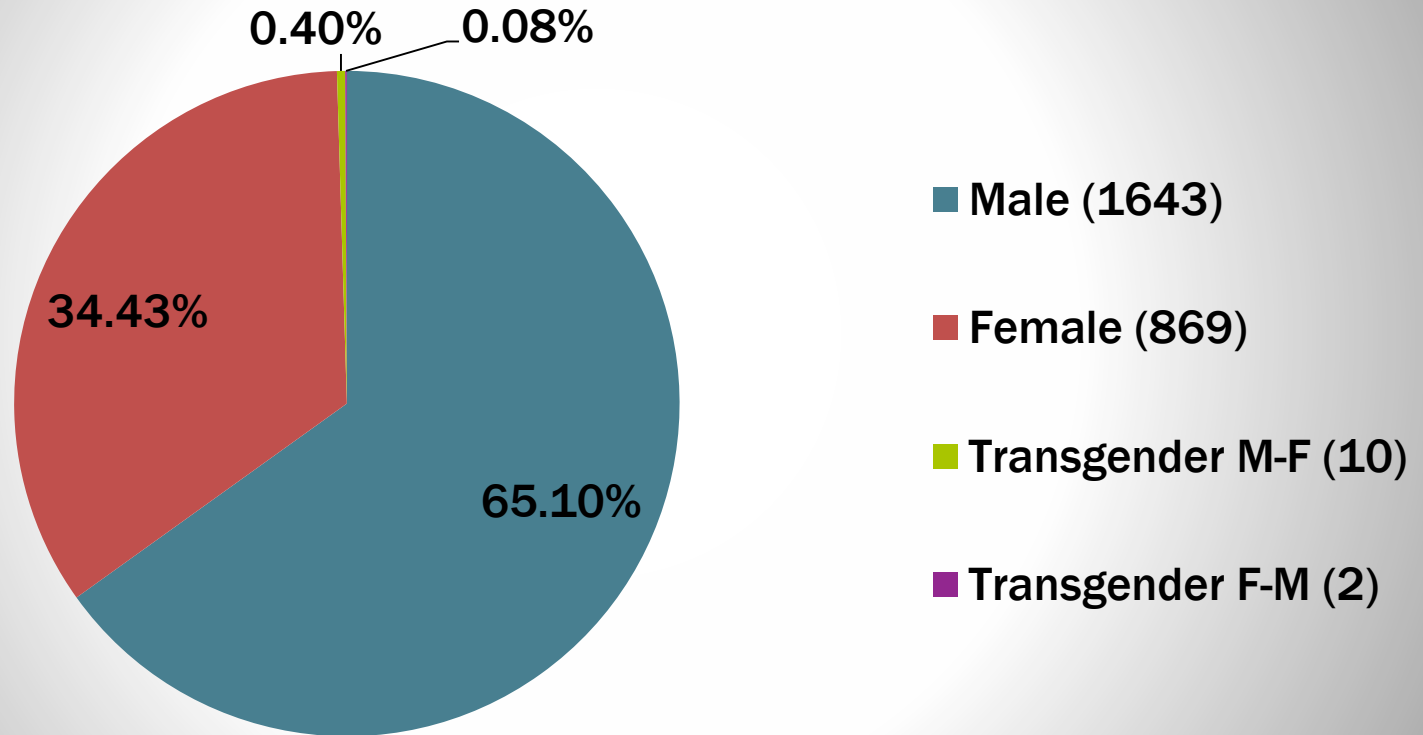
## MOST COMMON CONDITIONS:

- Hypertension
- Diabetes
- Asthma
- Heart disease
- Congestive heart failure
- Cancer
- HIV/AIDS
- Hepatitis
- Depression
- Bipolar disorder
- PTSD
- Schizophrenia

Most HFH clients have **MULTIPLE CHRONIC HEALTH CONDITIONS**

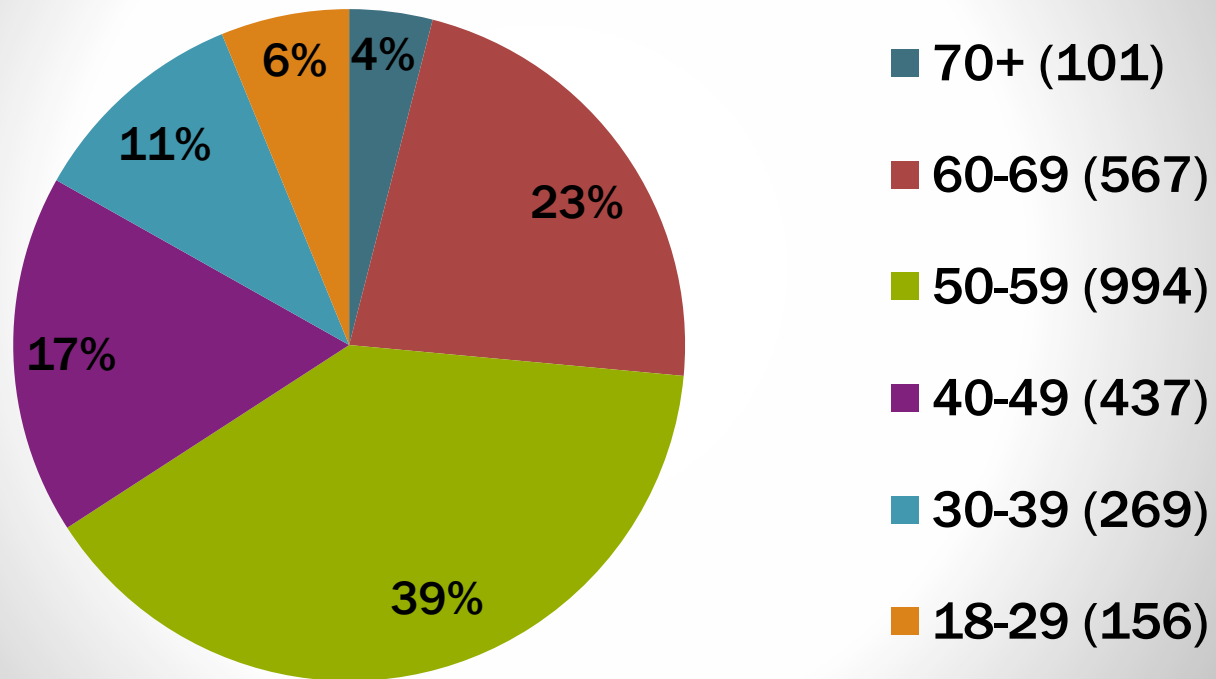
# DEMOGRAPHICS OF CLIENTS HOUSED

## Gender of Clients Housed (N=2524)



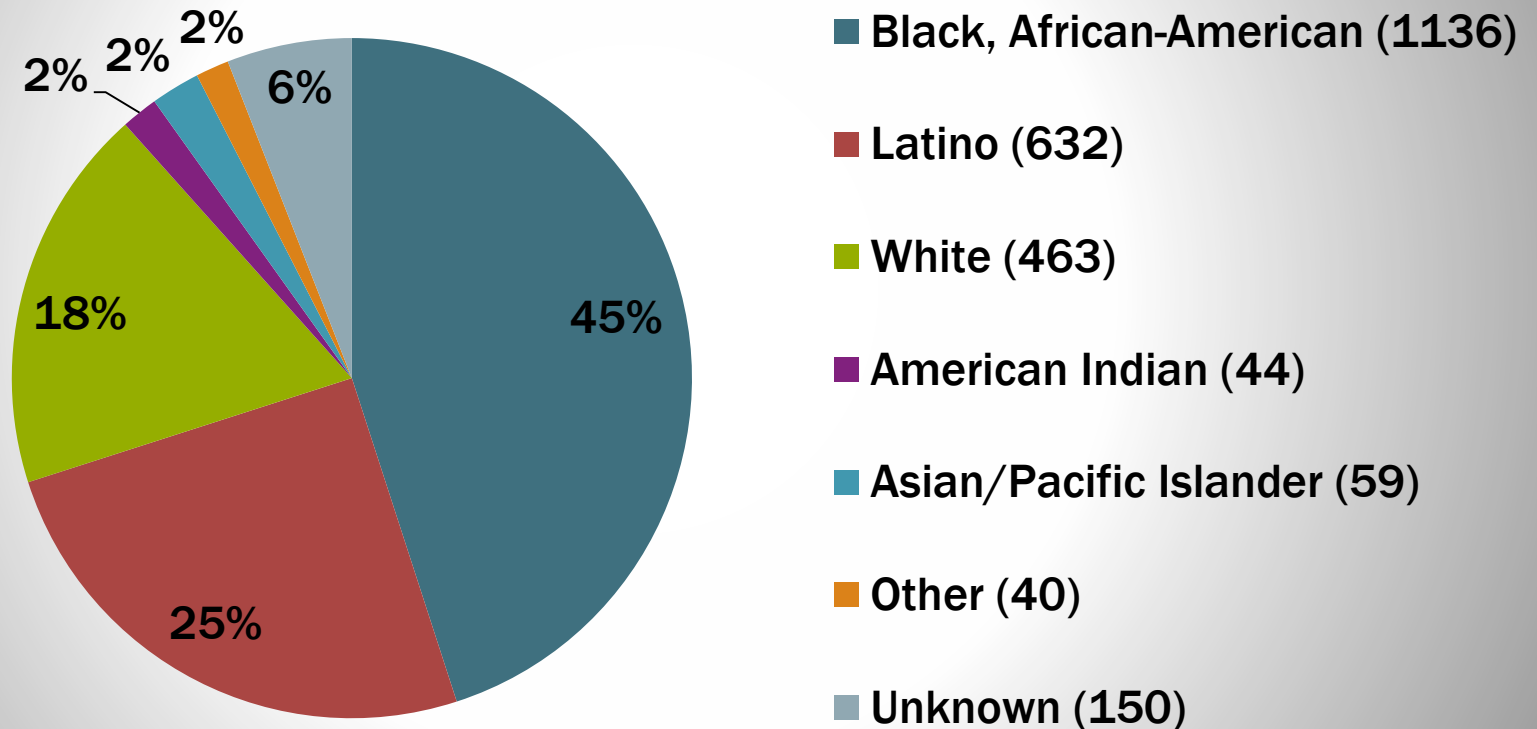
# DEMOGRAPHICS OF CLIENTS HOUSED

## Age of Clients Housed (N=2524)



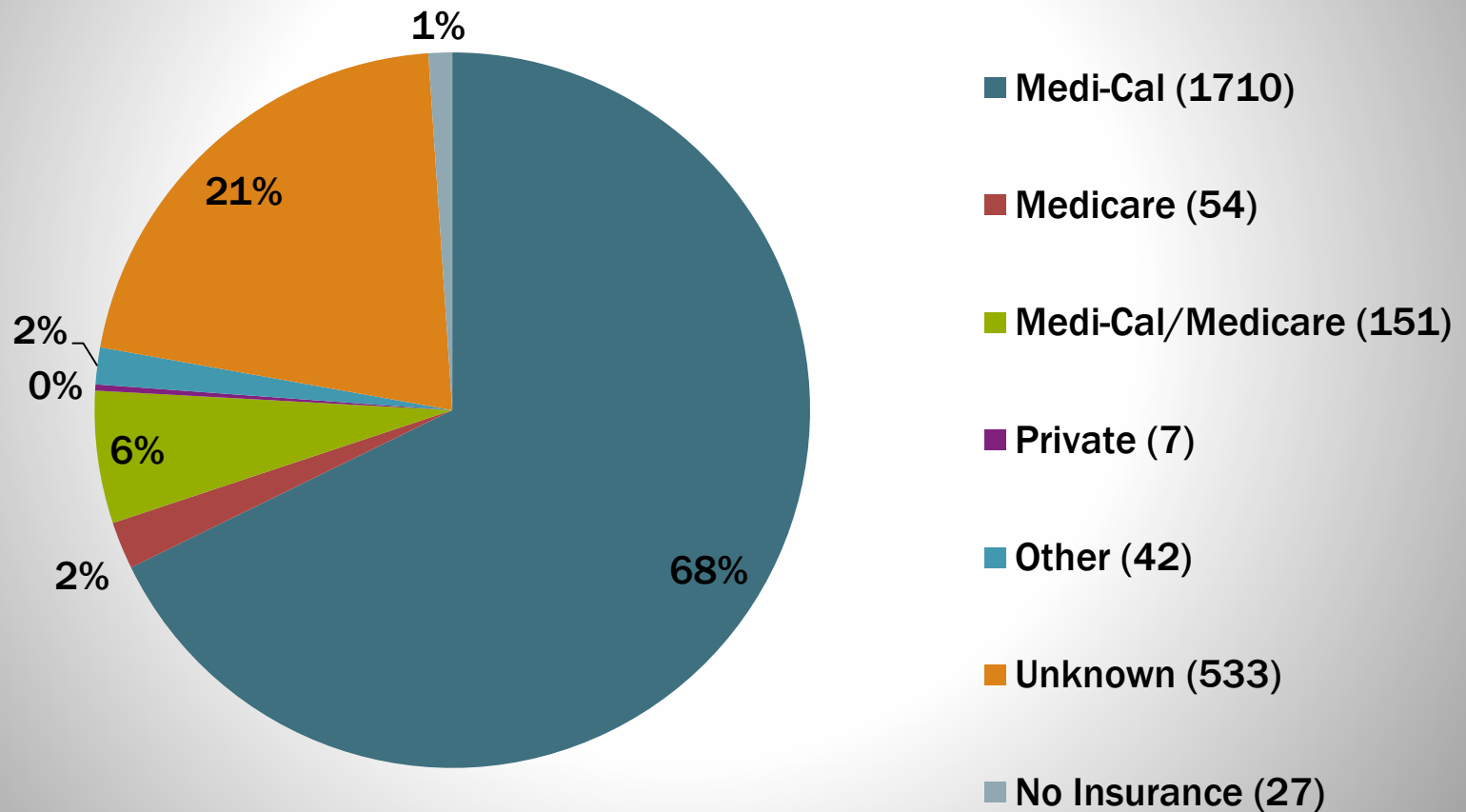
# DEMOGRAPHICS OF CLIENTS HOUSED

## Race/Ethnicity of Clients Housed (N=2524)



# CLIENT HEALTH INSURANCE

Health Insurance Type for Clients Housed (N=2524)

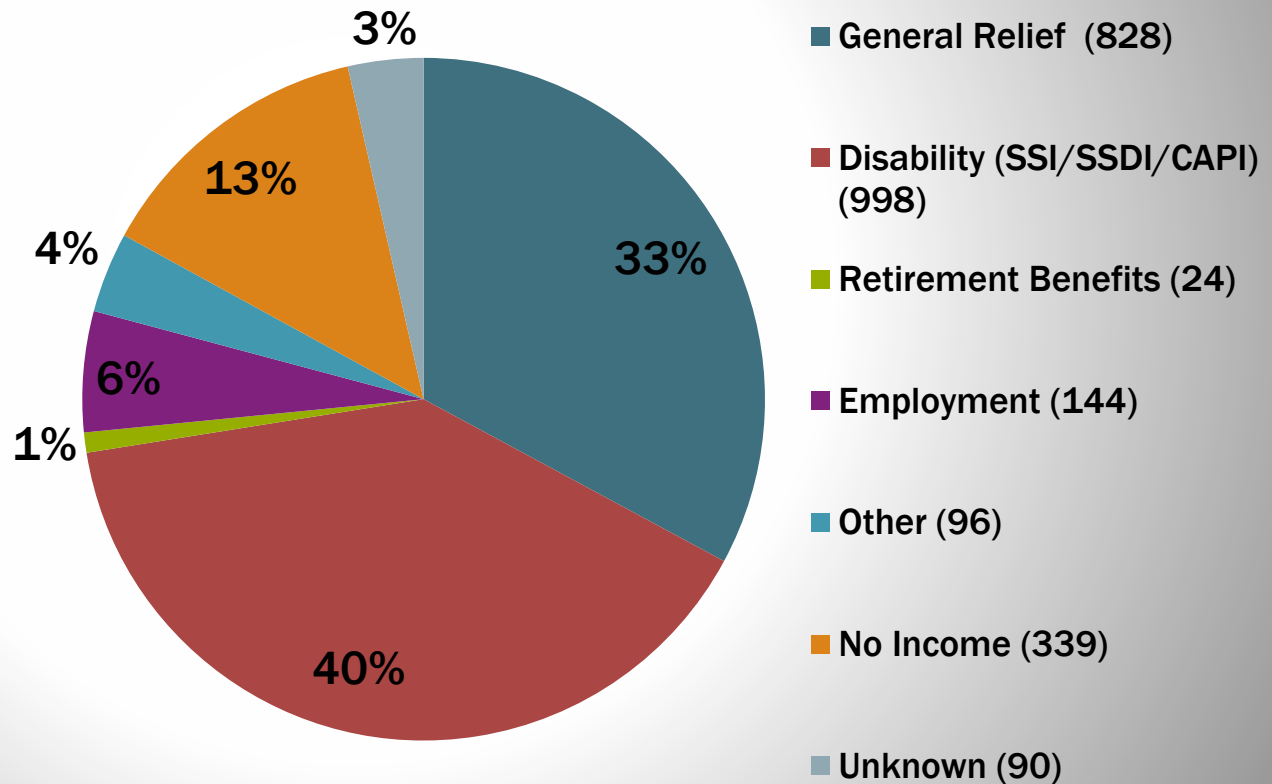




# CLIENT INCOME

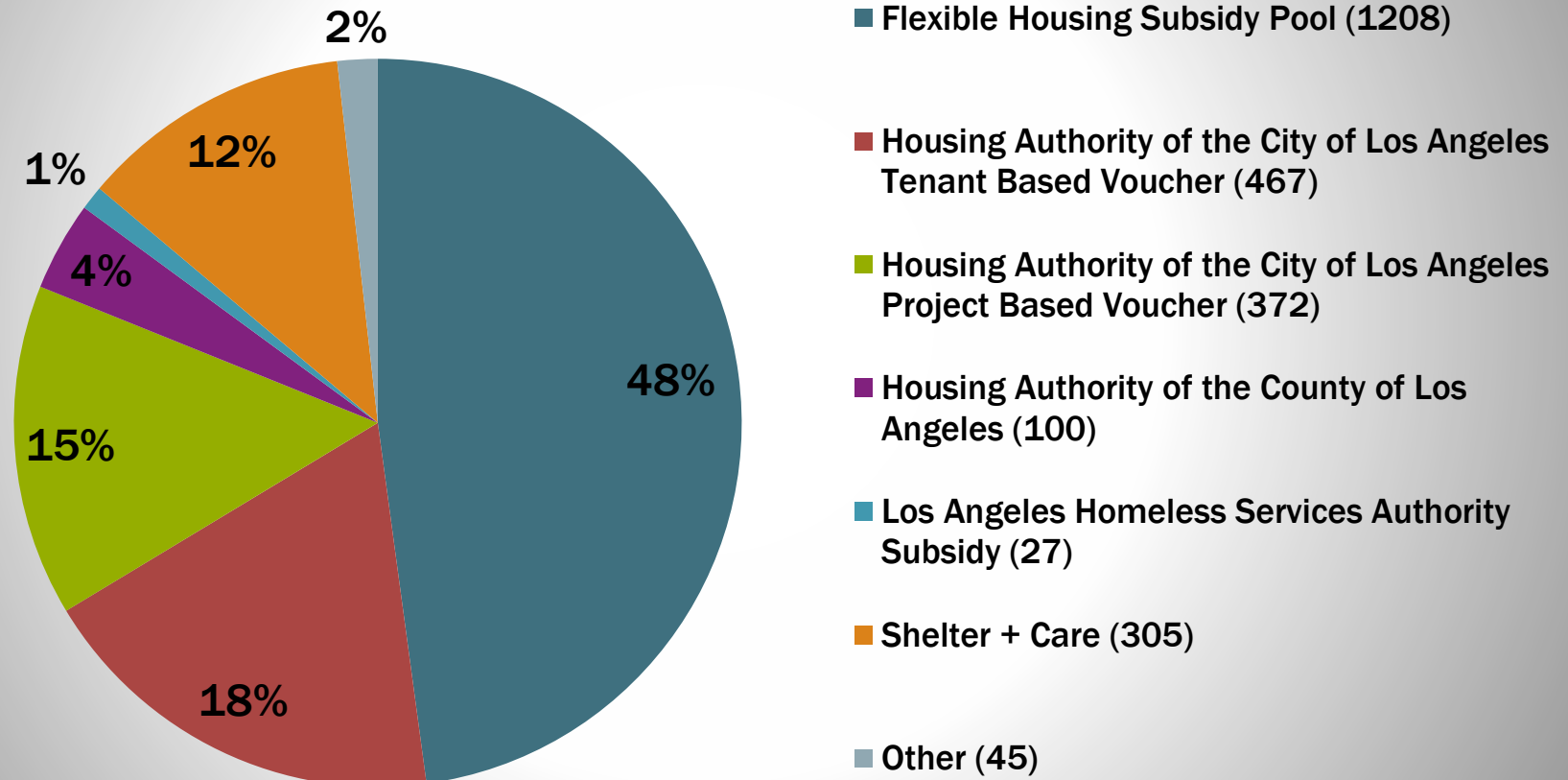
- During the client intake and assessment process, the Intensive Case Management Services (ICMS) provider obtains information on the client's income and health benefits. If the client appears to be eligible for a benefit they are not currently receiving, the ICMS provider will assist them to obtain any necessary documents and will complete and track applications for DPSS Services (CalFresh, Medi-Cal, GR, CalWORKs, and IHSS) and SSI.

## Income of Clients Housed (N=2524)



# TYPE OF HOUSING SUBSIDY

## Subsidy Type for Clients Housed (N=2524)



# INTENSIVE CASE MANAGEMENT

---

- **Every client** connected to services.
- **Individualized service** planning and linkages to health, mental health, and substance use disorder services.
- **Help clients retain** housing and reach health and wellbeing goals.
- **Services provided by** on-site staff or mobile teams.

# HOUSING STATUS AND RETENTION

---

## Homeless Status

- The average length of time that clients experienced homelessness was 3 years and 7 months and the median length of time was 2 years.
- The majority of HFH clients were chronically homeless (75%), which means they were homeless for more than one year or experienced four or more episodes of homelessness in the last three years.

## Housing retention rate

- 96% of clients retained housing (remained in unit or exited to other permanent housing) after 12 months.

## Exits from housing this quarter

- Twenty-one (21) clients exited housing this quarter. Seven (7) voluntarily surrendered their unit, five (5) moved into other independent living situation or moved in with family and friends, five (5) passed away, three (3) were evicted, one (1) needed higher level of care.

# FLEXIBLE HOUSING SUBSIDY POOL



# FHSP PARTNERS



Los Angeles County  
Dept. of Health  
Services



503(c) nonprofit  
coordinating community-  
based partner



Property owners  
throughout Los  
Angeles County



LAC-DHS Supportive  
Housing Rental  
Subsidy Program

# FHSP Quarterly and Program-to-Date Outcomes

Move-ins October-December 2016*	257
Total move-ins to date **	1505
Units secured* October-December 2016	173
Total units secured to date ***	1263

\*Refers to Move Ins October- December 2016 are for the following FHSP projects: DHS (138), Housing and Jobs Collaborative Rapid Rehousing Program (84), WISH (12) and SAM DPSS (23).

\*\* Total move-ins include AB109 funded Board and Care, Breaking Barriers, DHS, DMH, DHS B & C, Housing and Jobs Collaborative, ODR, SAM DPSS, SAM MIT, WISH.

\*\*\* Refers to the number of units that have been secured under a rental subsidy agreement with the property owner and includes occupied and soon to be occupied units.

# CHARACTERISTICS OF FHSP HOUSING UNITS

---

- Units in the HFH portfolio range in size and type across the County from large apartment buildings to smaller single family homes and are appropriate to household size and composition.
- In the most recent quarter, Brilliant Corners secured an additional 173 units in Los Angeles County for the Flexible Housing Subsidy Pool. Of the 173 units, 40 are Studios, 55 are one-bedrooms, 5 are two-bedrooms, 1 is a three-bedroom, 37 are rooms in shared homes, 5 are SRO's and 30 are rooms in Residential Care Facilities.
- Brilliant Corners engages with private landlords, local developers, and local property management agencies, in an effort to provide a diverse pool of units to the program. From a wheelchair accessible studio unit located on the ground floor of a small 2 story apartment complex, to a 1-bedroom unit located in a 45 unit complex, Brilliant Corners is able to provide patients with a unit that offers the greatest chances of long-term housing success.



# FEATURED HOUSING SITE AND PATIENT STORY



Health Services  
LOS ANGELES COUNTY

# DR. DAVID L. MURPHY SOBERING CENTER

A new facility in Skid Row is providing a safe place for chronic alcoholics to sober up in lieu of being transported to area hospitals or jails.

The Dr. David L. Murphy Sobering Center is open 24 hours a day and can house up to 50 people at a time. Clients will get linked to substance abuse treatment and other services to rebuild their lives and break the cycle of streets, emergency rooms and jails that play out here every day.

“This center will help those struggling with alcoholism without criminalizing them or having them languish in hospital waiting rooms,” Supervisor Mark Ridley-Thomas said at the opening on December 16.

Los Angeles Fire Department medical director Dr. Marc Eckstein described a dysfunctional system that strains emergency responders and feeds a vicious cycle. Paramedics and firefighters transport an average of 25 inebriated individuals a day to LAC+USC Medical Center. First responders often must wait for the patient to be admitted before they can leave, tying up resources for true emergencies. Once the patient sobers up and gets discharged, the process repeats itself without effective interventions for those who need help.

The sobering center is part of larger efforts the County is undertaking to move low-level offenders out of jails and costly emergency rooms and into restorative programs, including supportive housing, to reduce recidivism and improve health.

Exodus Recovery is providing intensive case management services and health monitoring under contract with DHS.



# FEATURED CLIENT SUCCESS STORY

---

David\* was going through hell. He was wrapping up a 20-month stint in a county detention center for a probation violation and had lost all hope for a normal life on the outside.

“I was in the wrong place,” he said; alluding to both his mental state and physical location at the time of his arrest. Though he looked forward to his release, he’d have no home to go to and no easy way to regain custody of his two kids.

While in jail, David was approached by a jail in-reach provider who told him of the newly formed Office of Diversion and Reentry program, which could connect him to services and help him find housing.

“I couldn’t believe it. I didn’t think it was going to be real,” he said. “It was so hard for me to believe.”

Constant contact with Volunteers of America, his Intensive Case Management Service Provider, helped him realize that the program was, in fact, real and that they’d support him on his journey to health and home.

Once David was released in August, he was immediately engaged in a joint search with his case manager for a new home. With help from Brilliant Corners, he was able to find a two-bedroom home in October and start the process of regaining custody.

Now David spends his mornings helping his two teenagers get ready for school. Though Brilliant Corners provided furnishings and appliances with their move-in assistance program, David says it’s his children that really fill up the space.

“They complete my home. Show me that they need me and they need me to be a responsible adult and that means the world to me.”

\*Name changed

May 17, 2017

**Los Angeles County  
Board of Supervisors**

**Hilda L. Solis**  
First District


**Mark Ridley-Thomas**  
Second District

**Sheila Kuehl**  
Third District

**Janice Hahn**  
Fourth District

**Kathryn Barger**  
Fifth District

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

FROM: Mitchell H. Katz, M.D.   
Director

SUBJECT: **EVALUATION REPORT OF THE HOUSING SUBSIDY  
AND HOUSING FOR HEALTH PROGRAM (ITEM #16  
FROM THE JANUARY 14, 2014 BOARD AGENDA)**

**Mitchell H. Katz, M.D.**  
Director

**Hal F. Yee, Jr., M.D., Ph.D.**  
Chief Medical Officer

**Christina R. Ghaly, M.D.**  
Chief Operations Officer

313 N. Figueroa Street, Suite 912  
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Tel: (213) 240-8101  
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[www.dhs.lacounty.gov](http://www.dhs.lacounty.gov)

*To ensure access to high-quality,  
patient-centered, cost-effective  
health care to Los Angeles County  
residents through direct services at  
DHS facilities and through  
collaboration with community and  
university partners.*



[www.dhs.lacounty.gov](http://www.dhs.lacounty.gov)

On January 14, 2014, your Board directed the Department of Health Services (DHS) in collaboration with the Chief Executive Officer (CEO), to submit a comprehensive evaluation report of the Flexible Housing Subsidy Pool (FHSP) and the Housing for Health (HFH) Program to the Board in 2017, which would include a preliminary cost benefit analysis and any recommended program improvements. In addition, DHS was instructed to return to the Board after submission of the evaluation report for authority to exercise additional term extension options for the Brilliant Corners FHSP Work Order beyond its June 30, 2017 expiration date.

Please find the enclosed the HFH Progress Report entitled "Bringing Housing to Scale". This report provides information on HFH's accomplishments since its inception in November 2012, as well as providing the evaluation of HFH and the FHSP. Providing housing and health services to our community members who lack a place to live remains one of the most important and urgent responsibilities of the Health Agency and the County family at large. We are proud of the progress we have made since starting HFH, but recognize the challenge ahead given the continuing numbers of people living on our streets.

The support we have received from the Board of Supervisors over the last five years has been remarkable and with the voters' recent passage of Measure H, we look forward to accelerating the pace in which we house homeless Angelenos. The Health Agency, along with our governmental, philanthropic, and community partners is committed to working quickly and effectively, so that all members of our community live in health, dignity, and safety.

If you have any questions, please contact me or Dr. Mark Ghaly, Deputy Director of Community Health, at (213) 240-8107.

MHK:mg

Attachment

c: Chief Executive Office  
County Counsel  
Executive Office Board of Supervisors





# Bringing Housing to Scale: Housing for Health Progress Report

May 2017

HOUSING  
FOR  
HEALTH





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# Bringing Housing to Scale: Housing for Health Progress Report

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**May 2017**

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# Contents

A Message from Dr. Mitchell H. Katz, Director of the Health Agency, County of Los Angeles.....	7
Mission of Housing for Health.....	8

## Overview of Programs

Permanent Supportive Housing .....	10
Housing Portfolio and Pipeline.....	12
Rapid Rehousing .....	14
PSH and Rapid Rehousing Client Statistics.....	16
Interim Housing.....	18
Sobering Center .....	18
Clinical Services.....	20
Street Based Engagement .....	22
Benefits Advocacy.....	24

## Selected Projects

Permanent Supportive Housing .....	26
Affordable Housing.....	30
Sobering Center .....	34

## Flexible Housing Subsidy Pool

Overview .....	36
Partners and Process.....	38
Goals .....	39

## Quantitative Analysis of HFH Clients

RAND Analysis: Overview.....	40
Date Tables and Figures.....	42

## Conclusion

Key Learnings.....	46
Future Opportunities .....	46
Acknowledgments.....	47



*The 100-bed MLK Jr. Recuperative Care Center opened in January 2016.*

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## A Message from Dr. Katz

On behalf of the Health Agency, I am pleased to provide this Housing for Health Progress Report. When I announced our aspirational goal of housing 10,000 of our most vulnerable residents in Los Angeles County a couple years back, it was just that – an aspiration! Of course, the point of an aspiration is to set a marker for which we can strive. As I think you will see in the pages that follow, through the collective work of government, philanthropy, community providers, and advice from advocates and people who are experiencing homelessness, we are turning the aspiration into reality. We are making a difference in the lives of people who need our help the most. We housed nearly 3,000 people and we created over 850 interim housing beds that can help over 2,500 people come off the street each year. We have created the largest local-funding rental subsidy program in the country and opened the County's first sobering center. This has all been accomplished prior to the recent and historic passing of Measure H. Now, through the leadership of the County Board of Supervisors and the goodwill of the voters, there is a dedicated funding source that will only propel us further toward our goal of ending homelessness in Los Angeles.



**DR. MITCHELL H. KATZ, M.D.**

Director of the Health Agency, County of Los Angeles

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The Los Angeles County Department of Health Services Housing for Health division provides housing and supportive services to homeless clients with physical and/or behavioral health conditions, high utilizers of county services, and other vulnerable populations.

96%

12-month housing retention rate

850

Interim housing beds

2,737

Clients who have obtained permanent housing since HFH began in November 2012

# Housing for Health Programs

## Permanent Supportive Housing

### OVERVIEW

Permanent supportive housing, the cornerstone of Housing for Health’s (HFH) approach, includes decent, safe, and affordable housing linked to a flexible array of supportive services. These on-site or roving, field-based supportive services along with access to medical and behavioral health care are integral to achieving housing stability, improved health status, and greater levels of independence and economic security.

DHS supportive housing projects use a variety of community-based housing options including:

- Non-profit owned supportive housing – non-profit owned buildings with units dedicated to serving homeless individuals and/or families.
- Master leased buildings – long term leases of privately owned buildings (lease entire building).
- Scattered site housing – units rented from private landlords (can range from renting a single unit to blocks of units within a building).

HFH relies on both federal rental subsidies (project-based and tenant-based vouchers) as well as a locally funded rental subsidy program called the Flexible Housing Subsidy Pool, which is described in detail in this report on page 36.

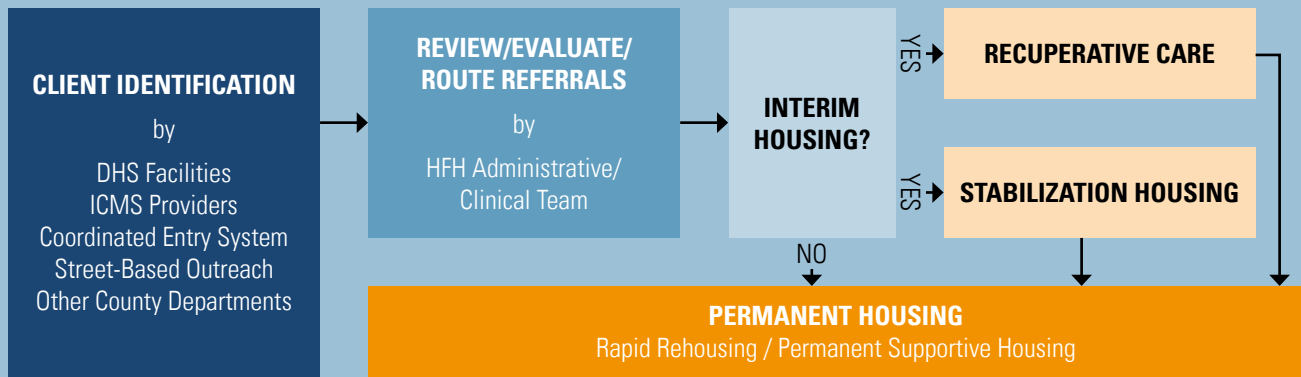
### ROLE OF INTENSIVE CASE MANAGEMENT SERVICES IN PERMANENT SUPPORTIVE HOUSING

HFH contracts with community-based organizations to provide Intensive Case Management Services (ICMS) to all clients. Currently, HFH contracts with 20 ICMS provider agencies throughout Los Angeles County. HFH staff are consistently expanding work orders with ICMS providers to increase the permanent housing inventory. ICMS providers use a client-centered approach that is sensitive to the challenges that homeless persons with a range of medical and behavioral issues face as they move into and maintain permanent supportive housing. They employ a “whatever it takes approach” to assist clients in their transition from homelessness to permanent housing. Services provided include:

- Client outreach and engagement
- Ongoing case management
- Linkages to health, mental health, and substance use disorder services (link to a medical home, Medicaid, SSI, IHSS)
- Benefits assistance
- Assistance with life skills, employment, and education
- Locating housing and eviction prevention services

When a client is referred to an ICMS provider, they receive personalized services based on a thorough assessment of their needs and goals. A strengths based approach to service delivery is critical to creating housing stability for clients transitioning from homelessness to permanent supportive housing. Case managers create individualized service plans with the use of trauma informed assessments and work on goals during each phase of the journey

# HFH Client Process



from homelessness to permanent housing. When an ICMS provider finds that additional services are needed to meet their clients' goals they create partnerships and linkages with agencies to make referrals and provide follow up to ensure those services are provided. HFH has embraced the "whatever it takes" philosophy which is client centered and is the basis for how services are provided in permanent supportive housing.

HFH offers monthly capacity building and training opportunities for agencies that focus on topics such as trauma informed care, hoarding, housing retention, harm reduction, training and self-care, intimate partner violence, health advocacy, and data collection and documentation.

## REFERRAL PROCESS

The Access, Referral and Engagement Unit (ARE) within HFH is re-

sponsible for processing all HFH applications and for matching individuals to interim and permanent housing opportunities. In March 2017, HFH implemented a new web-based database called CHAMP. HFH receives applications using CHAMP from DHS facilities, ICMS partner agencies, the Office of Diversion and Reentry (ODR), the Coordinated Entry System (CES), and various County departments. Individuals who need interim housing are assessed by ARE staff and vetted for an appropriate placement setting while waiting to be matched to permanent housing. ARE staff evaluate the pool of individuals who are available for permanent housing assignment and make matches based on geography, service needs, etc.

Once an individual is referred to an ICMS provider, the ICMS provider assigns a case manager who makes contact with the client and does whatever it takes to get the individual permanently housed.

## ICMS Providers in Permanent Supportive Housing

Alliance for Housing and Healing  
Amity Foundation  
Downtown Women's Center  
Gettlove  
Homeless Healthcare Los Angeles  
Housing Works  
Imagine LA

LA Family Housing  
Life STEPS  
Mental Health America of Los Angeles  
PATH (People Assisting the Homeless)  
The People Concern  
Skid Row Housing Trust  
SRO Housing Corp

Special Services for Groups  
St. Joseph's Center  
Step Up on Second  
Union Station  
Union Station Homeless Services  
Watts Labor Community Action Committee



# Housing Portfolio and Pipeline

The HFH portfolio includes project-based sites that are currently in operation and the pipeline includes project based sites and their projected opening dates. For both tables, rental subsidies are either through the Flexible Housing Subsidy Pool or through the Section 8 Project-Based Voucher program in partnership with the Housing Authority of the County of Los Angeles or the Housing Authority of the City of Los Angeles. These tables do not include scattered site housing, which accounts for an additional 1,858 portfolio units.

## Interim Housing Portfolio

Project Name	Beds
HR360 - Ella's Foundation	19
Illumination Foundation Recup. Care	60
JWCH - Bell Recuperative Care	25
JWCH - Enhanced Services Program	50
MLK Recuperative Care Center	100
Serenity Recuperative Care	10
The People Concern - South LA Rec.	38
<b>Total Recuperative Care Beds</b>	<b>302</b>

Project Name	Beds
Anti-Recidivism Coalition	20
First To Serve (Coronado site)	80
First To Serve (Vernon site)	75
LA Family Housing	6
PATH - PATHCares	38
Prototypes	42
SFV Community Mental Health - SRO	38
SRO Housing - The Russ Hotel	75

Project Name	Beds
St. Joseph's Center - Manor House	30
The People Concern - LAMP HAUS	25
Union Station Homeless Services	20
Weingart Center Association	100
<b>Total Stabilization Housing Beds</b>	<b>549</b>
<b>Total Interim Housing Beds</b>	<b>851</b>

## Permanent Supportive Housing Portfolio

Project Name	Open	DHS Units	Total Units	
2013	Park View Place	Apr-13	20	60
	South LA/CRCD	May-13	15	43
	South LA/NSP	Sep-13	56	56
	Star Apartments	Nov-13	100	102
	<b>2013 Total</b>		<b>191</b>	<b>261</b>
2014	The Alexandria	Mar-14	110	400
	Arbor Court	Mar-14	56	150
	Louis Apartments	Jun-14	29	46
	Burlington Family Apartments	Aug-14	13	30
<b>2014 Total</b>		<b>208</b>	<b>626</b>	
2015	Broadway Villas	Jan-15	16	48
	Harding Apartments	Mar-15	11	29
	New Pershing Apartments	Apr-15	52	69
	Klump Street	Apr-15	3	13
	Step Up on Colorado	Jul-15	32	32

Project Name	Open	DHS Units	Total Units	
2015	Vermont Villas	Oct-15	28	70
	<b>2015 Total</b>		<b>142</b>	<b>261</b>
	Hollenbeck Terrace	Jan-16	24	90
2016	Gateway Apartments	Mar-16	20	21
	Immanuel Senior Housing	Jun-16	12	25
	Winnetka Senior Apartments	Jun-16	47	95
	Southeast 1	Aug-16	40	106
	Crest Apartments	Aug-16	63	65
	Teague Terrace	Sep-16	16	58
	The Six Apts	Sep-16	50	52
	<b>2016 Total</b>		<b>272</b>	<b>512</b>
2017	Tiki	Jan-17	35	36
	Mosaic Gardens at Willowbrook	Apr-17	31	61
<b>2017 Total</b>		<b>66</b>	<b>97</b>	
<b>Grand Total PSH</b>		<b>879</b>	<b>1,757</b>	

## Permanent Supportive Housing Pipeline

	Project Name	Open	DHS Units	Total Units
FY 2016 - 17	Arlington Square	Jun-17	48	48
	T. Bailey Manor	Jun-17	10	46
	<b>FY 2016 - 2017 Total</b>		<b>58</b>	<b>94</b>
FY 2017 - 2018	Mosaic Gardens at Pomona	Aug-17	25	49
	Skid Row Central 1	Sep-17	112	113
	Anchor Place	Oct-17	123	124
	Mosaic Gardens at Westlake	Nov-17	63	125
	The Simone	Nov-17	113	114
	Whittier Place II	Dec-17	33	34
	Courson Arts Colony East	Feb-18	81	81
	El Segundo Apartments	Feb-18	79	80
	Wilmington & 118th	Feb-18	22	109
	127th Street Apartments	Mar-18	79	80
	433 Vermont	Mar-18	20	21
	Cloudbreak Compton	Mar-18	49	50
	The Salvation Army Bell Oasis Apts.	Mar-18	64	65
	Metro at Western	May-18	16	33
	Poppy Gardens	May-18	25	40
	7th and Widmer	Jun-18	75	76
	Blue Hibiscus	Jun-18	21	22
Rampart Apartments	Jun-18	22	23	
Washington Court	Jun-18	103	104	
<b>FY 2017 - 2018 Total</b>		<b>1,125</b>	<b>1,343</b>	
FY 2018 - 2019	Casa Carmen	Jul-18	24	25
	1795 Long Beach Blvd	Aug-18	99	100
	Courson Arts Colony West	Aug-18	40	80
	Antelope Valley Veterans & Families	Sep-18	64	75
	King 1101	Sep-18	20	26
PATH Villas @ South Gate	Sep-18	59	60	
	<b>Grand Total</b>		<b>2,903</b>	<b>3,629</b>

	Project Name	Open	DHS Units	Total Units
FY 2018 - 2019 (cont.)	FLOR 401 Lofts	Oct-18	50	99
	Palo Verde Apts.	Oct-18	25	49
	SP7 Apartments	Oct-18	49	98
	Lamp Lodge	Dec-18	84	83
	The PSH Campus	Dec-18	49	50
	Bell Oasis	Mar-19	21	64
	LINC Long Beach	Jun-19	237	238
	Pointe on Vermont	Jun-19	9	10
	Stanford Ave Apartments	Jun-19	45	85
	<b>FY 2018 - 2019 Total</b>		<b>875</b>	<b>1,142</b>
FY 2019 - 2020	Elden Elms	Sep-19	92	93
	PATH Metro Villas Phase 2	Sep-19	121	122
	Florence Library Apartments	Oct-19	58	117
	Golden Motel North	Dec-19	77	78
	Golden Motel South	Dec-19	90	91
	Six Four Nine Lofts	Dec-19	28	55
	6218 Compton	Apr-20	29	30
<b>FY 2019 - 2020 Total</b>		<b>495</b>	<b>586</b>	
FY 18 - 19	Whittier & Downey SE	Sep-20	35	71
	<b>FY 2018 - 2019 Total</b>		<b>35</b>	<b>71</b>
FY TBD	9th Street Mixed-Use		195	196
	Baldwin & Rose Family Vet. Housing		17	55
	PATH Hollywood Villas		19	38
	PATH Metro Villas		64	65
	Westmont Vistsa		20	39
<b>FY TBD Total</b>		<b>315</b>	<b>393</b>	

## Rapid Rehousing

The Housing and Jobs Collaborative (HJC) was implemented in early 2016. HJC is a rapid rehousing program that connects individuals experiencing homelessness to affordable permanent housing through a tailored package of services that includes flexible term rental subsidies, case management, and employment services. Similar to PSH, HJC is client-centered and employs a “whatever it takes approach” to assist clients in their transition from homelessness to permanent housing.

The target population for HJC services are individuals identified as needing short-term rental subsidies who are not expected to need ongoing support services. The average time that a client receives a housing subsidy is approximately one year; however, some clients will be able to transition to paying their own rent in a few months and some need the subsidy for longer than a year. Case management services include: linkage to health, mental health, and substance use disorder services; building rapport and trust; providing move in assistance; restoring and maintaining independent living skills; budgeting and money management; increasing income; and a flexible array of employment services. Employment services include employment search, resume building, practice interviews, vocational and educational classes, and other training opportunities. HJC clients are also assisted with practical items that support employment such as clothing, bus tokens/taxi vouchers, phones, voice mail, and mailing address.

Brilliant Corners is a key HJC partner. Brilliant Corners provides housing location services, administers monthly rental subsidy payments, and is available to tenants and owners 24/7 to address any issues that come up. Brilliant Corners also provides

relocation for clients who wish to reunite with family/friends or a service agency out of Los Angeles County and move in assistance such as financial support for deposits, application fees, and household goods and furniture.

HFH has contracted with nine community based homeless services providers to provide HJC case management and employment services in all eight Service Planning Areas (SPA) in the County of Los Angeles.

SPA	Agency
1	Mental Health America
2	LA Family Housing
3	Union Station Homeless Services
4	The People Concern
5	St. Joseph's Center
6	Special Services for Groups
7	PATH
8	Mental Health America
All	Good Seed; Integrated Recovery Network

HJC is partnering with cities to provide rapid rehousing services within their communities through the Homeless Initiative, B3, Partnering with Cities to Expand Rapid Rehousing. Cities that want homeless residents to access the HJC can contribute to the rental subsidy cost and HFH will fund the remainder of the rental subsidy cost and the full cost of support services.



Photo Credit: Elizabeth Daniels for Curbed.com

## Client Stories: Laura and Chloe\*

Laura and Chloe are both transitional age youth (TAY) who were living in an RV on a relative's property when their life nearly turned upside down. The relative passed away and the property was taken over by the estate and they were forced to leave. Laura and Chloe were unable to afford a home of their own and they suddenly found themselves homeless.

Luckily, Laura and Chloe were enrolled in a woman-focused coding training program called Codetalk which is at St. Joseph's Center. St. Joseph's Center is one of Housing for Health's participating agencies in the Housing and Jobs Collaborative (HJC). HJC is a rapid rehousing program for individuals who need short term rental subsidy support and case management services. The pair were quickly enrolled into HJC and continued with the job

training program that would enable them to have competitive job opportunities.

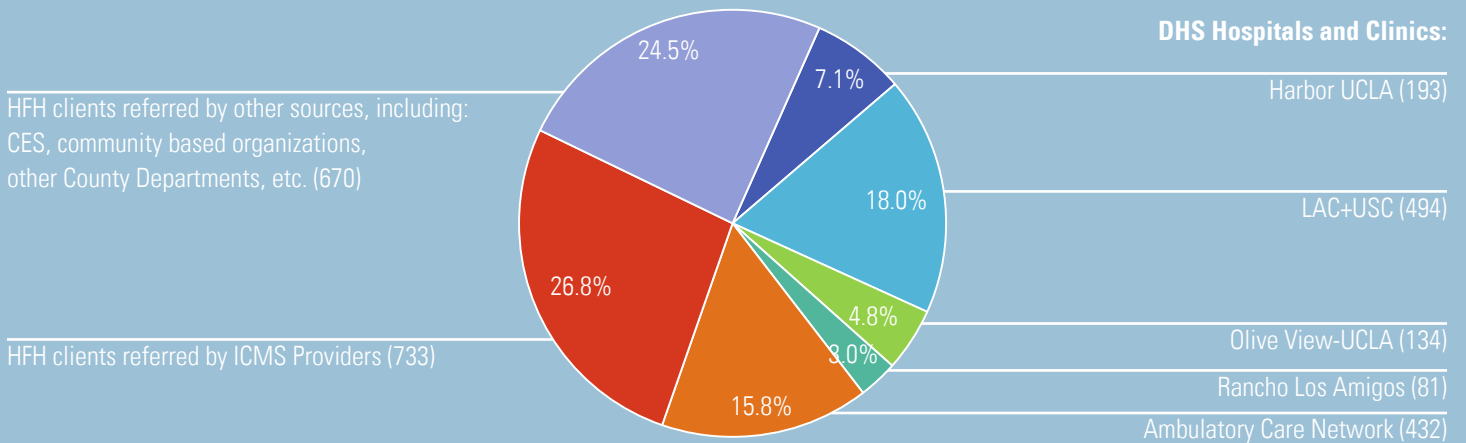
Their HJC case manager sprang into action by locating a 2-bedroom apartment they could share with good access to public transportation to Venice, where their training was located. Housing subsidy operator and HJC partner Brilliant Corners was able to secure the apartment and their subsidy and lease applications were approved within days of locating the apartment.

With support from Codetalk, as well as St. Joseph's Center's TAY program, Safe Place for Youth, Laura and Chloe were able to continue their program and transition into housing nearly seamlessly. Where they lost their footing, HJC and its partners were able to provide a stable foundation so they could continue on their path towards success.

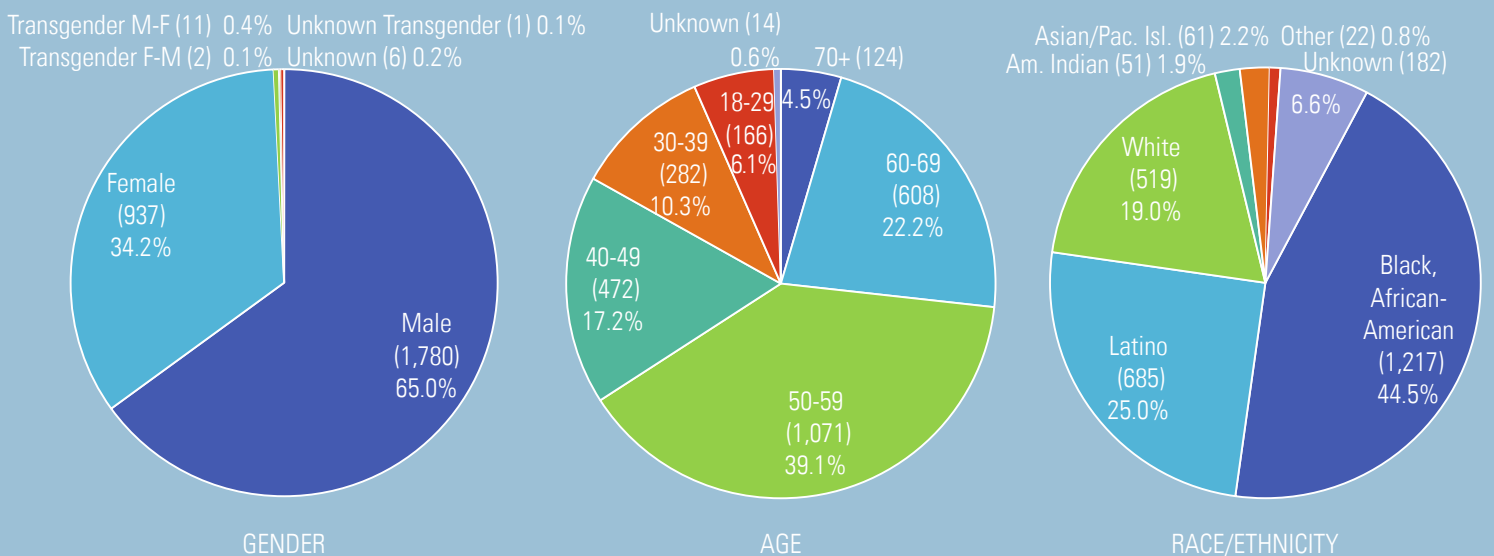
\* Names has been changed to protect identities.

# PSH and Rapid Rehousing Client Statistics (n=2,737)

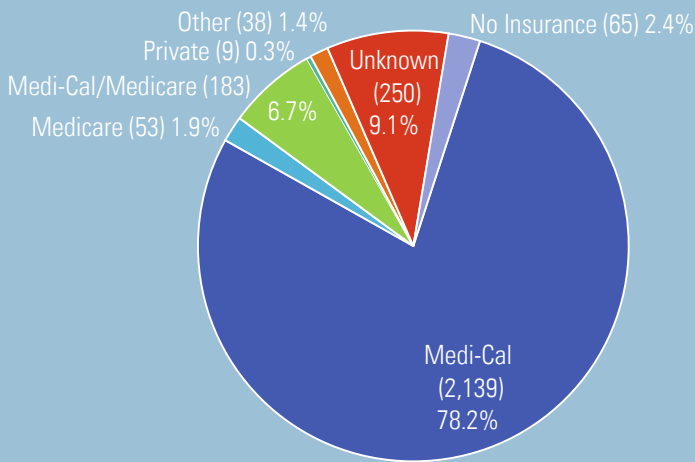
## Referral Source of Clients Housed



## Demographics of Clients Housed

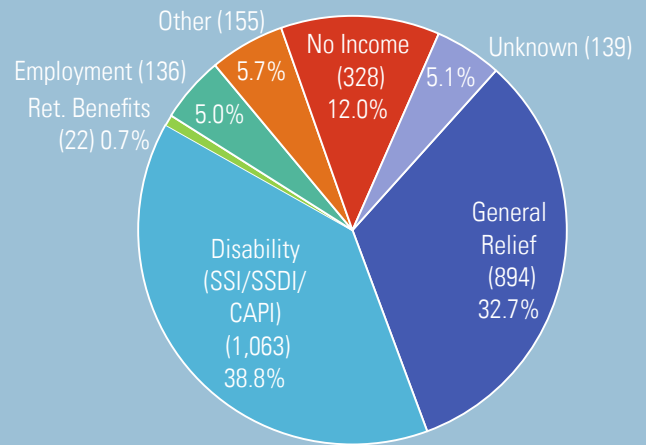


### Client Health Insurance



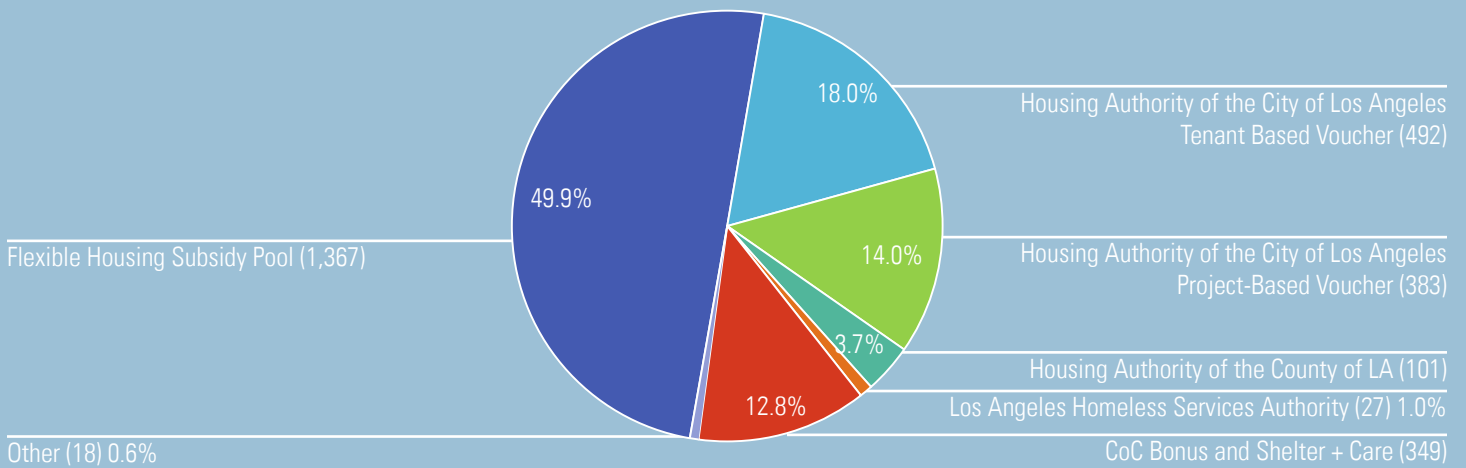
INSURANCE PROVIDER

### Client Income



SOURCE OF INCOME

### Subsidy Type for Clients Housed



## Client Stories: Angela\*

Angela had been homeless for more than 25 years, roaming from corner to corner on Skid Row under a drug-induced fog. "There is nowhere in downtown I haven't been. Some places were dark and spooky," she said recently. "I went to some places nobody should ever go."

After losing custody of her five children and seeing friends pass away in the streets, she decided she wanted a different life. Outreach workers connected Angela to the Star Clinic for treatment of her uncontrolled diabetes and heart disease.

The ability to visit a clinic with a permanent location and see the same provider helped introduce Angela to some stability and lay the foundation for a healthier life. She credits many of her achievements to Lynda Stack, the Star Clinic's Nurse Practitioner. "Since I've been under her care, my life has changed," Angela said.

Lynda referred Angela to HFH and she was placed into Interim Housing. Wanting to get away from the temptations and influences of Skid Row, Angela was placed at LAMP HAUS, an interim housing site near MacArthur Park.

Her ICMS case manager, Lydia Echols, said Angela is a great advocate for herself and others. "She knows what she needs and who to ask for it." Echols continued, saying that many people in her situation are afraid to speak out in fear of not getting housed or seeming difficult, but she knew she wanted to get better, something that Angela proudly acknowledges.

"My diabetes is controlled now. I'm getting treatment for my heart. I don't want to die. If I didn't die during my addiction I sure don't want to die now, not for lack of care."

Aside from her health improving, Angela has improved relations with her two youngest children, whom she lost custody of when the youngest was only a few months old. "Now my daughter is 20 and has a baby of her own. I wanted to make sure I had a place that they could come and visit me in."

Her new home in South Los Angeles has enough room for her growing family to visit and is close enough to public transportation to allow her to travel to see them as well.

\* Name has been changed to protect identity.

## Interim Housing

Shortly after beginning the work to create thousands of units of permanent housing, HFH realized there was a critical shortage of interim housing options, which could temporarily house individuals as they wait for a permanent housing placement. HFH has worked steadily to increase interim housing opportunities and now has over 850 interim housing beds and more in the pipeline. HFH has developed two types of interim housing: stabilization housing and recuperative care.

### STABILIZATION HOUSING

Stabilization housing is temporary housing that provides an immediate exit off the streets and a location for case managers and/or housing navigators to further work with people on route to permanent housing.

### RECUPERATIVE CARE

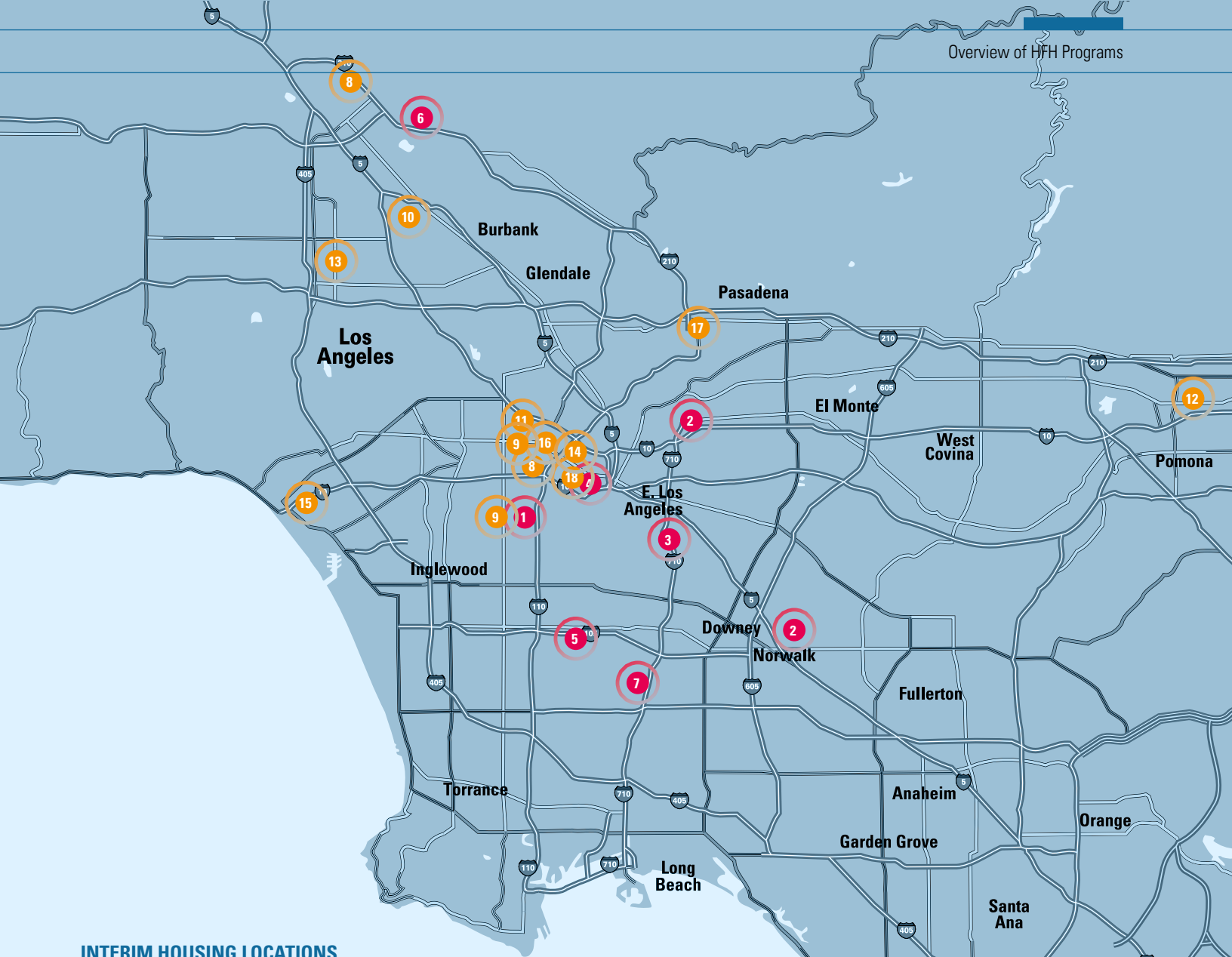
Recuperative Care provides an enriched environment with health oversight and case management to homeless individuals being discharged from a hospital or other institutional setting who are recovering from an acute illness or injury or who have conditions that would be exacerbated by living on the street or in a traditional shelter environment. It also provides a location for case managers and/or housing navigators to assist clients as they transition to permanent housing. DHS has utilized County buildings for this purpose (MLK Recuperative Care) and it is exploring other County sites.

## Sobering Center

In January 2017, HFH opened the Dr. David L. Murphy Sobering Center, which is operated by Exodus Recovery, Inc. The site provides a welcoming, safe and secure environment for short term (under 24 hours) monitoring and management of persons under the influence of alcohol and/or drugs and provides an alternative to jail and hospital emergency departments.

Open 24/7, the Sobering Center targets individuals living on the streets of Skid Row and adjacent areas.

- The 50-bed facility allows police and fire departments, outreach and engagement teams and downtown partners to divert people under the influence of alcohol or drugs who may have otherwise been taken to an emergency department or jail.
- The site is a monitored recovery milieu with nursing observation/care, resting beds/pods, showers, light snacks, hydration, laundry facilities.
- Social services and linkages to community resources are provided including detox, residential rehabilitation, sober living, crisis and interim housing, and primary and mental health care.
- The program is fully integrated with the DHS Electronic Medical Records system enabling continuity of care.



**INTERIM HOUSING LOCATIONS**

- |                       |     |  |
|-----------------------|-----|--|
| Recuperative Care     | 1.  | HR360 - Ella's Foundation, Los Angeles (19 beds)                                 |
|                       | 2.  | Illumination Foundation Recuperative Care, Santa Fe Springs & Alhambra (60 beds) |
|                       | 3.  | JWCH - Bell Recuperative Care, Bell (25 beds)                                    |
|                       | 4.  | JWCH - Enhanced Services Program, Los Angeles (50 beds)                          |
|                       | 5.  | MLK Recuperative Care Center, Los Angeles (100 beds)                             |
|                       | 6.  | Serenity Recuperative Care, Lake View Terrace (10 beds)                          |
|                       | 7.  | The People Concern - South LA Recuperative Care, East Rancho Dominguez (38 beds) |
| Stabilization Housing | 8.  | Anti-Recidivism Coalition, Sylmar (20 beds)                                      |
|                       | 9.  | First To Serve (Vernon & Coronado sites), Los Angeles (155 beds)                 |
|                       | 10. | LA Family Housing, North Hollywood (6 beds)                                      |
|                       | 11. | PATH - PATHCares, Los Angeles (38 beds)  |
|                       | 12. | Prototypes, Pomona (42 beds)   |
|                       | 13. | San Fernando Valley Community Mental Health Center, Van Nuys (38 beds)           |
|                       | 14. | SRO Housing - The Russ Hotel, Los Angeles (75 beds)                              |
|                       | 15. | St. Joseph's Center - Manor House, Venice (30 beds)                              |
|                       | 16. | The People Concern - LAMP HAUS, Los Angeles (25 beds)                            |
|                       | 17. | Union Station Homeless Services, Pasadena (20 beds)                              |
|                       | 18. | Weingart Center Association, Los Angeles (100 beds)                              |

**TOTAL: 851 interim housing beds**



## Housing for Health Clinical Services

Infusing high-quality clinical care and consultations is fundamental to HFH's service delivery model. Given the complexity of the physical and behavioral health conditions many homeless people face, having MDs, Psychiatrists, NPs, RNs, and Social Workers providing direct services or consulting with our ICMS providers has greatly increased the effectiveness and reach of our work. Clinical services are woven into HFH programs in the following manner:

### **STAR CLINIC**

The DHS-operated Star Clinic, located in the heart of Skid Row, is the hub of our clinical services. The clinic specializes in serving patients with complex physical and behavioral health issues who suffer high rates of morbidity. By providing consistent primary care services tailored to the needs of chronically homeless individuals, the Star Clinic helps HFH reach two of its primary goals: improving the health and well-being of vulnerable populations and reduction of the overuse of expensive hospital based resources. The clinic's location in Skid Row provides access to care for a population that has been historically difficult to engage and has often fallen through the cracks in traditional healthcare settings. The clinic also provides easy access to medical care for HFH clients residing in nearby interim and permanent housing projects.

### **INTENSIVE CASE MANAGEMENT SERVICES**

HFH contracts with a wonderful group of homeless services providers who deliver a range of services that help homeless people obtain and remain in housing. HFH has found that by making training and clinical consultation readily available to case man-

agers, their knowledge, skill level, and confidence in providing services to complex clients increases. This additional level of training also ensures that clients get linked to primary care and other specialty health services. Conversely, it is the skill and experience of the case managers who are able to develop trust with the client that lays the ground work for successful referrals to health providers. In addition to training and consultation, HFH clinical providers make house calls to residents in HFH supportive housing.

### **INTERIM HOUSING**

HFH clinicians provide consultation, clinical oversight, and direct services in the growing network of interim housing sites. At our largest recuperative care program, located on the MLK Outpatient Center and Community Hospital campus, HFH directly provides the clinical consultations its residents require.

### **STREET ENGAGEMENT**

HFH nurses directly participate in several street-based engagement teams. With the expanded county-wide outreach efforts currently underway, HFH will be providing clinical consultation to team leads throughout the County.

### **BENEFITS ADVOCACY**

HFH will be providing clinical support to the new county-wide benefits advocacy program funded as a result of the County's Homeless Initiative. MD and psychiatric consultation will be available to the teams working throughout the County.



## The Star Apartments

Opened in November 2013, the Star Apartments provides permanent supportive housing to 100 formerly homeless individuals using innovative modular pre-fabricated units that are cantilevered over a two-story concrete superstructure. Designed by the award-winning Michael Maltzan Architecture, Star Apartments is a LEED for Homes Platinum development that aims to inspire residents and the surrounding community. The apartments are terraced above a Health and Wellness Center on the second floor, which includes a community kitchen, art rooms, running/walking track, and space for supportive services.

Residents can also enjoy a raised community garden, and multiple outdoor patio spaces for exercise and group activities. On the ground floor, the Star houses the Star Clinic operated by the Los Angeles County Department of Health Services (DHS), which serves both Star residents and the surrounding community. It is also the administrative office for DHS' HFH Division.



## Street Based Engagement Efforts

Based on the LAHSA Homeless Count, approximately 70% of the homeless population in the Los Angeles Continuum are individuals that sleep on the street. Given this information, it is critical that Los Angeles develop a coordinated street-based engagement system.

In January 2016, HFH created C3 in response to the incredible health crisis in the Skid Row area of downtown. C3 is a multidisciplinary street-based engagement effort that created 4 teams in Skid Row. These teams are supported by the offices of Mark Ridley-Thomas, Hilda Solis, Jose Huizar; DMH; DPH; LAHSA; Behavioral Health Services; and The People Concern.

Since its launch, C3 has engaged over 2,000 individuals. 500 people have been placed in interim housing, approximately 350 individuals have been assigned to permanent housing, and 186 are already housed. Drawing on HFH's Skid Row experience, HFH has been coordinating other similar efforts including Venice C3, DHS hospital campus teams, and LA Metro transit teams.

These efforts have helped pave the way for the County's most ambitious street engagement expansion to date. Funded through the County's Homeless Initiative and Measure H, in partnership with LAHSA, HFH is in the process of launching multidisciplinary teams (MDTs) throughout the County, growing to 38 teams in the next few years. These teams will be operated by a lead agency community-based organization within each of the eight Service Planning Areas (SPAs).

The MDTs will respond to reports of homeless individuals or encampments as well as case find by driving/walking a targeted area to regularly engage and assist homeless individuals by developing trusting relationships over time. Each team will consist of a health provider, mental health specialist, substance abuse counselor, case manager, outreach worker and often a peer. The goal of these MDTs is to get homeless individual's housed, connected to sources of income and supportive services, and to reduce the number of homeless individuals living on our streets.

### CBEST Success Story: Bob\*

Bob had been on the streets for the last 15 years and was not connected to any resources whatsoever. With a diagnosis of paranoid schizophrenia, he was very skeptical about enrolling in any benefits as he did not want to rely on the government services. However, during the second meeting with the SPA 8 CBEST advocate on 4/24/17, she was able to work with Bob and have him sign all of the documents necessary to get him linked to housing and collect pertinent medical documentation. The advocate was able to gain trust and develop a rapport very quickly with Bob. They have met

two other times to enroll in Medi-Cal and at the third meeting the advocate took Bob to DPSS to apply for General Relief and Cal-Fresh. The advocate worked with the ADA liaison at Department of Public Social Services and was able to expedite him through the GR application in less than 1.5 hours! While there he was also able to get hotel vouchers for 2 weeks and bus tokens.

For someone who was nervous and skeptical about committing to the process of applying for benefits, he is now eager to do all he can to change his situation.

*\* Name has been changed to protect identity.*

## C3 Skid Row

### KEY PARTNERSHIPS



### 6 STAFF PER ENGAGEMENT TEAM



Mental Health Clinician



Registered Nurse



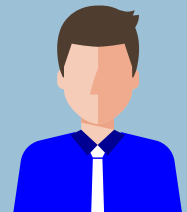
Substance Abuse Counselor



Outreach Worker



Peer



Peer

### RESULTS

2,000

people engaged through C3

500

people placed in interim housing

350

people assigned to PSH

186

people housed to date

## Benefits Advocacy

HFH launched a benefits advocacy services program called the Countywide Benefits Entitlement Services Team (CBEST) in March 2017. The program is modeled after DHS’ former Benefits Entitlement Services Team (B.E.S.T) pilot project which removed barriers for homeless disabled adults by providing coordinated health and mental health evaluations, case management and benefits advocacy to homeless adults applying for Supplemental Security Income/Social Security Disability Insurance (SSI/SSDI). The CBEST program also draws upon national best practice models including the SSI/SSDI Outreach and Recovery (SOAR) and the Homeless Outreach Projects and Evaluation (HOPE) projects.

CBEST lead partners also include the LA County Sheriff’s Department, the LA County Department of Military and Veterans Affairs, and the LA County Department of Public Social Services (DPSS). The target population is Medi-Cal eligible adults who are homeless and at risk of homelessness who may be eligible for SSI, SSDI or Cash Assistance for Immigrants (CAPI) benefits; homeless veterans and veterans at risk of homelessness applying for Department of Veterans Affairs benefits or related services; and inmates in jail facilities who may be eligible for SSI, SSDI, or CAPI benefits. CBEST services are in community based locations within each Service Planning Area, co-located in 14 DPSS offices Countywide, and in all Los Angeles County jail facilities. HFH has contracted with 7 organizations to provide these services Countywide.

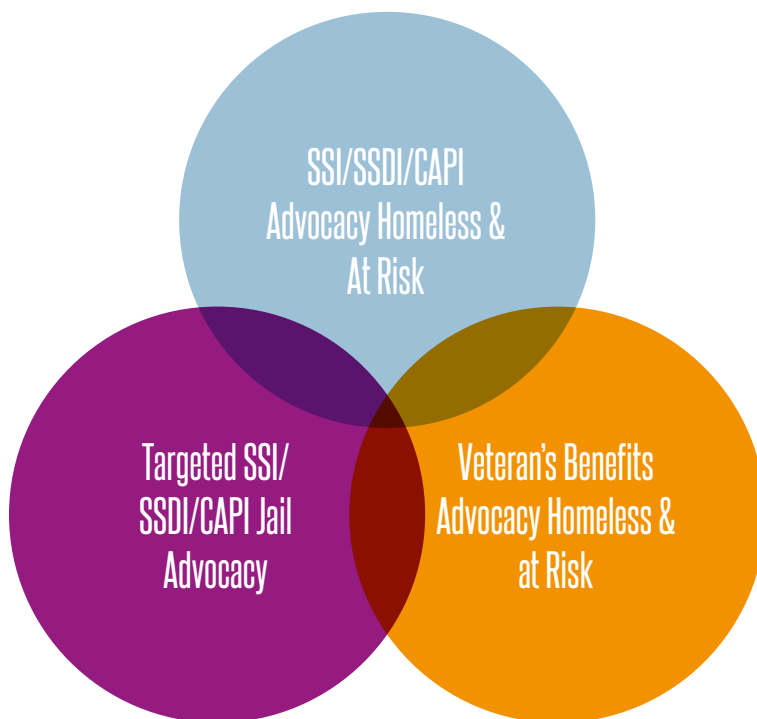
CBEST services include working closely with outreach and engagement teams in each SPA; coordination and integration with

existing systems of care including the Coordinated Entry System; gathering and summarizing current and historical health and mental health records; linking clients to health and mental health services to document their disability(ies); completing and submitting applications; coordinating and advocating with the Social Security Administration, California Department of Social Services Disability Determination Services, and Department of Veterans Affairs regarding pending applications; maintaining regular communication with clients on application status; and developing and implementing a program exit plan including an assessment and documentation of warm hand off to community providers.

CBEST goal include achieving a minimum of an 80% approval rate on all benefits applications and ensuring that 75% of clients are linked to and have access to health, mental health, and substance use disorder services.

<b>SPA</b>	<b>Lead Agency</b>
SPA 1	The Catalyst Foundation
SPA 2	Tarzana Treatment Center
SPA 3	Volunteers of America
SPA 4	Volunteers of America
SPA 5	St Joseph’s Center
SPA 6	Special Service for Groups - HOPICS
SPA 7	People Assisting the Homeless
SPA 8	Lutheran Social Services

## CBEST Program



## Client Stories: Tony\*

Tony says his troubles started at a young age. His father was in the military, moving the family around constantly, but he believes his parents' divorce sparked his downward spiral. After a few stints at Los Prietos Boys Camp for delinquent young men in Santa Barbara County, Tony began doing drugs and ended up in jails across the western United States.

His drug addiction and criminal activity continued, which resulted in eight years of prison time in Colorado. After being released, Tony traveled to Lancaster to meet his friend, but he continued using drugs and was not able to find stability in his life.

The friend turned out to be a mixed blessing. "She made me realize that all the things I hated in life, I myself had become," Tony said.

It was at that point he knew he needed to change and sought the assistance of Mental Health America in early 2015. He admitted that he was not fully ready for their help. "I was so angry when I first came in. It took me a long while before I realized I had nothing to be mad at."

While Tony was working on improving his life, MHA became a contractor of HFH's Housing and Jobs Collaborative, which is a rapid rehousing program for single adults that includes case management, employment services and a flexible term rental subsidy.

"This program gives a different opportunity to many individuals and gives them the start that they need," says Tina DeRienzo, Tony's case manager at MHA.

The structure, DeRienzo says, is what empowers her clients to stay off the streets. "It's amazing to see them get their chance and run with it," she says. Tony got the keys to his new place a few months ago and is about to receive his first paycheck at an industrial linen company. "It's grueling work. I don't have everything but I have everything I need," he says.

*\* Client's name has been changed to protect identity.*

# The Gateway



## PROJECT TYPE

Permanent Supportive Housing

## LOCATION/NEIGHBORHOOD

Marina Del Rey

## TARGET POPULATION

Formerly homeless

## UNIT COUNT

20

## OPENED

March 2016

## OWNER/DEVELOPER

Venice Community Housing;  
Hollywood Community Housing Corp.

## SERVICE PROVIDER

St. Joseph's Center

## DESCRIPTION

A permanent supportive housing development for those transitioning out of homelessness might seem like an unwelcome addition in the upscale Del Rey neighborhood. In fact, it was quite the opposite. The neighborhood council supported the project and immediate neighbors have provided nothing but positive feedback about the design of the building and its inclusion in the neighborhood.

Securing the land was the largest hurdle for The Gateway, a 20-unit LEED-certified building with a sprawling rooftop garden and community room developed by the Hollywood Community Housing Corporation and the Venice Community Housing Corporation. HFH is funding the rental subsidies and supportive services which helped make the project a reality. ICMS are provided to Gateway residents by the nonprofit organization St. Joseph's Center.

It is important to affordable housing developers, service providers, and community members to explore ways to ensure neighborhoods remain diverse and accessible to low-income and homeless residents – and this project contributes to that vision. Bus lines, affordable restaurants, and groceries are all within walking distance of the building.

The Brooks + Scarpa Architects design features full-length windows to maximize light in each one-bedroom unit, a beautiful roof-top patio with gardening space for tenants, a large community room for group activities, a second floor public balcony, hallways open to the fresh air, and offices for service providers.

# Hollenbeck Terrace



## DESCRIPTION

Shining atop a hill in Boyle Heights, Hollenbeck Terrace overlooks the picturesque Hollenbeck Park. The original building was a hospital for Santa Fe Railroad employees, but as the neighborhood changed, so did its needs.

Its latest iteration as a permanent supportive housing site for seniors debuted September 2015, more than 110 years after it was originally built. Nearly a quarter of its 100 units have been designated for HFH clients, and the project maintains its historic façade, indoor tile work, stained glass and other original design aspects. The building has been modernized to meet the clients' needs such as several gathering/community spaces for tenants and a large meeting space and patio on the top floor to promote community building.

LifeSTEPS, the HFH ICMS provider, has offices on-site and the nearby park offers many opportunities for outdoor activities that promote healthier lifestyles.

## PROJECT TYPE

Permanent Supportive Housing

## LOCATION/NEIGHBORHOOD

Boyle Heights, Los Angeles

## TARGET POPULATION

Seniors (55+)

## UNIT COUNT

100 (24 for HFH referrals)

## OPENED

January 2016

## OWNER/DEVELOPER

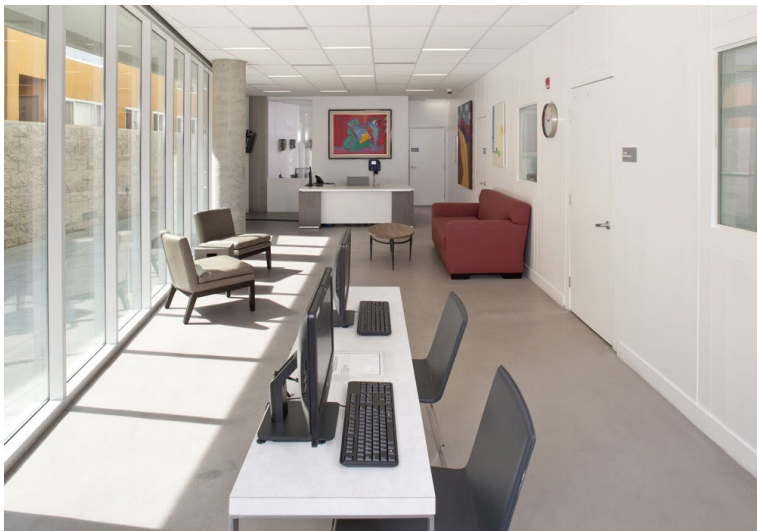
AMCAL

## SERVICE PROVIDER

LifeSTEPS



# The Six



**PROJECT TYPE**

Permanent Supportive Housing

**LOCATION/NEIGHBORHOOD**

MacArthur Park

**TARGET POPULATION**

Formerly homeless; veterans

**UNIT COUNT**

52 (18 for veterans)

**OPENED**

September 2016

**OWNER/DEVELOPER**

Skid Row Housing Trust

**SERVICE PROVIDER**

Skid Row Housing Trust

**DESCRIPTION**

The Six offers 52 welcoming and supportive homes to individuals who have experienced homelessness, with 18 of them set aside specifically for veterans. Designed by Brooks + Scarpa, the architecture thoughtfully balances privacy with opportunities to connect with the community.

The Six has onsite supportive 24-hour property management on the ground floor, community rooms and a spacious courtyard that offers peaceful respite and space for social gatherings on the second floor. Incorporating energy-efficiency measures that exceed standard practice, including passive design choices that maximize natural light and air-flow, the project received LEED Platinum Certification from the U.S. Green Building Council.

# Vermont Villas Senior Community



## DESCRIPTION

Comprised of 80 units, Vermont Villas is an open-air senior community. The permanent supportive housing project has served as a successful partnership between the Los Angeles County Department of Health Services, PATH and the Veterans Administration, as more than half of the units are reserved for chronically homeless veterans.

The development emphasizes community and access to the outdoors as a means of supporting the health and well-being of residents. A range of communal spaces, including a lounge, community room, computer nook and teaching kitchen, offer many opportunities for gatherings. An expansive courtyard, private balconies, and open-air hallways enhance the livability of the building by cooling spaces with fresh air and providing access to the outdoors.

“It’s more than a key to a safe, new start for someone, it’s a place that supports individuals to become more self-sustainable while also creating a community for them so that no one has to experience the isolation they may have felt while living on the streets or in a shelter,” said Jackie Vorhauer, a PATH spokesperson.

The building is staffed by five service coordinators and case managers who support residents in identifying barriers to holistic health, connecting them to resources in the community, and building skills to live independently and stably. On-site programs include nutritional cooking classes, a food bank, yoga and more.

## PROJECT TYPE

Permanent Supportive Housing

## LOCATION/NEIGHBORHOOD

Gardena

## TARGET POPULATION

Seniors (55+)

## UNIT COUNT

80 (28 for DHS referrals; 50 for veterans)

## OPENED

October 2015

## OWNER/DEVELOPER

Affirmed Housing Group

## SERVICE PROVIDER

PATH Ventures

# Arbor Court



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## PROJECT TYPE

Affordable Housing

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## LOCATION/NEIGHBORHOOD

Lancaster

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## TARGET POPULATION

Mixed

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## UNIT COUNT

150 (56 for HFH referrals)

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## OPENED

March 2009 (DHS clients in 2014)

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## OWNER/DEVELOPER

InSite

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## SERVICE PROVIDER

Mental Health America

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## DESCRIPTION

Arbor Court Apartments, formerly known as the Essex Hotel in Lancaster, CA was the center of modern Aerospace Industry in the 1980s. It was a place for aerospace professionals from all over the world to work and relax. The property was the closest hotel to Edwards Air Force Base and was near to Plant 42 in Palmdale. Since the decline of the aerospace industry, the once famous hotel that hosted luxurious weddings and banquets, fell into disrepair. It was purchased by the Insite Development group as part of the revitalization of Lancaster. InSite applied for tax credits and other public financing options to create affordable units for seniors in the area so the building could be rehabilitated with services on site. HFH provided ICMS funding for 56 units at this site.

# Immanuel Place



## DESCRIPTION

Originally built in 1922, the former Immanuel Church housed traditional American Baptist Association worship services and was operated as a community center before becoming vacant in 2012. Now the development has been restored and transformed into senior housing while maintaining its architectural heritage.

Many beautiful details of the former church were preserved including large stained-glass windows, huge exposed trusses, and the magnificent historic pipe organ. The existing sanctuary space was repurposed as a community room, consisting of a kitchen, library, and the fully restored pipe organ.

Additional amenities include a secured entry with intercom, a fitness room, laundry facilities, and secure parking. The structures rich exterior facade and vibrant landscaping compliment the surrounding neighborhood. Residents have access to senior services, such as adult education, and health and wellness programs.

The property earned 150 points in the Enterprise Green Communities Build It Green system. Solar thermal roof panels heat domestic water for the building and high efficiency lighting and appliances, low-flow fixtures and sustainable finishes all help achieve the high rating.

## PROJECT TYPE

Affordable Housing

## LOCATION/NEIGHBORHOOD

Long Beach

## TARGET POPULATION

Seniors (62+)

## UNIT COUNT

25 (15 for HHF referrals)

## OPENED

June 2016

## OWNER/DEVELOPER

Clifford Beers Housing  
and Thomas Safran & Associates

## SERVICE PROVIDER

St. Joseph Center

# Mosaic Gardens: Willowbrook



**PROJECT TYPE**

Affordable Housing

**LOCATION/NEIGHBORHOOD**

Willowbrook

**TARGET POPULATION**

Families and Single Adults

**UNIT COUNT**

61 (31 for DHS referrals)

**OPENED**

April 2017

**OWNER/DEVELOPER**

LINC Housing

**SERVICE PROVIDER**

The People Concern

**DESCRIPTION**

The 61-units Mosaic Gardens at Willowbrook has more than half of its units designated for formerly homeless residents in the HFH program. The other homes are for families earning up to 60 percent of the area median income for Los Angeles County, as established by HUD. The 31 HFH-connected families calling Willowbrook home utilize Housing Authority of the County of Los Angeles Project-Based Vouchers with wraparound ICMS provided by The People Concern.

“Homelessness and affordable housing are top concerns for the Willowbrook community,” said Rebecca Clark, LINC Housing’s president and CEO. “We’ve worked side-by-side with county leaders, our partners and this community to bring solutions that will improve people’s lives and transform the neighborhood.”

The architecture and landscape at Mosaic Gardens at Willowbrook has a ranch-style feeling that evokes the neighborhood’s pride in being “country living in the city.” It also incorporates many features for healthy living. The buildings are interconnected by open space to encourage walking and socialization. Community gardens are available for families to grow their own food, and the community room has space for educational classes for healthy living as well as a kitchen where residents can learn and share recipes on how to prepare the food they’ve grown. A tot lot and small field provide children a safe environment for physical activity. The large community space also includes multipurpose space to house a variety of resident programs as well as a computer lab, fitness room, manager’s office, and private meeting space for service providers and case managers. Within a half mile of the property, residents of this community have access to many amenities including an elementary school, public transportation, retail shopping, pharmacies and other service opportunities. The property is within a mile of the Martin Luther King, Jr. Outpatient Center and the Willowbrook/Rosa Parks Metro Station.

# Winnetka Senior Apartments



## DESCRIPTION

In collaboration with Meta Housing, PATH Ventures recently handed over the keys to 94 new residents of the Winnetka Village Senior Apartments. Of the Winnetka's 94 ADA-accessible units, 47 set aside for HFH clients.

Winnetka Village takes an "aging in place" approach by supporting the residents' independence and ability to live in the least restrictive environment for as long as possible. All services emphasize enhancing the resident's quality of life and include community building activities and events to help residents develop a local support network and increase their sense of self-worth.

The building hosted a move-in party, in which volunteers and staff welcomed the residents to the apartments. This gave residents the chance to meet their neighbors, build relationships in the community, and develop a sense of belonging. At the end of the day, volunteers gave the residents move in kits, comprised of essential home goods such as bedding, kitchen cookware, and bathroom supplies.

## PROJECT TYPE

Affordable Housing

## LOCATION/NEIGHBORHOOD

Winnetka

## TARGET POPULATION

Seniors (62+)

## UNIT COUNT

94 (47 for HFH referrals)

## OPENED

November 2016

## OWNER/DEVELOPER

Meta Housing Corporation

## SERVICE PROVIDER

PATH Ventures

# Dr. David L. Murphy Sobering Center



## DESCRIPTION

The Dr. David L. Murphy Sobering Center was opened in January 2017. It provides an alternative to emergency room or jail visits for individuals who are intoxicated on alcohol or drugs. The center is open 24 hours a day and can assist up to 50 people at a time. The intent of the Sobering Center is to allow individuals to rest, get hydrated, and to then discuss and be linked to substance abuse treatment and other services.

“This center will help those struggling with alcoholism without criminalizing them or having them languish in hospital waiting rooms,” Supervisor Mark Ridley-Thomas said at the opening ceremony on December 16, 2016.

Los Angeles Fire Department medical director Dr. Marc Eckstein described a dysfunctional system that strains emergency responders and feeds a vicious cycle. Paramedics and firefighters transport an average of 25 inebriated individuals a day to LAC+USC Medical Center. First responders often must wait for the patient to be admitted before they can leave, tying up resources for true emergencies. Once the patient get discharged, the process repeats itself without effective interventions for those who need help.

The sobering center is part of larger efforts the County is undertaking to move low-level offenders out of jails and costly emergency rooms and into restorative programs, including supportive housing, to reduce recidivism and improve health.

Exodus Recovery, Inc. provides ICMS and health monitoring under contract with DHS at the County-owned facility.

## PROJECT TYPE

Sobering Center

## LOCATION/NEIGHBORHOOD

Skid Row

## TARGET POPULATION

Homeless; intoxicated individuals

## BED COUNT

50 (6-12 hour avg. stay)

## OPENED

January 2017

## OWNER/DEVELOPER

County of Los Angeles

## SERVICE PROVIDER

Exodus Recovery, Inc.

## Client Stories: Miguel and Gloria\*

Gloria and Miguel, mother and son, had been living in El Monte until Miguel's health deteriorated to the point he could no longer work and support the family. They lost their home and were on the streets for more than a year. Miguel was eventually hospitalized with end-stage renal disease, severe scoliosis of the spine, hypertension and muscular atrophy. Not wanting to be separated, Gloria slept under her son's hospital bed and hid in a small closet in his room until they were referred to a HFH provider, GettLOVE.

When GettLOVE's Program Manager Keegan Hornbeck informed them that their new home would be supplied with new furniture, the family was skeptical and continued to spend almost all of their money on a storage unit that housed all their belongings.

Finding the family housing was a unique challenge for the GettLOVE team. The ideal unit would have to be completely accessible for Miguel's wheelchair and have an open and easily-navigated layout for Gloria's needs. The team found finding a unit on the ground floor that didn't require climbing any stairs incredibly challenging. After searching for several months, GettLOVE's Housing Specialist found Gloria and Miguel their new home. GettLOVE provided assistance with the family's move, including emptying out their storage unit.

The large ground-level unit has dual entries that allow wheelchair access and has a handrail for Gloria. The unit has its own washer and dryer so the family is not dependent on finding ways to transport their clothing to and from the laundromat. Now, in their own kitchen, they are able to plan and prepare their own meals. They have both reported greater adherence to their medical treatment due to having stable housing. When handed the keys to their new home, Gloria stated, "I don't know if this is just a really good dream or if I have been having a nightmare for the last five years and I am just now waking up."

*\* Names have been changed to protect identities.*



A photograph of a man with glasses and a plaid shirt, smiling as he looks into a large cardboard box. The box has the word 'KITCHEN' written on it. The background shows a kitchen setting with cabinets and a window. The entire image is overlaid with a blue tint.

In February  
of 2014, HFH  
launched a new  
and innovative  
way to provide  
rental subsidies  
in Los Angeles  
County.

Shortly after HFH formed in 2012, HFH staff, along with community providers, began discussing how to accelerate the availability of housing for homeless people who have faced significant difficulties in securing housing. Like many communities, access to rental subsidies is a limiting factor in the work to end homelessness. In order to address this need, HFH launched the **Flexible Housing Subsidy Pool (FHSP)**, a locally funded rental subsidy program. The program launched in February 2014 with an initial contribution of \$14 million from Los Angeles County and \$4 million from the Conrad N. Hilton Foundation.

The FHSP is operated by a non-profit partner called Brilliant Corners (BC). BC fulfills a range of functions that are necessary to nimbly and responsively operate in the dynamic Los Angeles real estate market. In addition to the core function of dispersing rental subsidy payments to landlords, BC performs several other important activities including:

- Locating and securing quality, affordable housing units across Los Angeles County
- Assisting HFH in matching tenants to the most appropriate unit available
- Administering move-in assistance including financial support for housing application fees, security deposits, household goods, and furniture
- Providing housing retention services in coordination with ICMS providers and responding to tenant/landlord issues
- Offering a 24/7 point of contact with landlords to ensure excellent customer service

The FHSP is designed to provide rental subsidies in a variety of housing settings including project-based and scattered site housing. In order to meet the demand for housing in a tight rental market, the program works with a variety of housing providers to secure units in nonprofit owned supportive housing, traditional affordable housing, and privately-owned market rate housing.

Since its launch, the FHSP has housed nearly 1,400 individuals. The FHSP was designed so that other funders, including other County departments, would be able to add funds to serve clients that they prioritize for housing. Over the past three years, the FHSP has expanded to provide housing paired with ICMS for several additional programs for people experiencing homelessness. Funding for the FHSP currently comes from Department of Health Services, Department of Mental Health, the Probation Department, the Homeless Prevention Initiative, the CEO's Homeless Initiative, and from the Board of Supervisors.

The programs using FHSP are listed below:

**Department of Health Services (DHS):** Permanent supportive housing provided to DHS clients + intensive case management.

**Department of Mental Health (DMH):** Permanent supportive housing provided to DMH clients.

**Single Adult Model (SAM):** Permanent supportive housing provided to Department of Social Services (DPSS) General

Relief (GR) recipients and clients of street based Mobile Interdisciplinary Teams + intensive case management.

**Office of Diversion and Reentry:** Permanent supportive housing for individuals diverted from the criminal justice system with a mental health and/or substance use disorder + intensive case management.

**Women's Initiative with Services and Housing (WISH):** Short-term or permanent rental subsidies offered to homeless and vulnerable women + intensive case management.

**Homeless Initiative B1:** Permanent supportive housing for individuals pursuing SSI+ intensive case management.

**Rapid Rehousing:** Flexible term rental subsidy for non-chronically homeless individuals + intensive case management + employment services to help clients return to the workforce. Programs under HFH's Rapid Rehousing include, the Housing and Jobs Collaborative, Breaking Barriers and Homeless Initiative strategy B3, which provides a way for cities in Los Angeles County to provide funding toward rapid rehousing for homeless residents from their city.

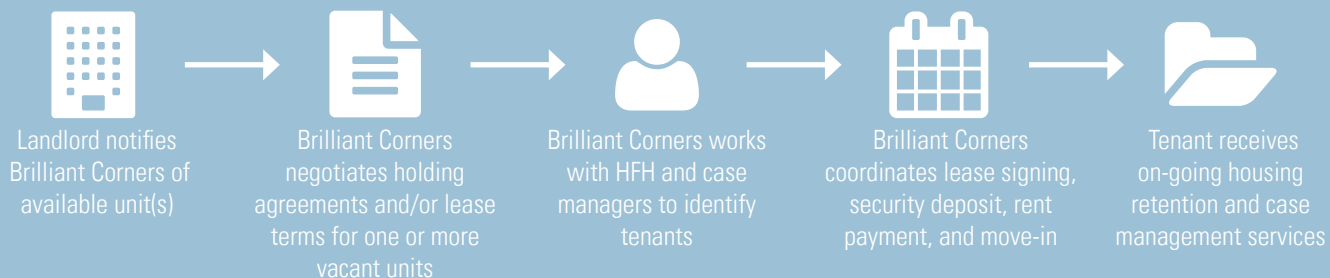
**Homeless Initiative B7:** Interim housing for homeless individuals leaving custody facilities.

**Medically Vulnerable Probationers (MVP):** Board and Care placement for AB109 probationers + intensive case management.

## FHSP Partners



## How FHSP Works



“Brilliant Corners’ innovative program was developed with apartment owner feedback and it shows! With speedy commitments that minimize vacancies and great resident support, they are a model for how public/private partnerships can be a win-win for all.” -

*Daniel Tenebaum, Property Owner*

“From our perspective as a for profit developer, Brilliant Corners has been a phenomenal partner. They provide a reliable income stream on their leased units which minimizes our vacancy rate and mitigates our collection risks and related overhead typically associated with collections. In addition, Brilliant Corners provides comprehensive support services that help their tenants remain in good standing, and that help us address problems that arise, minimizing the management resources required for their units. In addition, and more importantly, our partnership affords a sense of civic accomplishment that our team and investors can be very proud of.”

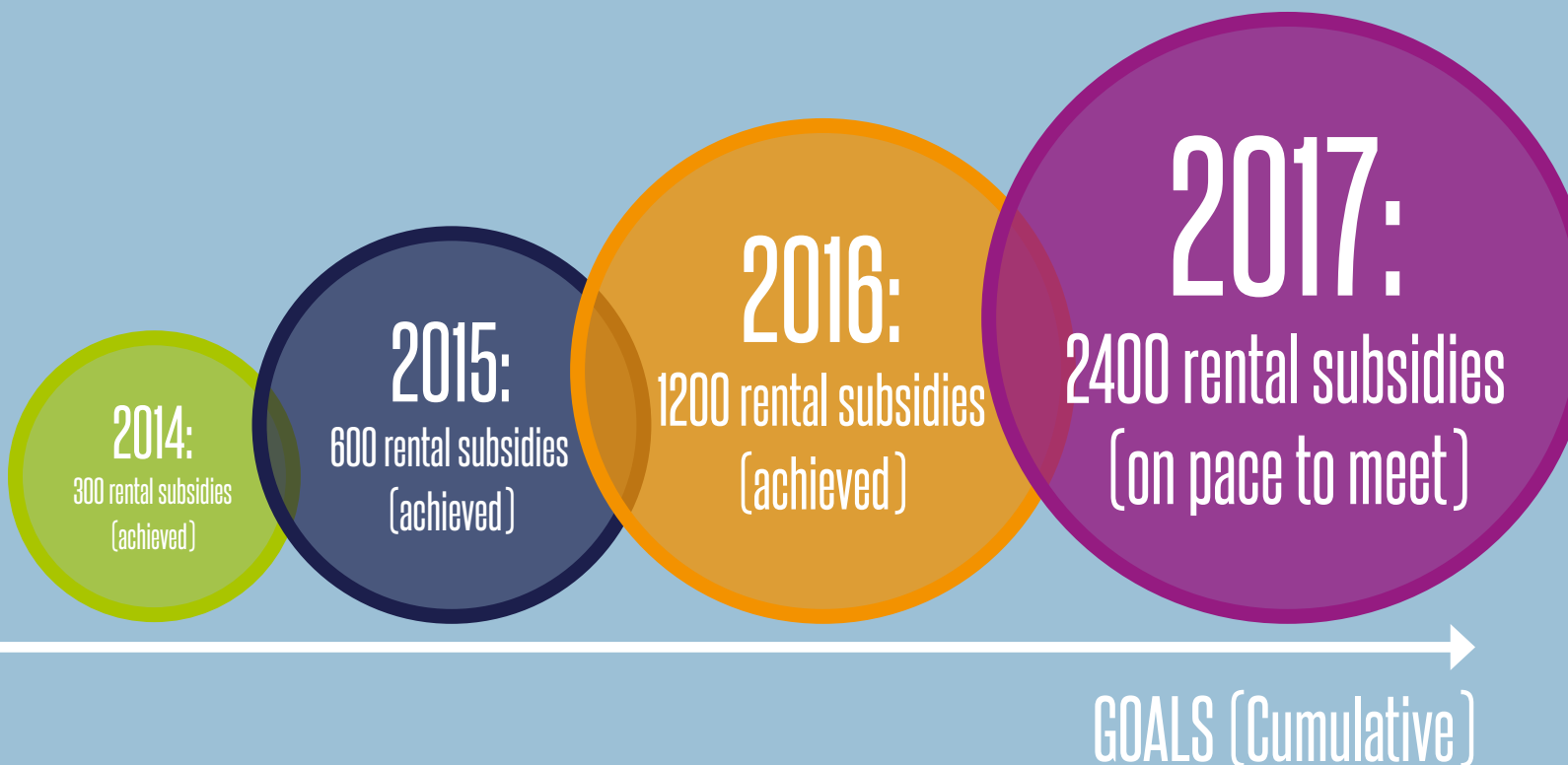
*Amir Ohebsion, Haroni Investments, LLC*

“I have worked with Brilliant Corners for the last couple of years and I couldn’t be any happier. They are extremely easy to work with and I prefer them over other similar rental assistance programs. I will continue to provide them with my apartments for years to come. I have recommended them to friends, and have nothing but great things to say about their staff.”

*Jonathan Sedaghat, Starkwood, Inc.*

“I want to commend the County on establishing the Flexible Housing Subsidy Pool and thank them for selecting Brilliant Corners to administer it. Unlike other government programs, the staff and service providers selected by the County and Brilliant Corners have been responsive, proactive and a real pleasure to work with. I look forward to working with them for many years to come and hope that together, with other property owners, we can make a real difference in housing and caring for our most vulnerable populations.”

*Izek Shomof, Apartment Building Owner*



In April 2017, RAND quantitatively analyzed and evaluated 787 HFH clients.

**Please note that results presented herein are preliminary.**

A RAND report on permanent supportive housing through HFH with complete and final data will be released Summer 2017. The data elements in this report are subject to change once all datasets and modeling decisions are finalized. Results are not cleared for release or citation beyond this report.

To date, RAND's quantitative analyses evaluated HFH clients who were housed on or prior to June 30th 2015 and for whom DHS utilization data is available ( $n = 787$ ). Data on service utilization was provided by the Department of Health Services. The date ranges of data used in these analyses are from August 23, 2011 – June 30, 2016. The study looks at outcomes one year pre and one year post housing through the HFH program.

The preliminary analysis suggests that permanent supportive housing is significantly associated with reductions in all DHS services (emergency room, inpatient services, and outpatient visits). Most significantly, the number of inpatient days dropped from 6,065 to 1,471 and the number of emergency room visits dropped from 1,826 to 594. This represents a 75% reduction in inpatient days and a 67% reduction in emergency room visits (*see Preliminary Descriptive Findings of Health Related Service Costs*).

HFH permanent supportive housing resulted in:

76%

reduction in inpatient days

67%

reduction in emergency room visits

# Quantitative Analysis of HFH Clients

## (1) Number of HFH Clients Using Health Related Services and Number of Services Used During Housing Study Period

Health-Related Service Utilization Frequencies:	(A) 1-Year Housing (HFH Clients)				(B) 1-Year Housing (Services)		
	Pre No.	Pre %	Post No.	Post %	Pre	Post	% Change
DHS Emergency Room Visits	424	53.9%	253	32.1%	1,826	594	-67.5%
DHS Inpatient Stays	289	36.7%	122	15.5%	6,065	1,471	-75.7%
DHS Outpatient Visits	671	85.3%	556	70.6%	7,652	5,722	-25.2%
DMH Crisis Stabilization Services	66	8.4%	28	3.6%	112	42	-62.5%
DMH Acute Inpatient Stays	33	4.2%	15	1.9%	379	387	2.1%
DMH Residential Stays	5	0.6%	4	0.5%	57	35	-38.6%
DMH Outpatient Visits	292	37.1%	256	32.5%	5,598	4,342	-22.4%
DPH SAPC Residential Treatment	5	0.6%	6	0.8%	857	369	-56.9%
DPH SAPC NTP w/o Detox	9	1.1%	10	1.3%	2,582	2,234	-13.5%
DPH Outpatient Treatment	15	1.9%	6	0.8%	18	6	-66.7%
<b>Totals:</b>	<b>787</b>	<b>100.0%</b>	<b>787</b>	<b>100.0%</b>	<b>25,146</b>	<b>15,202</b>	<b>-39.5%</b>

NOTES: N = 787; however, some clients may have used more than one service. "NTP" = Narcotic Treatment Programs. Date ranges: August 2011 – June 2016. Psychiatric emergency room visits are included in DHS ER visits.

## (2) Preliminary Results When Testing Difference of Means Among Health-Related Service Utilization

Health-Related Service Utilization Outcomes:	Actual Averages		Difference of Means	
	Pre	Post	Diff.	% Change
Frequency of DHS Emergency Room Visits*	2.320	0.755	-1.565	-67.5%
Days of DHS Inpatient Stays*	7.706	1.869	-5.837	-75.7%
Frequency of DHS Outpatient Visits*	9.723	7.27	-2.452	-25.2%
Freq. of DMH Crisis Stabilization Services*	0.142	0.053	-0.089	-62.7%
Days of DMH Acute Inpatient Stays	0.481	0.491	0.01	2.1%
Days of DMH Residential Stays	0.072	0.044	-0.028	-38.9%
Frequency of DMH Outpatient Visits <sup>†</sup>	7.113	5.517	-1.596	-22.4%
Days of DPH SAPC Residential Treatment	1.089	0.469	-0.62	-56.9%
Days of DPH SAPC NTP w/o Detox	3.281	2.839	-0.442	-13.5%
Frequency of DPH Outpatient Treatment <sup>†</sup>	0.023	0.008	-0.015	-65.2%

NOTES: N = 787. "NTP" = Narcotic Treatment Programs. Date ranges: August 2011 – June 2016. Psychiatric emergency room visits are included in the DHS ER visits.  
\* $p < 0.01$ , <sup>†</sup> $p < 0.05$

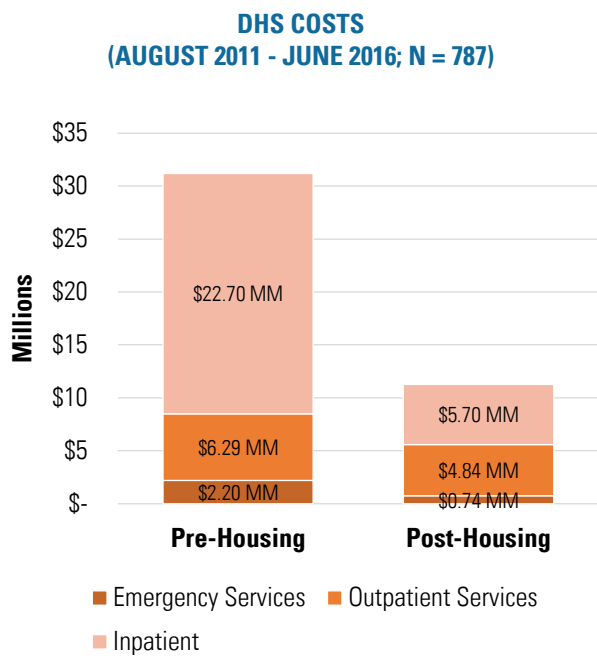
**Table 1A** (previous page) displays the number and percent of HFH clients who accessed DHS, DMH, and DPH services one year pre-housing and one year post-housing.

**Table 1B** (previous page) displays the number of health services used by HFH clients one year pre-housing and one year post-housing.

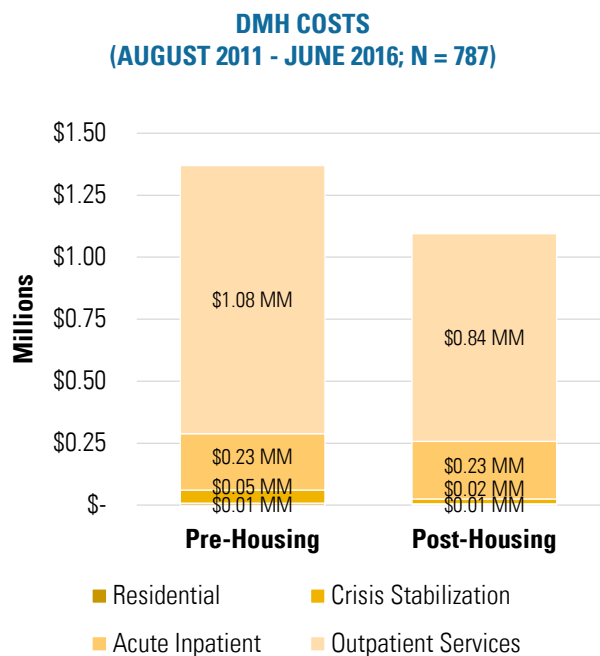
**Table 2** (this page) displays the means of the health-related service utilization outcomes one year pre and one year post housing. Then, the results of difference in means test are reported. Preliminarily, the tests suggest that the HFH program may be significantly associated with reductions in use of all DHS services, DMH crisis stabilization services, DMH outpatient services, and DPH outpatient treatment.



## Preliminary Descriptive Findings of Health-Related Services Costs



Preliminary testing in difference in means suggests that the permanent supportive housing might be significantly associated with reduced costs in all three types of DHS services examined here (emergency services, inpatient services, and outpatient services).



Preliminary testing in difference in means suggests that the permanent supportive housing might be significantly associated with reduced costs in both DMH outpatient and DMH crisis stabilization services. No significant changes in costs are noticed for any DMH inpatient service.

## Client Stories: Marie\*

Marie used to spend her days outside the New Pershing Apartments near the intersection of 5th and Main streets. The irony of a homeless woman staying on the sidewalks bordering a new FHSP development was not lost on HFH Program Manager Richard "Richy" Myers.

Richy reached out to Marie in July and noticed that her speech and demeanor softened when engaged in conversation. Due to mental health issues and living on the streets for more than a decade, Marie was wary of service providers and was initially reluctant to be placed in interim housing. Due to prior involuntary hospitalizations, she associated housing with mental health treatment.

Marie's past was riddled with hardship. She had spent 15 years homeless and was forced into prostitution in order to survive. She would take cover where ever it was dry and would wash up in a Jack In The Box bathroom.

Driven by the changes he saw when Marie received attention and support, Richy continued to work with her and within a few weeks had her apply for an ID and social security card. By late August, she was willing to enter interim housing at the Russ Hotel in Downtown Los Angeles.

Marie quickly flourished. She established primary care at the Star Clinic and was able to secure GR benefits with the Department of Social Services during her month-long stay at the Russ. Soon, she received permanent supportive housing at Hollenbeck Terrace. LifeSTEPS staff said her hair was matted and it was clear she had not bathed in a while. "She had nothing but a smile on her face. Once she opened the door to her apartment, that smile grew so much. It made everything we do worthwhile." Richy echoes that sentiment. Her transformation was go great, "I am so grateful to be a part of her journey."

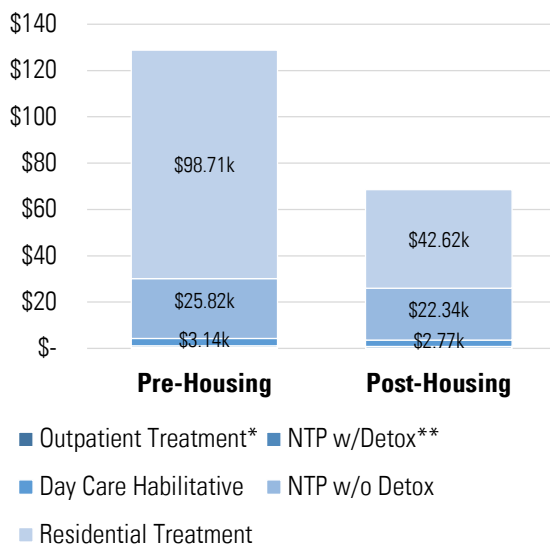
The new home is ideal for Marie. It is the second project HFH has partnered with LifeSTEPS to get clients housed quickly. The AMCAL development in Boyle Heights has sweeping views of downtown from their rooftop terrace and Brilliant Corners equipped her 500-square-foot one-bedroom unit with furnishings and housing basics like bed sheets and dinnerware.

Marie praises the work that DHS and LifeSTEPS have done together. She is grateful their work and the positive direction her life is now taking. She has started working with her LifeSTEPS case manager to manage her money and get herself settled.

A day after moving in, HFH staff were eager to drop off some items for Marie 's pantry, but they were made to wait at her front door. She was a little busy doing something many of us take for granted. She was taking a shower.

\* Name has been changed to protect identity.

**DPH COSTS**  
(AUGUST 2011 - JUNE 2016; N = 787)



Preliminary testing in difference in means suggests that the permanent supportive housing might be significantly associated with reduced costs in DPH outpatient treatment ( $p = 0.092$ ). Given the high p-value, this conclusion could change when data are finalized.

\* Outpatient Treatment: Pre-Housing = \$0.48k; Post-Housing = \$0.22k

\*\* NTP w/ Detox: Pre-Housing = \$0.65k; Post-Housing = \$0.61k

# Conclusion

HFH has established itself as an important contributor to the County's overall effort to end homelessness in Los Angeles. This document provides a summary of the work achieved by HFH over the last 5 years.

## Key Learnings

### **PARTNERSHIP**

HFH has learned how critically important it is to develop partnerships with a variety of community providers and other County departments interested in ending homelessness. Given the magnitude of the challenge to find decent and affordable places to live, HFH has partnered with large private real estate developers, landlords of various types of apartments, the faith community, affordable housing developers, and other housing providers. HFH also partners with established and experienced homeless services providers to ensure that case management and other services are delivered in a thoughtful and impactful manner.

### **SIMPLIFY**

For the great majority of people who are homeless, if they receive help paying the rent and are assigned to a consistent, dependable, and caring case manager, they can successfully come off the streets and rebuild their lives. To that end, HFH focuses our work in two main areas: rent subsidies and case management services. It is these two primary activities that solve homelessness. Given the complexities of the target population, there is not just one path to stability. Because of this, HFH programs always allow for flexibility, creativity and a "whatever it takes approach."

### **ENGAGEMENT/LONGER-TERM ASSISTANCE**

People experiencing homelessness often receive a lot of assistance from many different agencies including hospitals, shelters, clinics, DPSS offices, and mental health and substance use providers. These services tend to be episodic and costly and yet many individuals remain homeless. To deal with this reality, HFH has learned the importance of patience and consistent engagement activities and staying in close touch with homeless individuals throughout their journey from streets to home. The elements HFH has found most important to end this cycle are: well organized street-based engagement, immediate access to interim housing, and access to a range of permanent housing options. This effort is being improved by the introduction of HFH's new web-based referral and data collection system which is called CHAMP.

## Future Opportunities

Below are several concepts that HFH is considering for expansion and improvements to better serve the target population.

### **ALTERNATIVE HOUSING TYPES**

HFH is exploring ways to more quickly and less expensively bring new housing stock on-line by working with architects, devel-

opers, contractors, and modular manufacturers to identify new housing production strategies. As an example, HFH is currently partnering with two developers on permanent and interim housing sites utilizing modular technology.

### MAJOR EXPANSION

In response to recent initiatives including the Office of Diversion and Reentry, Whole Person Care, Homeless Initiatives, and Measure H (pending Board approval), HFH is poised to enter a period of rapid expansion including: 1) ramping up to provide 3,000 new permanent housing placements per year over the next 5 years; 2) implementing and managing a benefits advocacy program that will be co-located in 14 DPSS offices county-wide and will serve 10,000 homeless people per year; 3) coordinating the implementation of over 40 multi-disciplinary street engagement teams throughout the County over the next three years; and 4) adding over 1,000 beds of interim housing throughout the county to provide homeless people exits from the street on route to permanent housing. Importantly, these new initiatives allow HFH to provide housing and services to a broader range of homeless people.

### HEALTH AGENCY INTEGRATION

The formation of the Health Agency is particularly important as the County looks forward to changing the way health care services are delivered to homeless individuals. For example, the Department of Health Services, the Department of Mental Health, and the Department of Public Health are currently working together to ensure that all tenants of supportive housing have seamless access to ICMS, specialty mental health services, and substance use services. Additionally, the three departments are working with other key County departments to implement the Homeless Initiative strategy known as SuperConnect that will provide integrated case conferencing and problem solving for individuals who have revolved through various systems of care without appropriate resolution.

### HOUSING FOR INDIVIDUALS WITH CRIMINAL JUSTICE INVOLVEMENT

While HFH's original focus was on high utilizers of health care services, with the creation of the Office of Diversion and Reentry and DHS assuming responsibility for jail health, HFH is taking an increased role in aligning housing activities with the discharge needs of the criminal justice system. This is a particularly exciting area of expansion given the relationship between homelessness and criminal justice involvement. HFH is very optimistic that the programs we have developed to assist homeless individuals coming out of hospitals and clinics are transferable to the criminal justice system.

## Acknowledgments

In addition to the wonderful support we have had from the County family over the last 5 years that HFH has been in operation, we have received very generous support from the philanthropic community including grants from the following foundations:

California Community Foundation

Conrad N. Hilton Foundation

L.A. Care Health Plan

UniHealth Foundation

Weingart Foundation

Additionally we have had wonderful partnerships with LAHSA and with various departments of the City of Los Angeles including the Housing Authority of the City of Los Angeles (HACLA) and Los Angeles Housing Community Investment Department (HCID) as well as the Housing Authority of the County of Los Angeles (HACoLA).

HOUSING  
FOR  
HEALTH





**Health Services**  
LOS ANGELES COUNTY

May 17, 2017

Los Angeles County  
Board of Supervisors

Hilda L. Solis  
First District

Mark Ridley-Thomas  
Second District

Sheila Kuehl  
Third District

Don Knabe  
Fourth District

Michael D. Antonovich  
Fifth District

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

FROM: Mitchell H. Katz, M.D. *Mitchell Katz*  
Director

SUBJECT: **HOUSING FOR HEALTH QUARTERLY REPORT**

Mitchell H. Katz, M.D.  
Director

Hal F. Yee, Jr., M.D., Ph.D.  
Chief Medical Officer

Christina R. Ghaly, M.D.  
Chief Operations Officer

313 N. Figueroa Street, Suite 912  
Los Angeles, CA 90012

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[www.dhs.lacounty.gov](http://www.dhs.lacounty.gov)

On January 14, 2014, the Board instructed the Director of the Department of Health Services (DHS) to submit quarterly reports to the Board on Housing for Health (HFH) permanent supportive housing outcomes including funds, costs, number and composition of clients housed; integrated health, mental health, substance use disorder and benefits establishment results; utilization rate and duration of housing subsidies; number of clients transitioning off of housing subsidies; and characteristics of housing units secured.

**BACKGROUND**

In November 2012, DHS established the HFH division to expand access to supportive housing for DHS patients who are homeless and who have complex medical and behavioral health conditions and/or are high utilizers of DHS services.

HFH utilizes a full range of community-based housing options, including non-profit owned supportive housing, affordable housing, and private market housing. Tenants receive federal rental subsidies such as Section 8 Project Based or Tenant Based Vouchers or a local rental subsidy through the Flexible Housing Subsidy Pool (FHSP). All individuals who are housed through HFH programs are assigned to a homeless services provider to receive Intensive Case Management Services (ICMS). These services include outreach and engagement; case management with on-going monitoring and follow-up; linkage to health, mental health, and substance use disorder services; assistance with benefits establishment; assistance with life skills, job skills, and educational and volunteer opportunities; crisis intervention, etc. ICMS providers provide "whatever it takes" wraparound services to assist clients in regaining stability and improved health.

*To ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.*

[www.dhs.lacounty.gov](http://www.dhs.lacounty.gov)



Each Supervisor  
May 17, 2017  
Page 2

## **NEW EXECUTED WORK ORDER**

Pursuant to the Supportive Housing Services Master Agreement (SHSMA) approved by the Board on June 19, 2012, this is to advise that DHS has executed a Work Order with Good Seed Community Development Corporation to provide ICMS in supportive housing to clients who are homeless. County Counsel has reviewed and approved the Work Order.

## **QUARTERLY REPORT**

Please find the attached quarterly report in dashboard format. On February 21, 2017, the Board directed DHS to provide data about program performance and finances. We are migrating to a new system and plan to provide this information in the next quarterly report. If you have any questions, please contact me or Mark Ghaly, M.D., Deputy Director of Community Health, at (213) 240-8107.

MHK:mg

Attachment

c: Chief Executive Office  
County Counsel  
Executive Office, Board of Supervisors

# HOUSING

FOR

# HEALTH

Quarterly Report January-March 2017



Health Services  
LOS ANGELES COUNTY



# GOALS

---

- 1. Create 10,000 units of housing**
- 2. End homelessness in LA County**
- 3. Reduce inappropriate use of expensive health care resources**
- 4. Improve health outcomes for vulnerable populations.**

# CLIENTS HOUSED

- Housing for Health provides housing and supportive services to homeless clients with physical and/or behavioral health conditions, high utilizers of county services, and other vulnerable populations.

# HFH CLIENT PROCESS

## CLIENT IDENTIFICATION

by DHS facilities, County departments, CES, and other partners

## REVIEW/EVALUATE/ROUTE REFERRALS

by HFH Administrative/Clinical Team

## INTERIM HOUSING

RECUPERATIVE  
CARE

STABILIZATION  
HOUSING

PERMANENT  
HOUSING

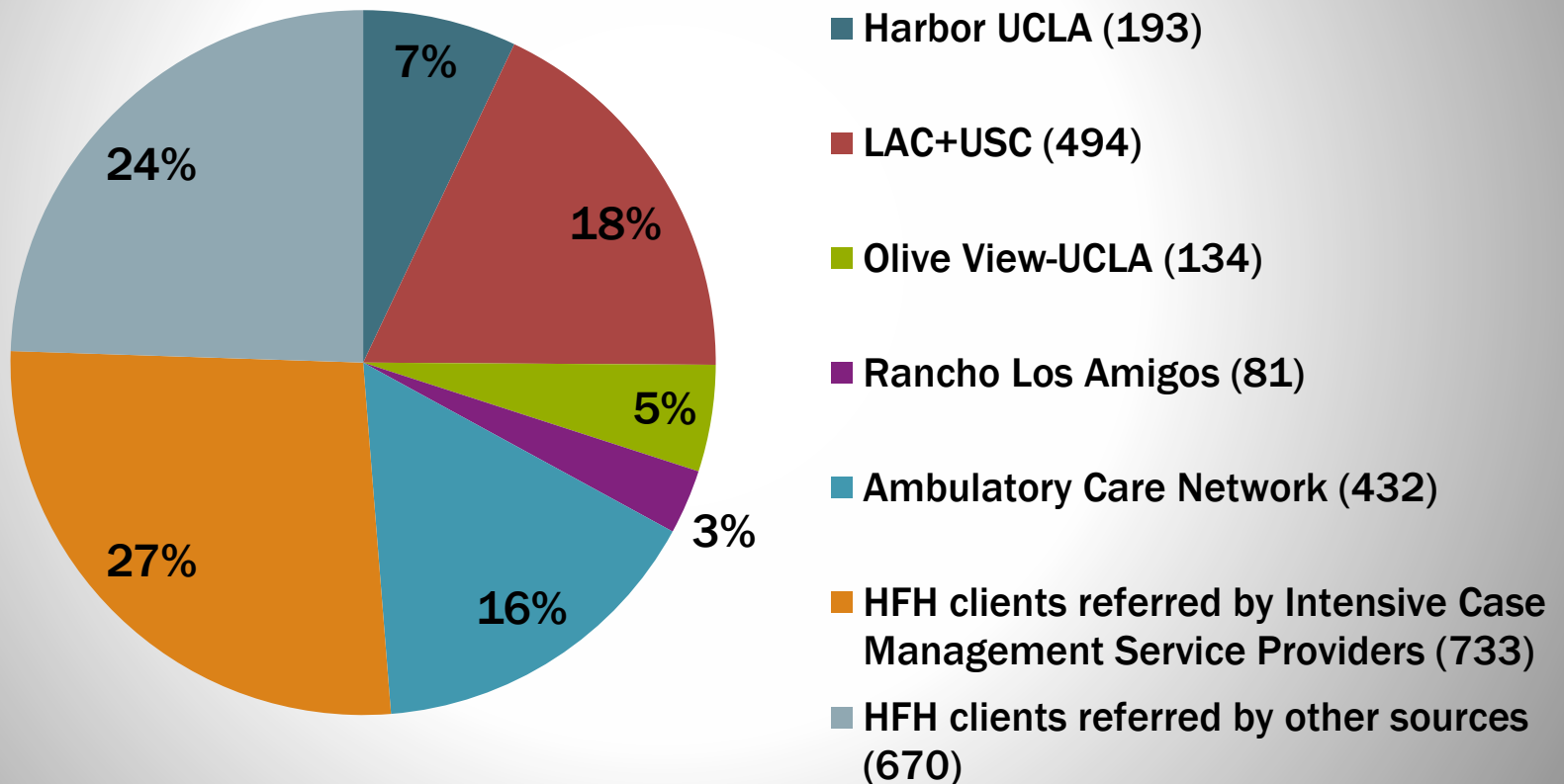
# Supportive Housing Quarterly and Program-to-Date Outcomes\*

<b>Total # of clients who have attained housing since HFH began in November 2012</b>	<b>2737</b>
<b>Total # of clients who are currently housed</b>	<b>2480</b>
<b>Total # of clients housed Jan-March 2017</b>	<b>171</b>

\*Numbers reported in Supportive Housing Quarterly and Program to Date Outcomes table exclude two client populations (Breaking Barriers and SAM clients case managed by DMH) because they do not receive ICMS services tracked through CHAMP (HFH client tracking database).

# WHERE DO HFH REFERRALS COME FROM?

Referral Source of Clients Housed (N=2737)



# HEALTH CONDITIONS OF CLIENTS HOUSED

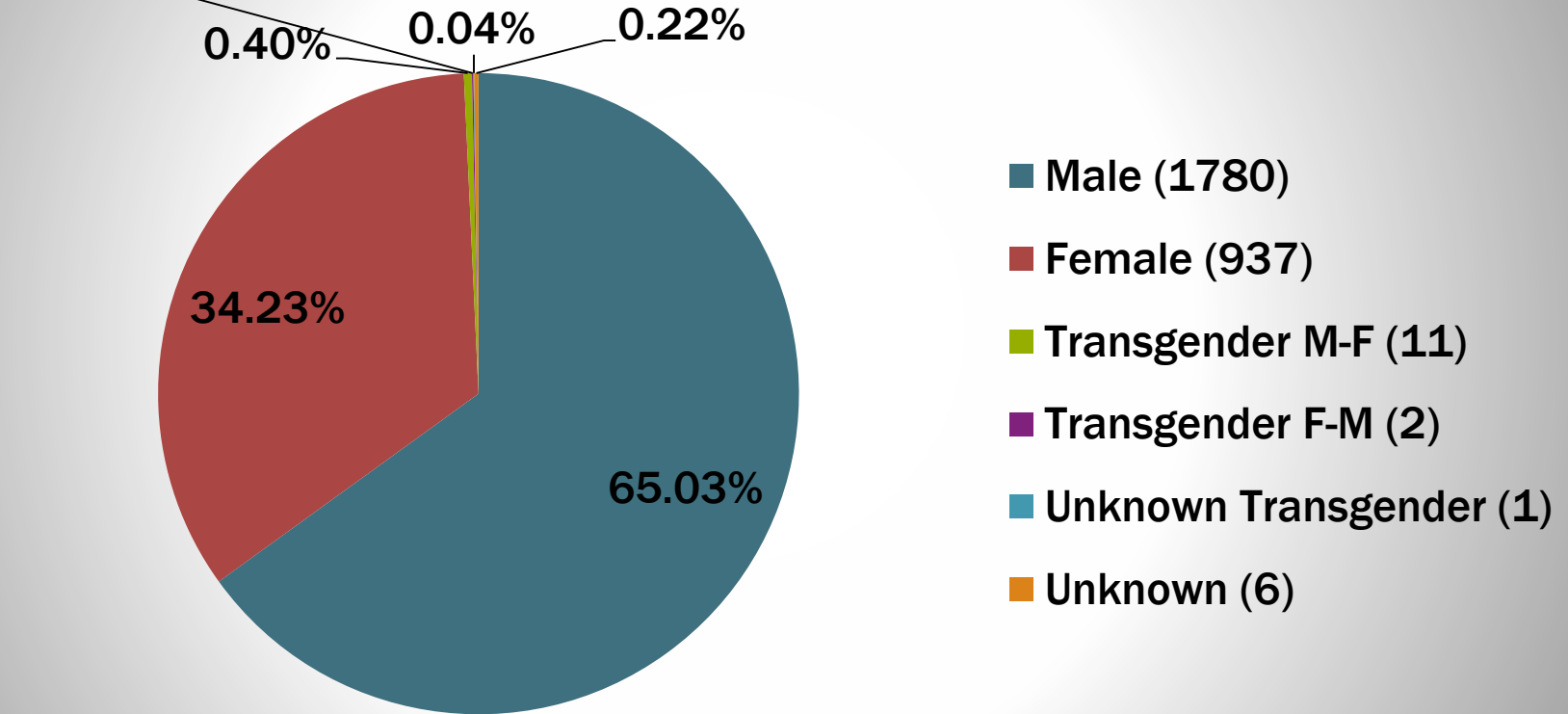
## MOST COMMON CONDITIONS:

- Hypertension
- Diabetes
- Asthma
- Heart disease
- Congestive heart failure
- Cancer
- HIV/AIDS
- Hepatitis
- Depression
- Bipolar disorder
- PTSD
- Schizophrenia

Most HFH clients have **MULTIPLE CHRONIC HEALTH CONDITIONS**

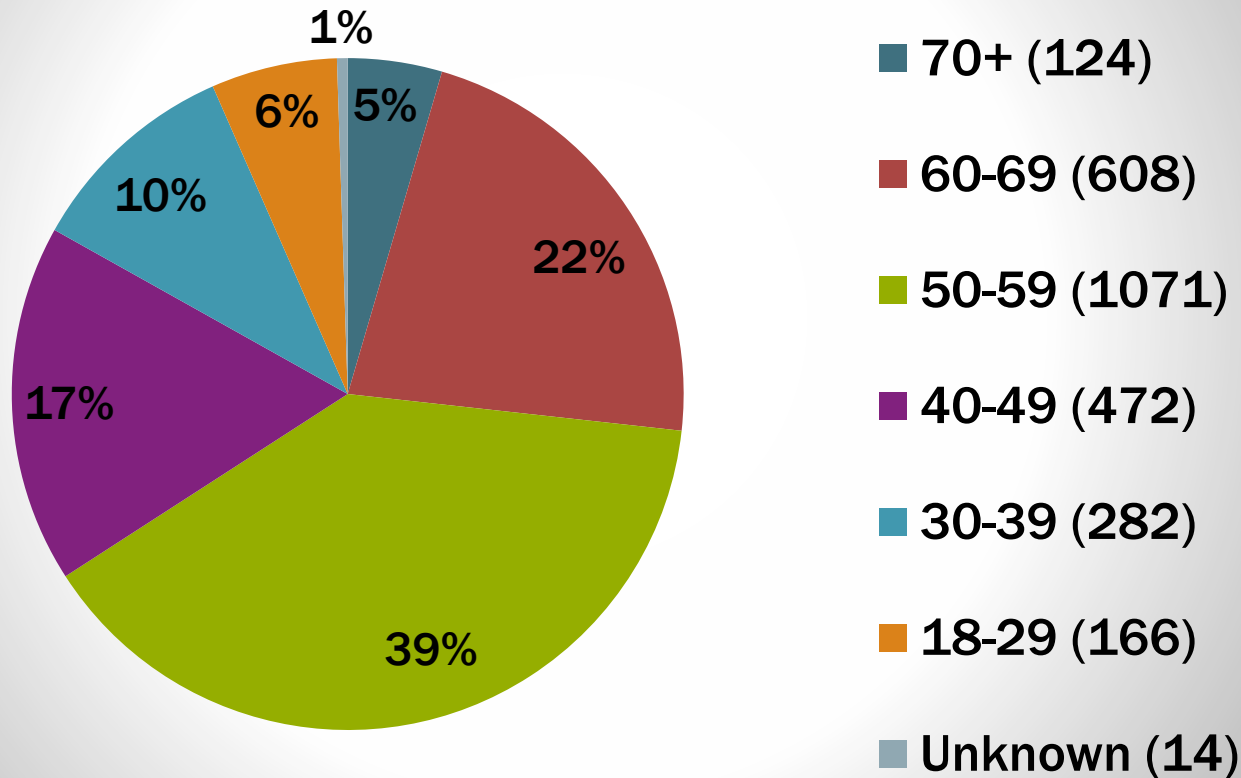
# DEMOGRAPHICS OF CLIENTS HOUSED

Gender of Clients Housed (N=2737)



# DEMOGRAPHICS OF CLIENTS HOUSED

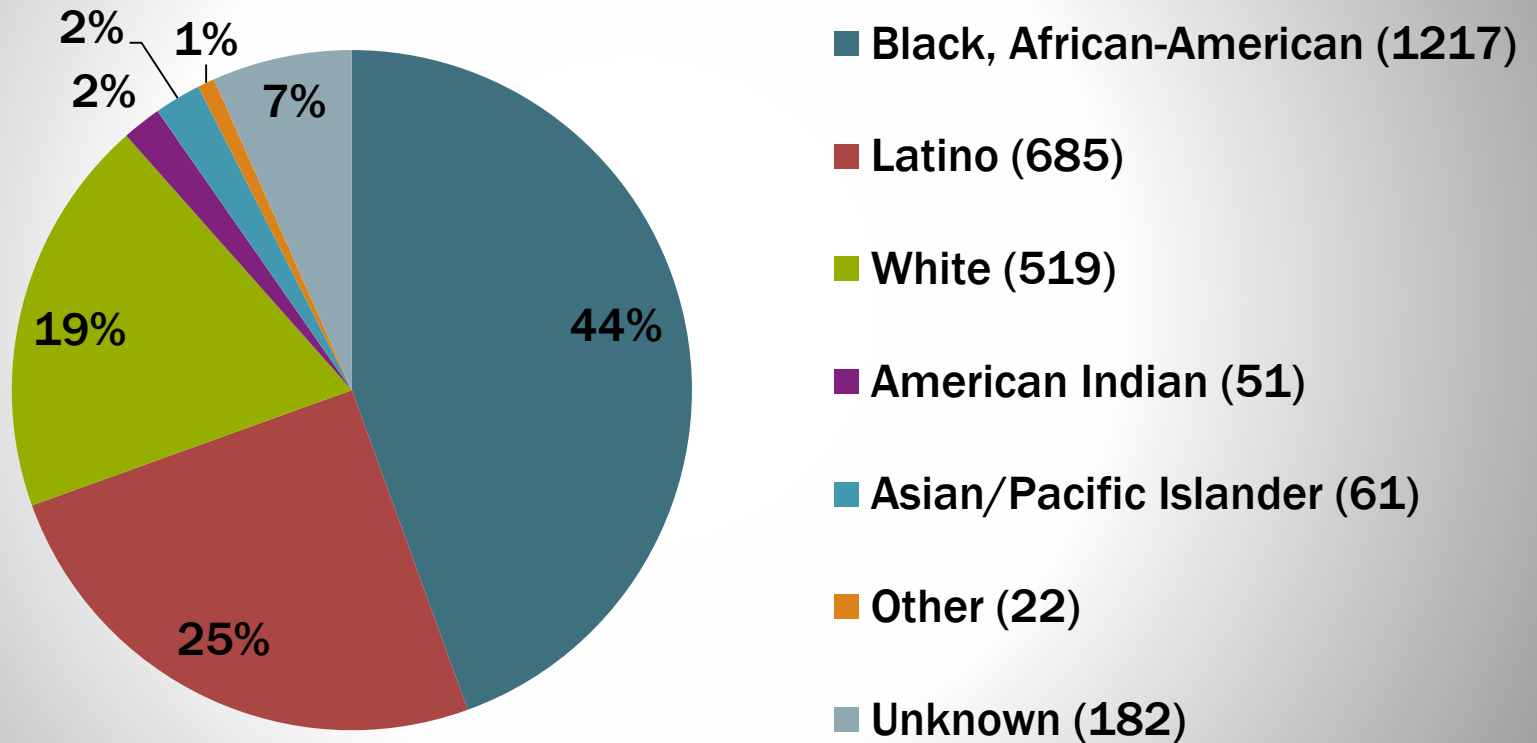
## Age of Clients Housed (N=2737)





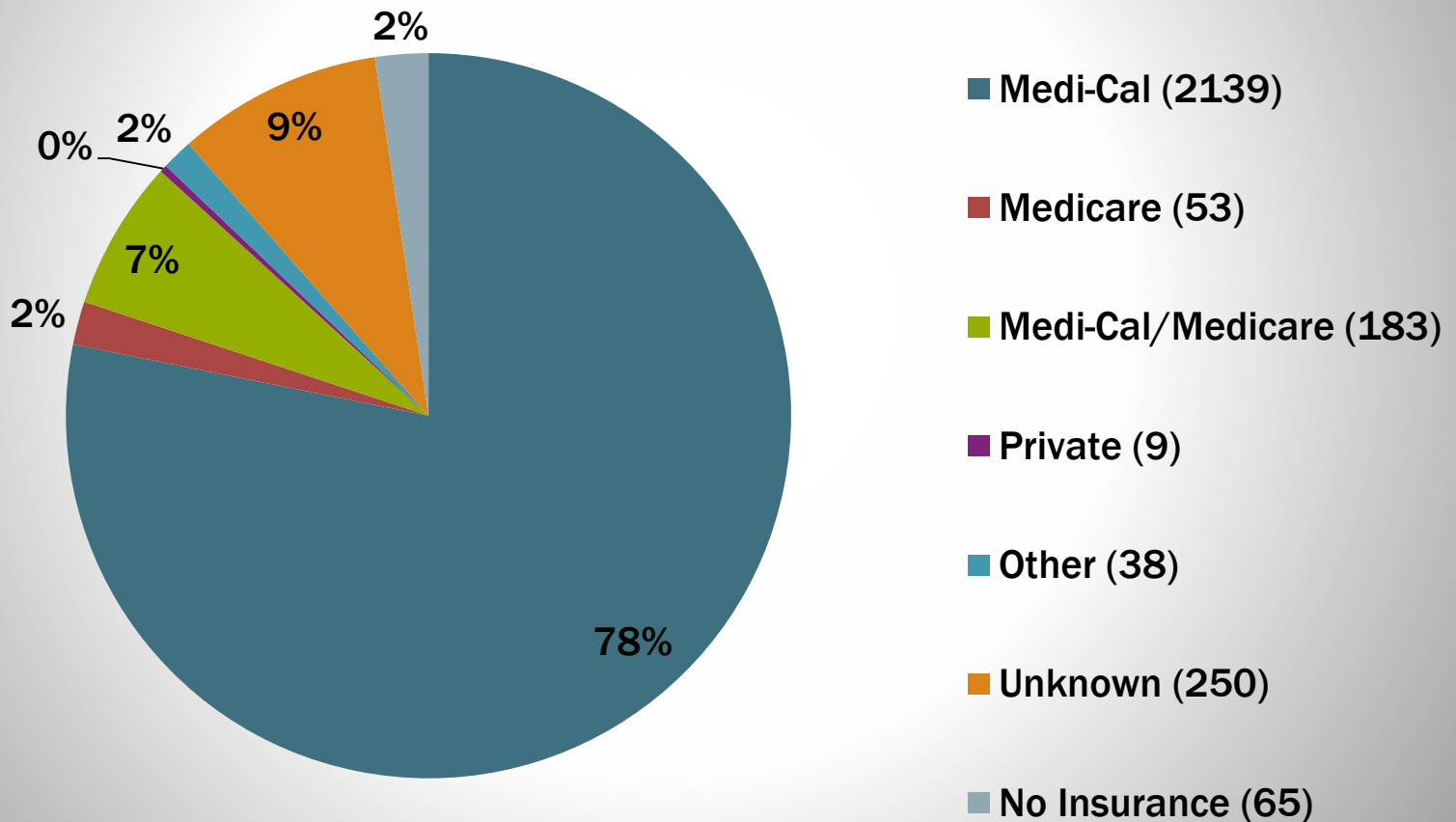
# DEMOGRAPHICS OF CLIENTS HOUSED

## Race/Ethnicity of Clients Housed (N=2737)



# CLIENT HEALTH INSURANCE

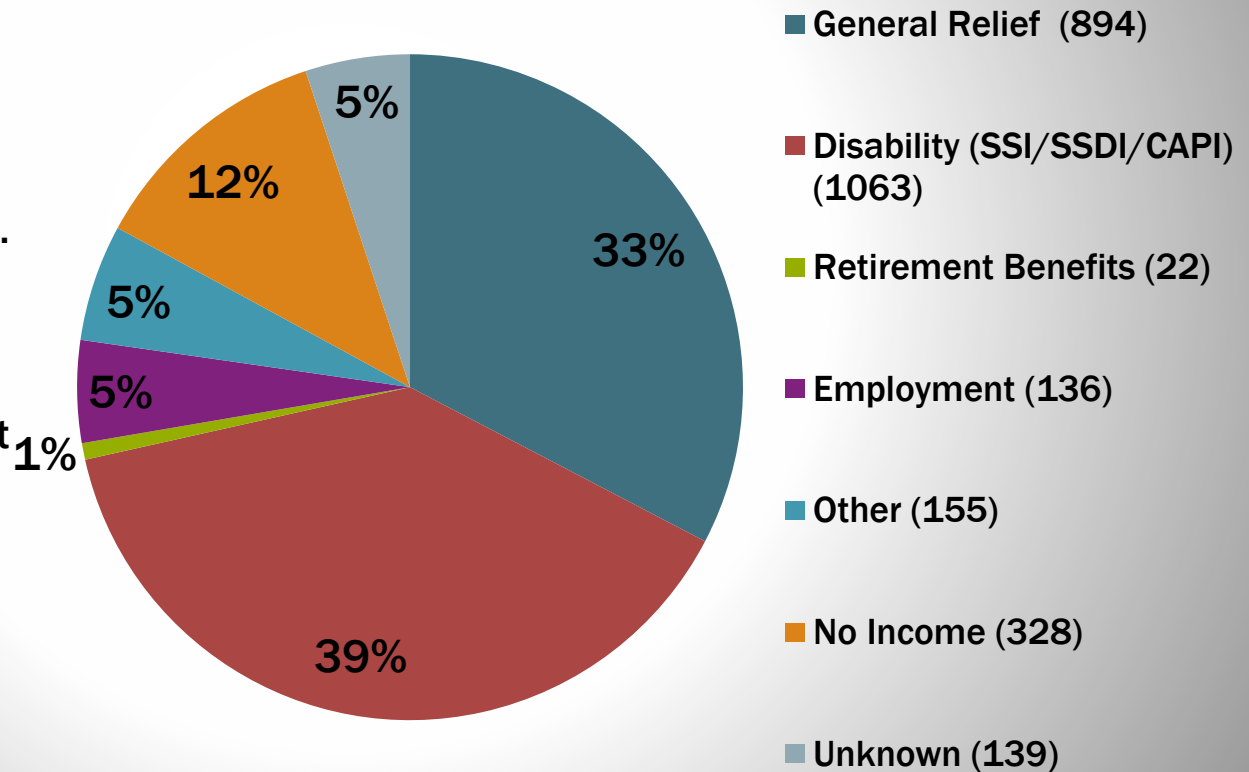
Health Insurance Type for Clients Housed (N=2737)



# CLIENT INCOME

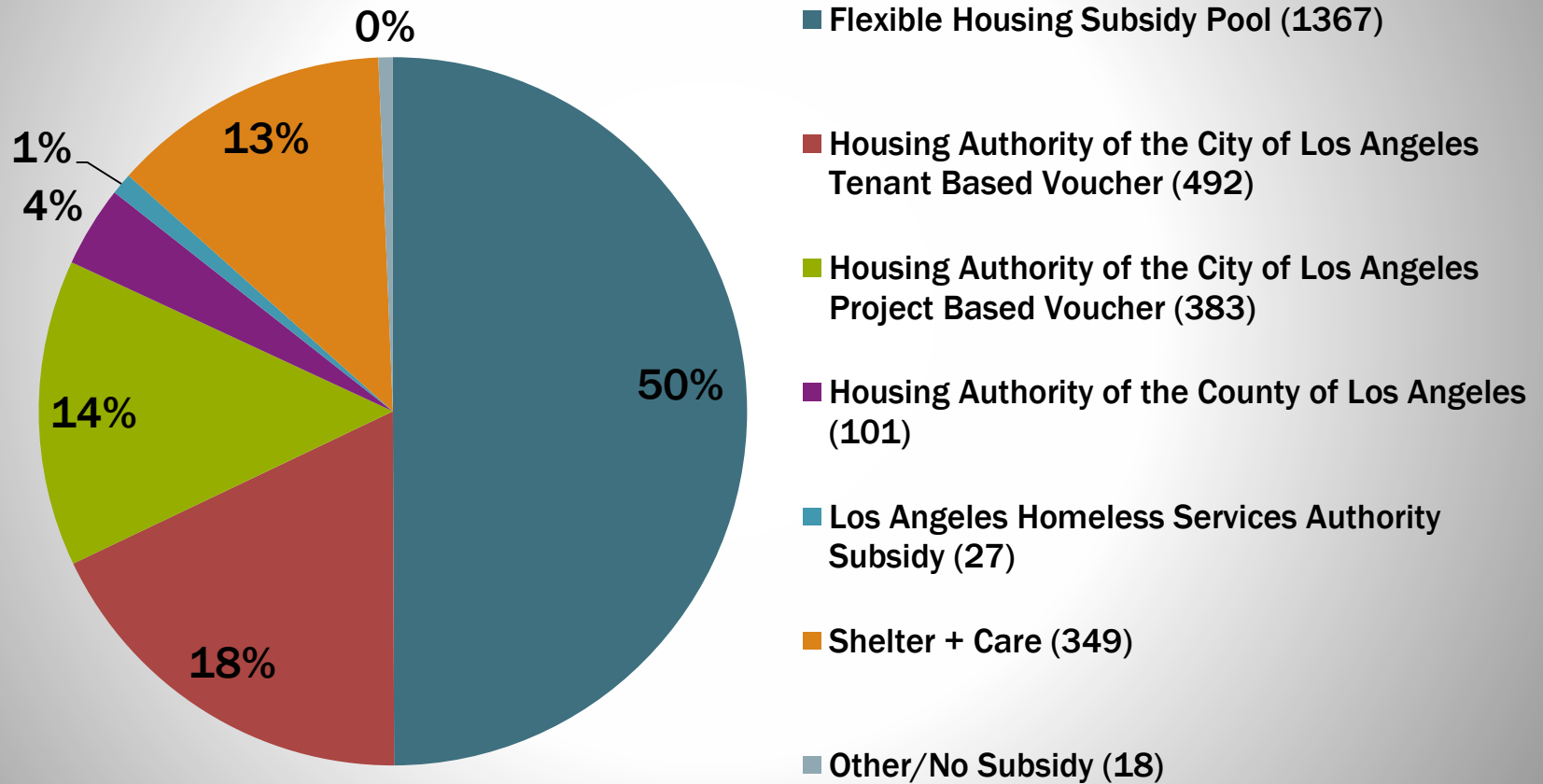
- During the client intake and assessment process, the Intensive Case Management Services (ICMS) provider obtains information on the client's income and health benefits. If the client appears to be eligible for a benefit they are not currently receiving, the ICMS provider will assist them to obtain any necessary documents and will complete and track applications for DPSS Services (CalFresh, Medi-Cal, GR, CalWORKs, and IHSS) and SSI.

## Income of Clients Housed (N=2737)



# TYPE OF HOUSING SUBSIDY

## Subsidy Type for Clients Housed (N=2737)



# INTENSIVE CASE MANAGEMENT

---

- **Every client** connected to services.
- **Individualized service** planning and linkages to health, mental health, and substance use disorder services.
- **Help clients retain** housing and reach health and wellbeing goals.
- **Services provided by** on-site staff or mobile teams.

# HOUSING STATUS AND RETENTION

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## Homeless Status

- The average length of time that clients experienced homelessness was 3 years and 7 months and the median length of time was 2 years.
- The majority of HFH clients were chronically homeless (76%), which means they were homeless for more than one year or experienced four or more episodes of homelessness in the last three years.

## Housing retention rate

- 96% of clients retained housing (remained in unit or exited to other permanent housing) after 12 months.

## Exits from housing this quarter

- Eighteen (18) clients exited housing this quarter. Thirteen (13) passed away, three (3) moved into other independent living situation or moved in with family and friends, (1) unknown reason, one (1) was incarcerated.

# FLEXIBLE HOUSING SUBSIDY POOL



# FHSP PARTNERS



Los Angeles County  
Dept. of Health  
Services



503(c) nonprofit  
coordinating community-  
based partner



Property owners  
throughout Los  
Angeles County



LAC-DHS Supportive  
Housing Rental  
Subsidy Program



# FHSP Quarterly and Program-to-Date Outcomes\*

Move-ins January-March 2017	321
Total move-ins to date	1760
Units secured January-March 2017	198
Total units secured to date **	1461

\*Numbers reported in FHSP Quarterly and Program to Date Outcomes table include two client populations (Breaking Barriers and SAM clients case managed by DMH) that are not reported in the previous slides because they do not receive ICMS services tracked through CHAMP (HFH client tracking database).

\*\* Refers to the number of units that have been secured under a rental subsidy agreement with the property owner and includes occupied and soon to be occupied units.

# CHARACTERISTICS OF FHSP HOUSING UNITS

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- Units in the HFH portfolio range in size and type across the County from large apartment buildings to smaller single family homes and are appropriate to household size and composition.
- In the most recent quarter, Brilliant Corners secured an additional 198 units in Los Angeles County for the Flexible Housing Subsidy Pool. Of the 198 units, 34 are Studios, 46 are one-bedrooms, 12 are two-bedrooms, 4 are a three-bedrooms, 36 are rooms in shared homes, 28 are SRO's and 38 are rooms in Residential Care Facilities.
- Brilliant Corners engages with private landlords, local developers, and local property management agencies, in an effort to provide a diverse pool of units to the program. From a wheelchair accessible studio unit located on the ground floor of a small 2 story apartment complex, to a 1-bedroom unit located in a 45 unit complex, Brilliant Corners is able to provide patients with a unit that offers the greatest chances of long-term housing success.

# FEATURED HOUSING SITE AND PATIENT STORY



Health Services  
LOS ANGELES COUNTY

# MOSAIC GARDENS: WILLOWBROOK

Back in the days before the Los Angeles River was paved, rains would flood the basin and water would flow through the area we now know as Compton. Brooks would form in one area in particular and Willow trees sprouted along the water, giving the Willowbrook community its name.

The 31 HFH-connected families who will be calling Willowbrook home will be utilizing Housing Authority of the County of Los Angeles Project-Based Vouchers with wraparound intensive case management services (ICMS) provided by The People Concern (formerly LAMP).

"Homelessness and affordable housing are top concerns for the Willowbrook community," said Rebecca Clark, LINC's president and CEO. "We've worked side-by-side with county leaders, our partners and this community to bring solutions that will improve people's lives and transform the neighborhood."

The architecture and landscape at Mosaic Gardens at Willowbrook has a ranch-style feeling that evokes the neighborhood's pride in being "country living in the city." It also incorporates many features for healthy living. The buildings are interconnected by open space to encourage walking and socialization. Community gardens are available for families to grow their own food, and the community room has space for educational classes for healthy living as well as a kitchen where residents can learn and share recipes on how to prepare the food they've grown. A tot lot and small field provide children a safe environment for physical activity. The large community space also includes multipurpose space to house a variety of resident programs as well as a computer lab, fitness room, manager's office, and private meeting space for service providers and case managers.

Within a half mile of the property, residents of this community have access to many amenities including an elementary school, public transportation, retail shopping, pharmacies and other service opportunities. The property is within a mile of the Martin Luther King, Jr. Multi-Service Ambulatory Care Center and the Willowbrook/Rosa Parks Metro Station.

Construction began in December 2015. The community was designed by Studio One Eleven and was brought to life by Withee Malcolm Architects and Walton Construction.



# FEATURED CLIENT SUCCESS STORY

---

Laura\* and Chloe\* are both transitional age youth (TAY) who were living in an RV on a relative's property when their life nearly turned upside down. The relative passed away and the property was taken over by the estate and they were forced to leave. Laura and Chloe were unable to afford a home of their own and they suddenly found themselves homeless.

Luckily, Laura and Chloe were enrolled in a woman-focused coding training program called Codetalk which is at St. Joseph's Center. St. Joseph's Center is one of Housing for Health's participating agencies in the Housing and Jobs Collaborative (HJC). HJC is a rapid rehousing program for individuals who need short term rental subsidy support and case management services. The pair were quickly enrolled into HJC and continued with the job training program that would enable them to have competitive job opportunities.

Their HJC case manager sprang into action by locating a 2-bedroom apartment they could share with good access to public transportation to Venice, where their training was located. Housing subsidy operator and HJC partner Brilliant Corners was able to secure the apartment and their subsidy and lease applications were approved within days of locating the apartment.

With support from Codetalk, as well as St. Joseph's Center's TAY program, Safe Place for Youth, Laura and Chloe were able to continue their program and transition into housing nearly seamlessly. Where they lost their footing, HJC and its partners were able to provide a stable foundation so they could continue on their path towards success.

\*Names changed



**Health Services**  
LOS ANGELES COUNTY

August 30, 2017

Los Angeles County  
Board of Supervisors

Hilda L. Solis  
First District

Mark Ridley-Thomas  
Second District

Sheila Kuehl  
Third District

Janice Hahn  
Fourth District

Kathryn Barger  
Fifth District

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

FROM: Mitchell H. Katz, M.D. *Mitchell Katz*  
Director

SUBJECT: **HOUSING FOR HEALTH QUARTERLY REPORT (ITEM #16 FROM THE JANUARY 14, 2014 BOARD MEETING)**

Mitchell H. Katz, M.D.  
Director

Hal F. Yee, Jr., M.D., Ph.D.  
Chief Medical Officer

Christina R. Ghaly, M.D.  
Chief Operations Officer

On January 14, 2014, the Board instructed the Director of the Department of Health Services (DHS) to submit quarterly reports to the Board on Housing for Health (HFH) permanent supportive housing outcomes including funds, costs, number and composition of clients housed; integrated health, mental health, substance use disorder and benefits establishment results; utilization rate and duration of housing subsidies; number of clients transitioning off of housing subsidies; and characteristics of housing units secured.

313 N. Figueroa Street, Suite 912  
Los Angeles, CA 90012

Tel: (213) 240-8101  
Fax: (213) 481-0503

**BACKGROUND**

[www.dhs.lacounty.gov](http://www.dhs.lacounty.gov)

In November 2012, DHS established the HFH division to expand access to supportive housing for people who are homeless and who have complex health and/or behavioral health conditions, high utilizers of public services, and other vulnerable populations.

HFH utilizes a full range of community-based housing options, including non-profit owned supportive housing, affordable housing, and private market housing. Tenants receive federal rental subsidies such as Section 8 Project Based or Tenant Based Vouchers or a local rental subsidy through the Flexible Housing Subsidy Pool (FHSP). All individuals who are housed through HFH programs are assigned to a homeless services provider to receive Intensive Case Management Services (ICMS). These services include outreach and engagement; case management with on-going monitoring and follow-up; linkage to health, mental health, and substance use disorder services; assistance with benefits establishment; assistance with life skills, job skills, and educational and volunteer opportunities; crisis intervention, etc. ICMS providers provide "whatever it takes" wraparound services to assist clients in regaining stability and improved health.

*To ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.*

[www.dhs.lacounty.gov](http://www.dhs.lacounty.gov)



## NEW EXECUTED WORK ORDERS

Pursuant to the Supportive Housing Services Master Agreement (SHSMA) approved by the Board on June 19, 2012, this is to advise that DHS has executed 16 Work Orders to provide Intensive Case Management Services during the April – June 2017 quarter. County Counsel has reviewed and approved the Work Orders.

	<b>Contractor</b>	<b>Work Order #</b>	<b>Master Agreement #</b>
1	Integrated Recovery Network	SHSMA 041	H-706426
2	The Illumination Foundation	SHSMA 042	H-706429
3	Imagine Los Angeles, Inc.	SHSMA 044	H-707188
4	Mental Health America of Los Angeles	SHSMA 045	H-705421
5	L.A. Family Housing Corporation	SHSMA 046	H-705982
6	San Fernando Valley Mental Health Center	SHSMA 047	H-707160
7	Union Station Homeless Services	SHSMA 048	H-706428
8	LAMP, Inc. dba LAMP Community	SHSMA 049	H-705414
9	St. Joseph Center	SHSMA 050	H-705427
10	Special Service For Groups, Inc.	SHSMA 051	H-705426
11	PATH	SHSMA 052	H-705713
12	Mental Health America of Los Angeles	SHSMA 053	H-705421
13	PATH	SHSMA 054	H-705713
14	Exodus Recovery, Inc.	SHSMA 055	H-706759
15	Affordable Living for the Aging	SHSMA 056	H-706001
16	Brilliant Corners	SHSMA 057	H-705430

## QUARTERLY REPORT

Please find the attached quarterly report in dashboard format. If you have any questions, please contact me or Mark Ghaly, M.D., Deputy Director of Community Health, at (213) 240-8107.

MHK:mg

Attachment

c: Chief Executive Office  
County Counsel  
Executive Office, Board of Supervisors

# HOUSING

FOR

# HEALTH

Quarterly Report April-June 2017



Health Services  
LOS ANGELES COUNTY



# GOALS

---

- 1. Create 10,000 units of housing**
- 2. End homelessness in LA County**
- 3. Reduce inappropriate use of expensive health care resources**
- 4. Improve health outcomes for vulnerable populations.**

# CLIENTS HOUSED

- Housing for Health provides housing and supportive services to homeless clients with physical and/or behavioral health conditions, high utilizers of county services, and other vulnerable populations.

# HFH CLIENT PROCESS

## CLIENT IDENTIFICATION

by DHS facilities, County departments, CES, and other partners

## REVIEW/EVALUATE/ROUTE REFERRALS

by HFH Administrative/Clinical Team

## INTERIM HOUSING

RECUPERATIVE  
CARE

STABILIZATION  
HOUSING

PERMANENT  
HOUSING

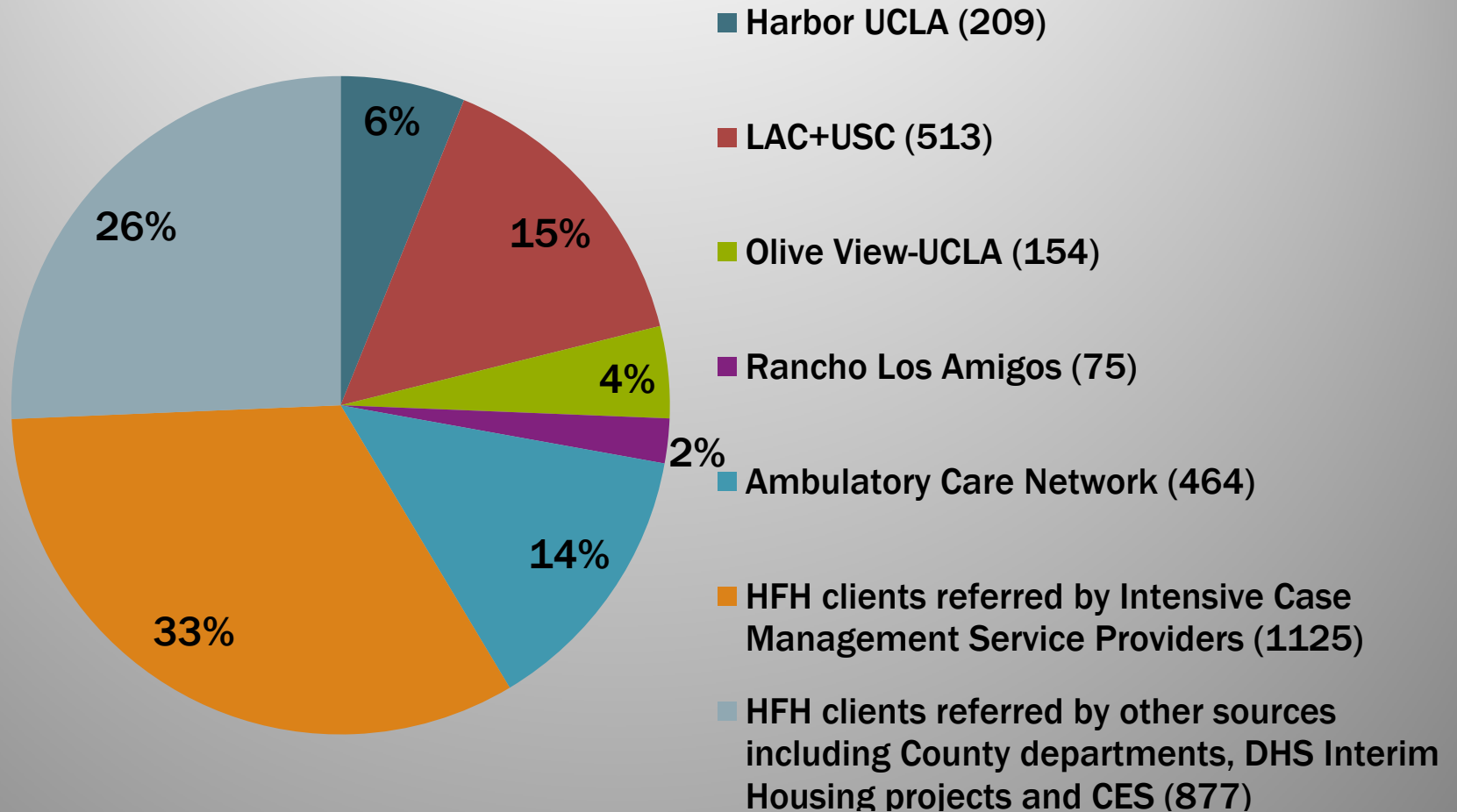
# Supportive Housing Quarterly and Program-to-Date Outcomes

<b>Total # of clients who have attained housing since HFH began in November 2012</b>	<b>3417</b>
<b>Total # of HFH clients who are currently housed</b>	<b>3041</b>
<b>Total # of HFH clients housed April-June 2017</b>	<b>390</b>

\*Please note that the total number of clients housed listed here is lower than the total number of move-ins for the Flexible Housing Subsidy Pool (found on slide 18). Due to the various funding streams in the Flex Pool, not all FHSP move-ins are HFH clients.

# WHERE DO HFH REFERRALS COME FROM?

## Referral Source of Clients Housed (N=3417)



# HEALTH CONDITIONS OF CLIENTS HOUSED

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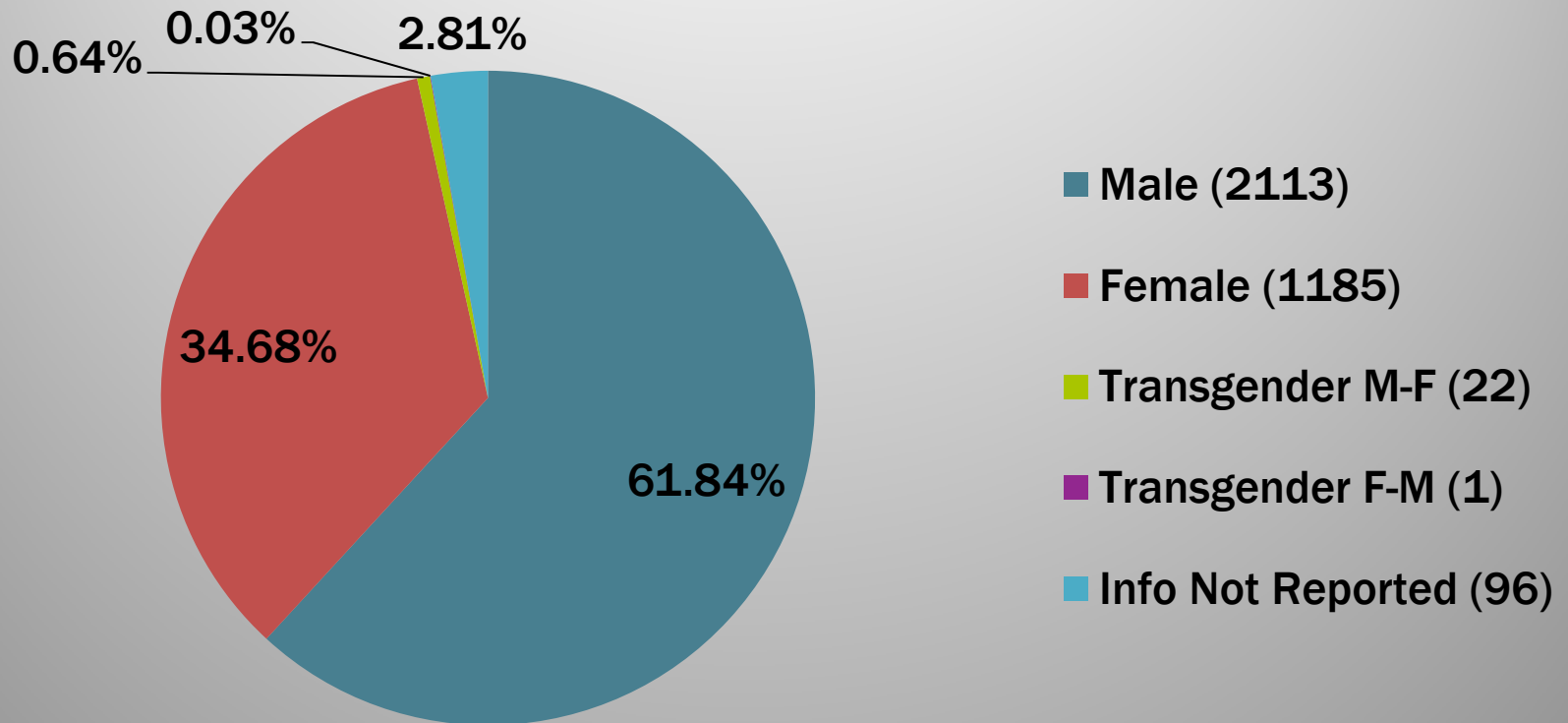
## MOST COMMON CONDITIONS:

- Depression
- Hepatitis C
- Asthma
- Substance Use Disorder
- Schizophrenia
- Anemia
- Seizure Disorder
- Bipolar Disorder
- Cancer
- Neuropathy
- Schizoaffective Disorder
- HIV/AIDS

Most HFH clients have **MULTIPLE CHRONIC HEALTH CONDITIONS**

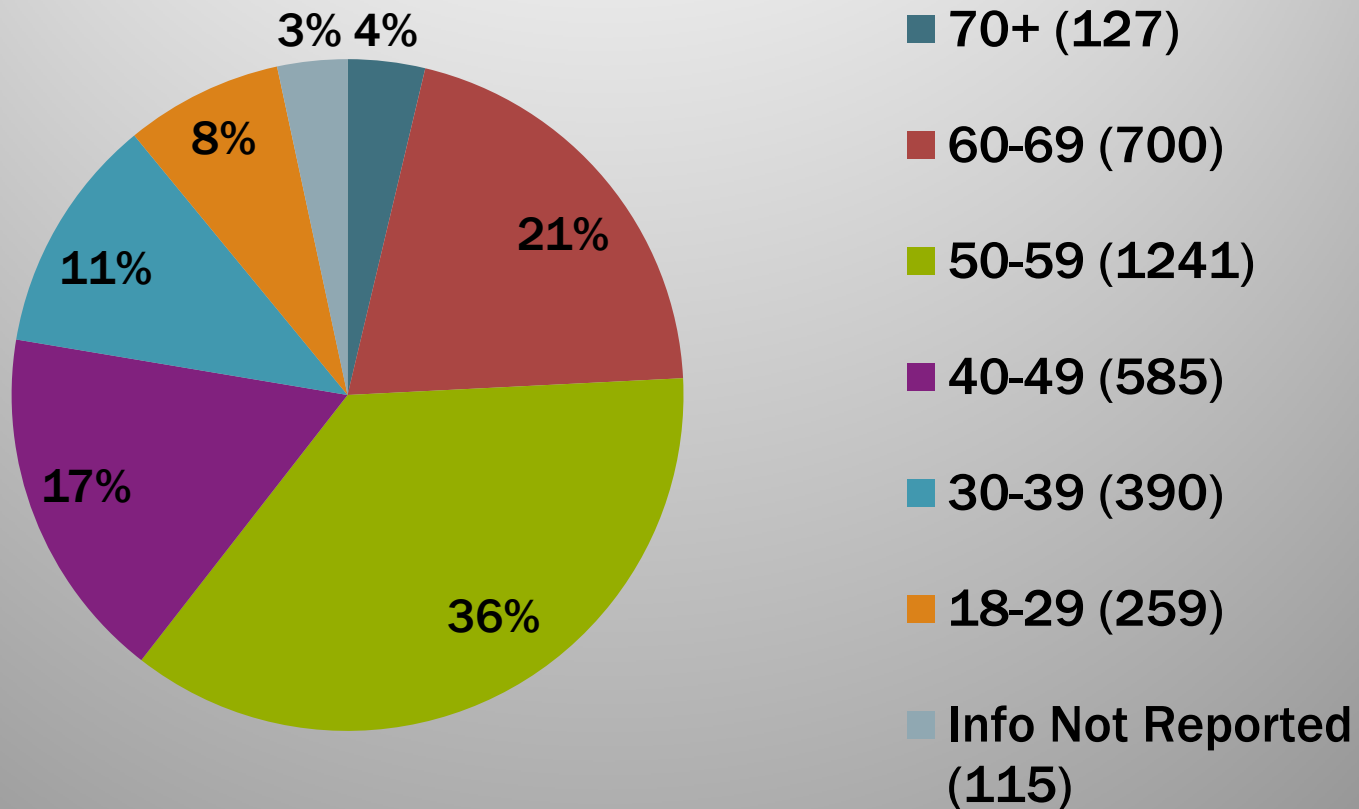
# DEMOGRAPHICS OF CLIENTS HOUSED

Gender of Clients Housed (N=3417)



# DEMOGRAPHICS OF CLIENTS HOUSED

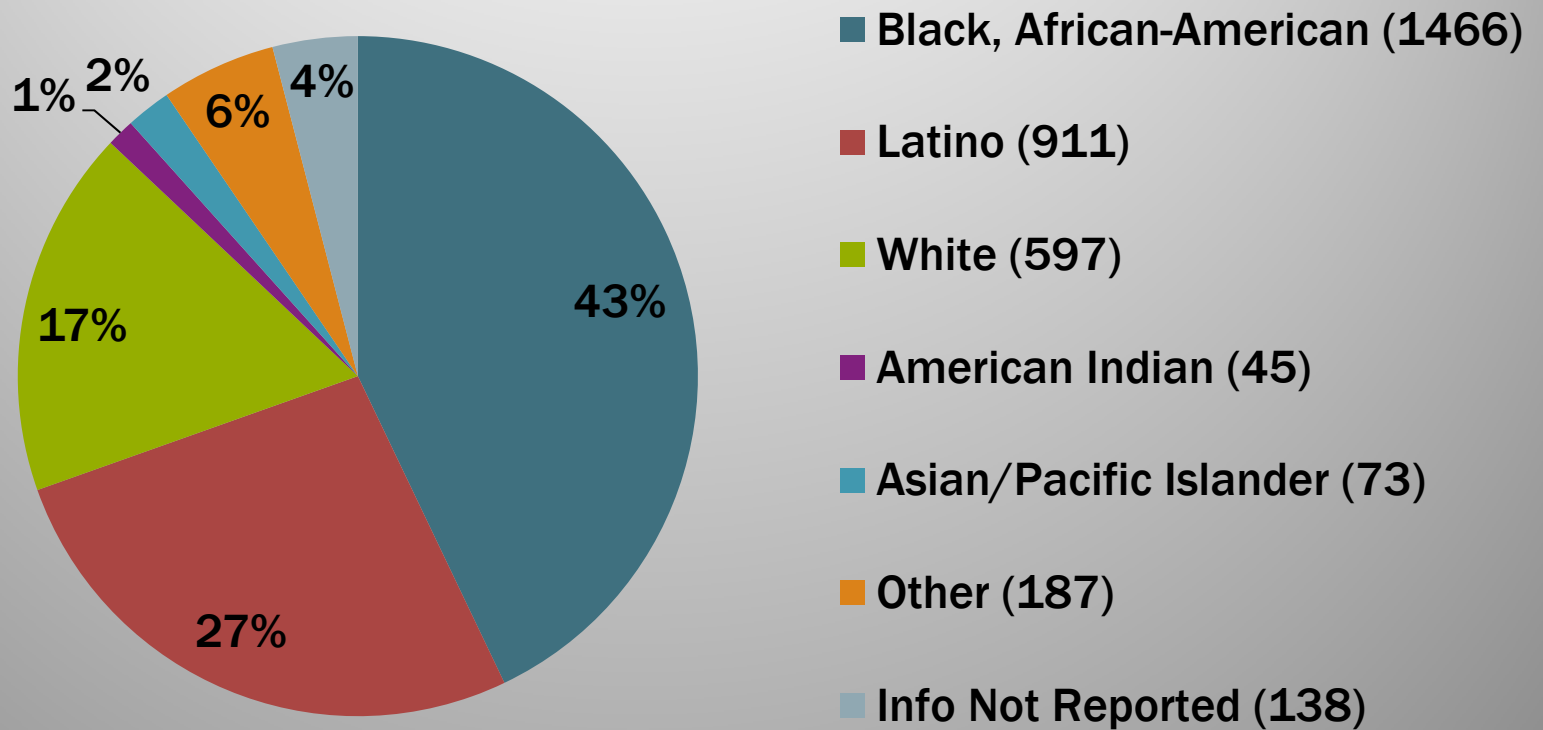
Age of Clients Housed (N=3417)





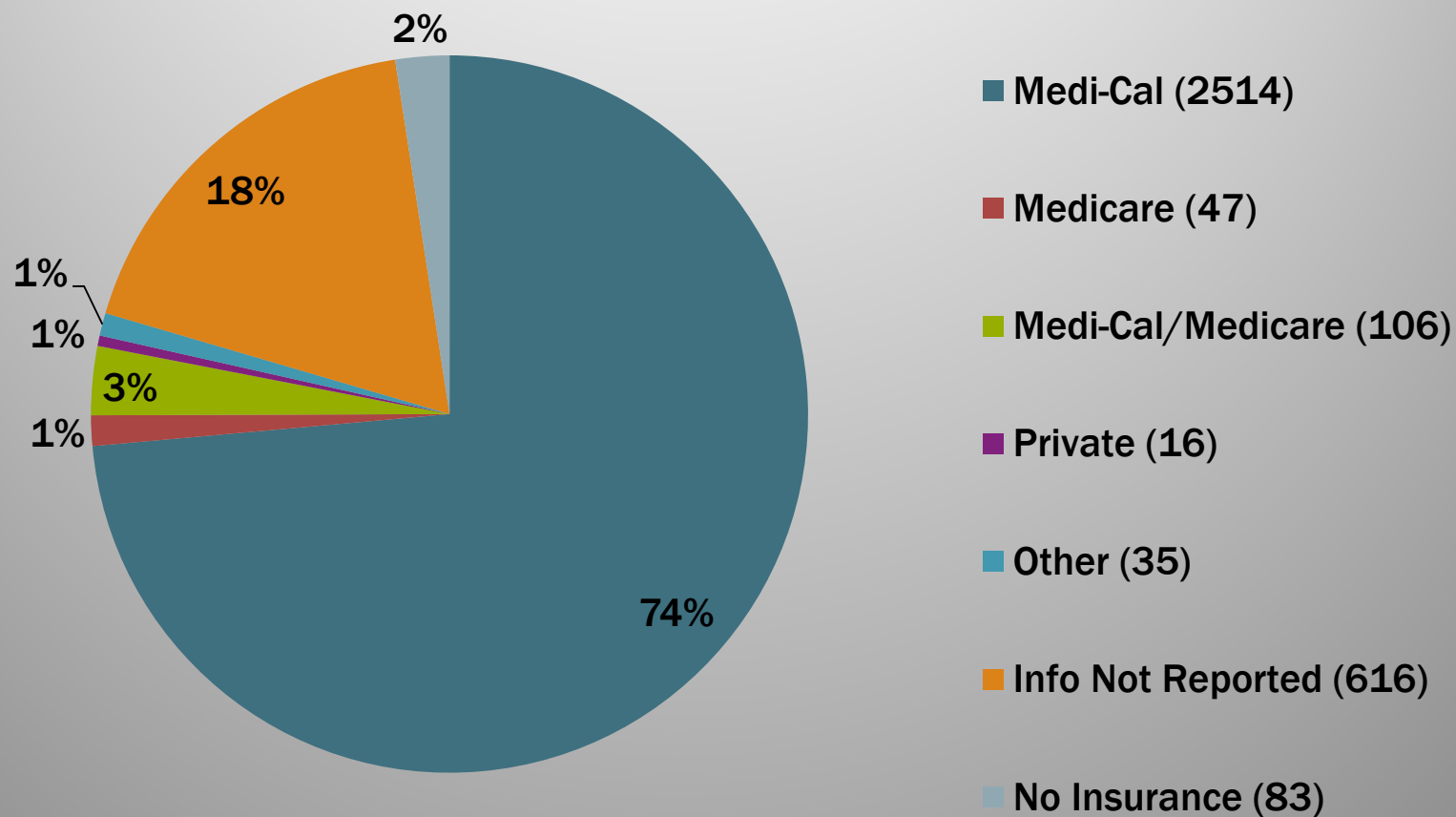
# DEMOGRAPHICS OF CLIENTS HOUSED

Race/Ethnicity of Clients Housed (N=3417)



# CLIENT HEALTH INSURANCE

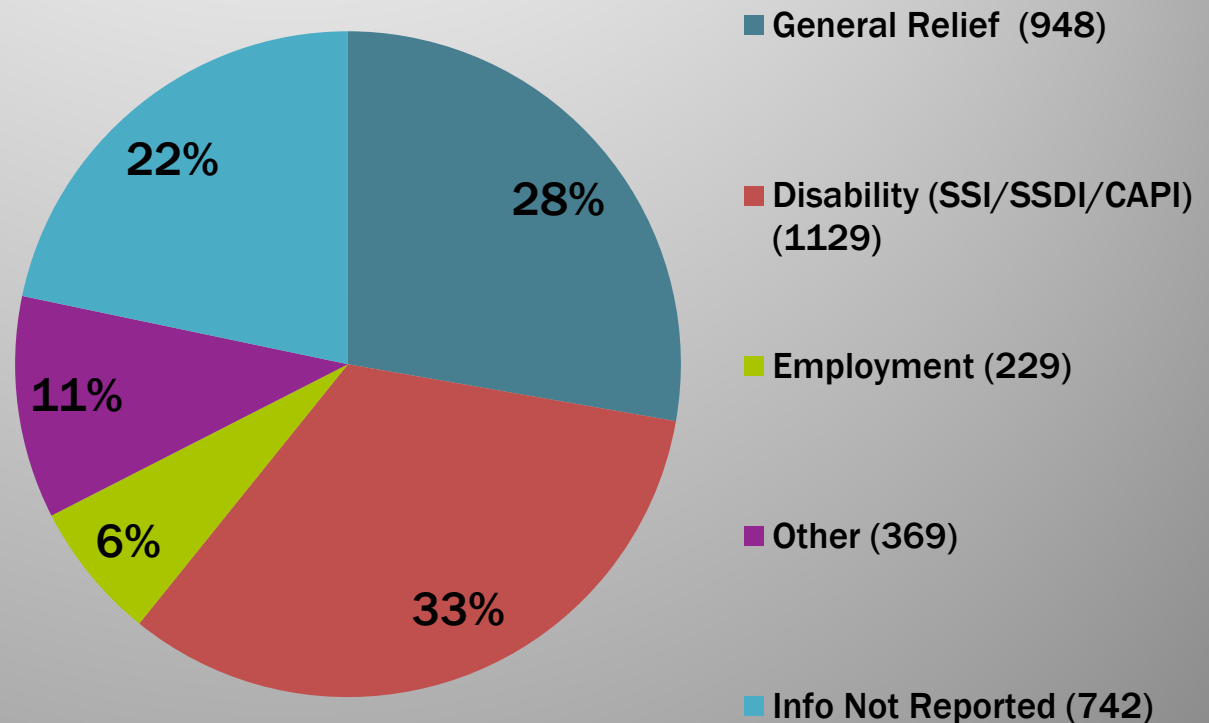
Health Insurance Type for Clients Housed (N=3417)



# CLIENT INCOME

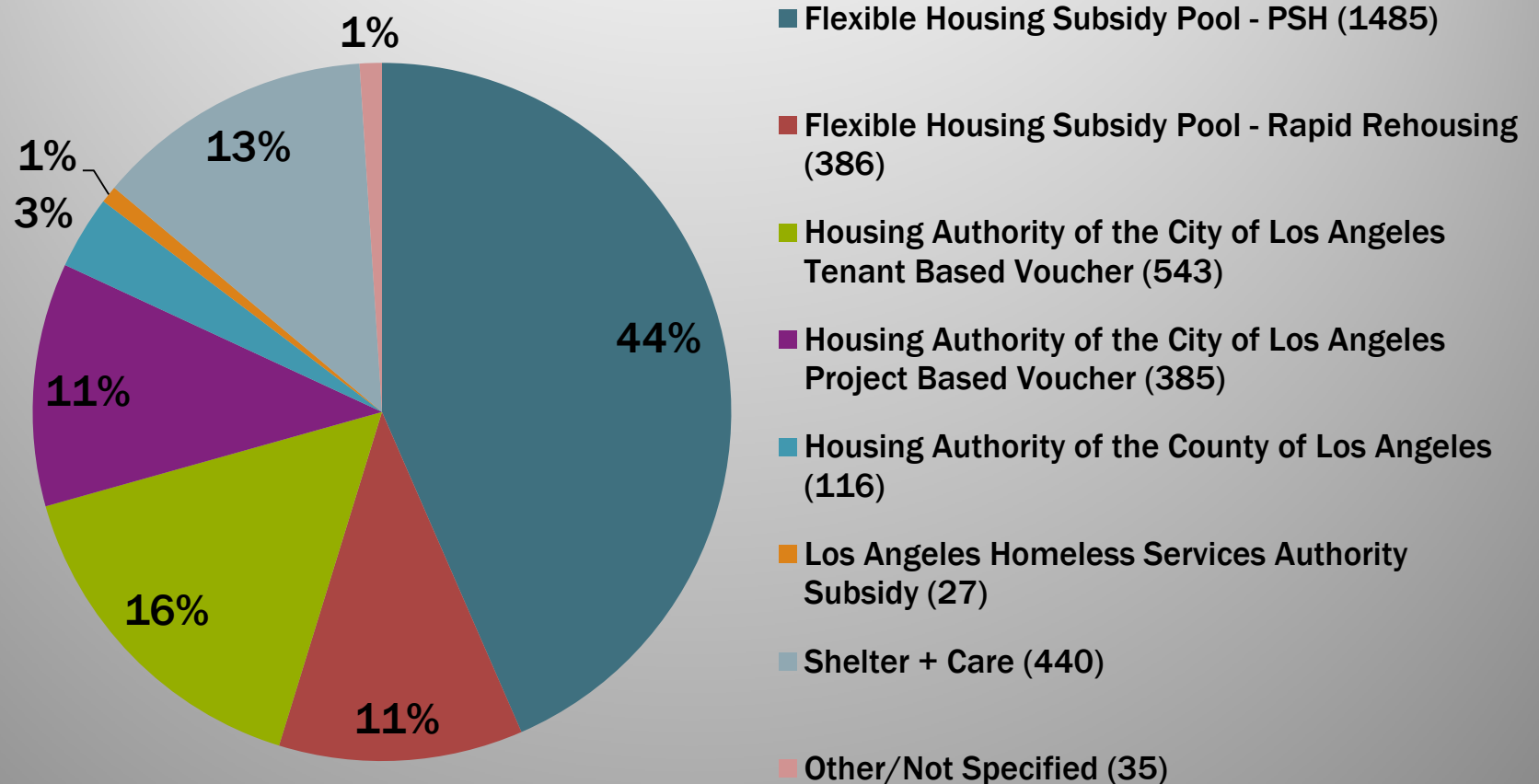
- During the client intake and assessment process, the Intensive Case Management Services (ICMS) provider obtains information on the client's income and health benefits. If the client appears to be eligible for a benefit they are not currently receiving, the ICMS provider will assist them to obtain any necessary documents and will complete and track applications for DPSS Services (CalFresh, Medi-Cal, GR, CalWORKs, and IHSS) and SSI.

## Income of Clients Housed (N=3417)



# TYPE OF HOUSING SUBSIDY

## Subsidy Type for Clients Housed (N=3417)



# INTENSIVE CASE MANAGEMENT

---

- **Every client** connected to services.
- **Individualized service** planning and linkages to health, mental health, and substance use disorder services.
- **Help clients retain** housing and reach health and wellbeing goals.
- **Services provided by** on-site staff or mobile teams.

# HOUSING STATUS AND RETENTION

---

## Homeless Status

- The average length of time that clients experienced homelessness was 3 years and 8 months and the median length of time was 2 years.
- The majority of HFH clients were chronically homeless (79%), which means they were homeless for more than one year or experienced four or more episodes of homelessness in the last three years.

## Housing retention rate

- 97% of clients retained housing (remained in unit or exited to other permanent housing) after 12 months.

## Exits from housing this quarter

- Fifty Nine (59) clients exited housing this quarter. Thirteen (13) passed away, nine (9) voluntarily surrendered, thirteen (13) moved into other independent living situation or moved in with family and friends, (13) unknown reason, four (4) were incarcerated, three (3) were evicted, four (4) moved to higher level of care.

# FLEXIBLE HOUSING SUBSIDY POOL



# FHSP PARTNERS



Los Angeles County  
Dept. of Health  
Services



503(c) nonprofit  
coordinating community-  
based partner



Property owners  
throughout Los  
Angeles County



LAC-DHS Supportive  
Housing Rental  
Subsidy Program



# FHSP Quarterly and Program-to-Date Outcomes

Move-ins April-June 2017*	411
Total move-ins to date **	2382
Units secured April-June 2017	286
Total units secured to date ***	2292

\*Move Ins April- June 2017 are for the following FHSP projects: DHS (153), Housing and Jobs Collaborative Rapid Rehousing Program (87), WISH (10), DHS Board and Care (68), ODR (31), Breaking Barriers (14), SAM-MIT (6), AB109 (2) and SAM DPSS (40).

\*\* Total move-ins include AB109 funded Board and Care, Breaking Barriers, DHS, DMH, DHS B & C, Housing and Jobs Collaborative, ODR, SAM DPSS, SAM MIT, WISH.

\*\*\* Refers to the number of units that have been secured under a rental subsidy agreement with the property owner and includes occupied and soon to be occupied units.

# CHARACTERISTICS OF FHSP HOUSING UNITS

---

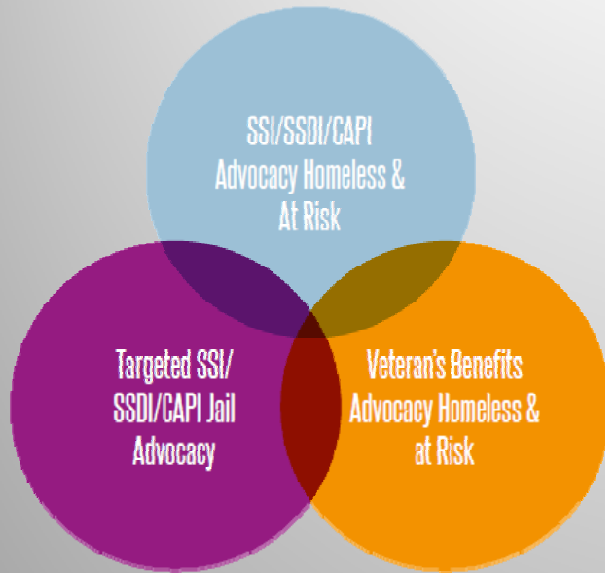
- Units in the HFH portfolio range in size and type across the County from large apartment buildings to smaller single family homes and are appropriate to household size and composition.
- In the most recent quarter, Brilliant Corners secured an additional 286 units in Los Angeles County for the Flexible Housing Subsidy Pool. Of the 286 units, 86 are Studios, 97 are one-bedrooms, 11 are two-bedrooms, 31 are rooms in shared homes, 13 are SRO's and 48 are rooms in Residential Care Facilities.
- Brilliant Corners engages with private landlords, local developers, and local property management agencies, in an effort to provide a diverse pool of units to the program. From a wheelchair accessible studio unit located on the ground floor of a small 2 story apartment complex, to a 1-bedroom unit located in a 45 unit complex, Brilliant Corners is able to provide patients with a unit that offers the greatest chances of long-term housing success.

# FEATURED PROJECT AND CLIENT STORY



Health Services  
LOS ANGELES COUNTY

# COUNTYWIDE BENEFITS ENTITLEMENT SERVICES TEAM (CBEST)



Housing For Health launched a benefits advocacy services program called the Countywide Benefits Entitlement Services Team (CBEST) in March 2017. The program removes barriers for homeless disabled adults by providing coordinated health and mental health evaluations, case management and benefits advocacy to people who are homeless or at risk of homelessness. CBEST lead partners also include the LA County Sheriff’s Department, the LA County Department of Military and Veterans Affairs, and the LA County Department of Public Social Services (DPSS).

The target population is Medi-Cal eligible adults who are homeless and at risk of homelessness who may be eligible for SSI, SSDI or Cash Assistance for Immigrants (CAPI) benefits; homeless veterans and veterans at risk of homelessness applying for Department of Veterans Affairs benefits or related services; and inmates in jail facilities who may be eligible for SSI, SSDI, or CAPI benefits.

CBEST services are in community-based locations within each Service Planning Area, co-located in 14 DPSS offices Countywide, and in all Los Angeles County jail facilities. **CBEST goals include achieving a minimum of an 80% approval rate on all benefits applications and ensuring that 75% of clients are linked to and have access to health, mental health, and substance use disorder services.**

SPA	Lead Agency
SPA 1	The Catalyst Foundation
SPA 2	Tarzana Treatment Center
SPA 3	Volunteers of America
SPA 4	Volunteers of America
SPA 5	St Joseph's Center
SPA 6	Special Service for Groups - HOPICS
SPA 7	People Assisting the Homeless
SPA 8	Lutheran Social Services

# FEATURED CLIENT SUCCESS STORY

---

Chuck\* spent more than 15 years on the streets, his paranoid schizophrenia creating constant barriers for him to connect to any one, much less any type of resource. His paranoia made him grow very skeptical about enrolling in any benefits as he did not want to rely on the government services.

That didn't stop the newly-minted County Benefits Entitlements Services Team (CBEST) in Service Planning Area 8 from reaching out to him. Advocates from Lutheran Social Services teamed up with the Department of Public Social Services staff and began to work with Chuck.

During his second meeting with the SPA 8 CBEST advocate in late April, she worked with Chuck and had him sign all of the documents necessary to get him linked to housing and collect pertinent medical documentation.

The advocate worked quickly to gain Chuck's trust and develop a rapport, connecting him to multiple resources in a short amount of time. By his second meeting, they were able to enroll him in Medi-Cal and at the third meeting the advocate took Chuck to DPSS to apply for General Relief and CalFresh.

The advocate worked with the ADA liaison at DPSS to expedite him through the GR application in less than 1.5 hours! While there, he was also able to get hotel vouchers for 2 weeks and bus tokens.

After a couple of months of working with him, his advocate has been able to link him to a Department of Mental Health clinic where he is now receiving mental health care. The advocates are now working on interim housing and the SSI/SSDI application.

\*Name changed



December 7, 2017

**Los Angeles County  
Board of Supervisors**

**Hilda L. Solis**  
First District

**Mark Ridley-Thomas**  
Second District

**Sheila Kuehl**  
Third District

**Janice Hahn**  
Fourth District

**Kathryn Barger**  
Fifth District

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

**FROM:** Mitchell H. Katz, M.D. *Mitchell Katz*  
Director

**SUBJECT: HOUSING FOR HEALTH QUARTERLY  
REPORT (ITEM #16 FROM THE JANUARY 14,  
2014 BOARD MEETING)**

**Mitchell H. Katz, M.D.**  
Director, Health Agency

**Christina R. Ghaly, M.D.**  
Acting Director, Department of Health Services

**Jonathan E. Sherin, M.D., Ph.D.**  
Director, Department of Mental Health

**Barbara Ferrer, Ph.D., M.P.H., M.Ed.**  
Director, Department of Public Health

313 N. Figueroa Street, Suite 912  
Los Angeles, CA 90012

Tel: (213) 240-8101  
Fax: (213) 481-0503

On January 14, 2014, the Board instructed the Director of the Department of Health Services (DHS) to submit quarterly reports to the Board on Housing for Health (HFH) permanent supportive housing outcomes including funds, costs, number and composition of clients housed; integrated health, mental health, substance use disorder and benefits establishment results; utilization rate and duration of housing subsidies; number of clients transitioning off of housing subsidies; and characteristics of housing units secured.

### BACKGROUND

In November 2012, DHS established the HFH division to expand access to supportive housing for DHS patients who are homeless and who have complex medical and behavioral health conditions and/or are high utilizers of DHS services.

HFH utilizes a full range of community-based housing options, including non-profit owned supportive housing, affordable housing, and private market housing. Tenants receive federal rental subsidies such as Section 8 Project Based or Tenant Based Vouchers or a local rental subsidy through the Flexible Housing Subsidy Pool (FHSP). All individuals who are housed through HFH programs are assigned to a homeless services provider to receive Intensive Case Management Services (ICMS). These services include outreach and engagement; case management with on-going monitoring and follow-up; linkage to health, mental health, and substance use disorder services; assistance with benefits establishment; assistance with life skills, job skills, and educational and volunteer opportunities; crisis intervention, etc. ICMS providers provide "whatever it takes" wraparound services to assist clients in regaining stability and improved health.

*"The mission of the Los Angeles County Health Agency is to improve health and wellness across Los Angeles County through effective, integrated, comprehensive, culturally appropriate services, programs, and policies that promote healthy people living in healthy communities."*



Each Supervisor  
December 7, 2017  
Page 2

### NEW EXECUTED WORK ORDERS

Pursuant to the Supportive Housing Services Master Agreement (SHSMA) approved by the Board on June 19, 2012, this is to advise that DHS has executed eight Work Orders to provide intensive case management services to clients who are homeless during the July–September 2017 quarter (see table below). County Counsel has reviewed and approved the Work Orders.

	<b>Contractor</b>	<b>Effective Date</b>	<b>Project Type</b>
1	Emotional Health Association, dba SHARE! The Self-Help and Recovery Exchange	7/5/2017	Permanent Supportive Housing
2	PATH	7/5/2017	Street-Based Services
3	Special Service for Groups, Inc.	7/13/2017	Street-Based Services
4	The Catalyst Foundation	9/14/2017	Permanent Supportive Housing
5	CLARE Foundation, Inc.	9/18/2017	Sobering Center
6	Special Service for Groups, Inc.	9/19/2017	Street-Based Services
7	Exodus Recovery, Inc.	9/28/2017	Street-Based Services
8	Century Villages at Cabrillo, Inc.	9/30/2017	Permanent Supportive Housing

### QUARTERLY REPORT

Please find the attached quarterly report in dashboard format. If you have any questions, please contact me or Mark Ghaly, M.D., Deputy Director of Community Health, at (213) 240-8107.

MHK:mg

Attachment

c: Chief Executive Office  
County Counsel  
Executive Office, Board of Supervisors

# HOUSING

FOR

# HEALTH

Quarterly Report July-September 2017



Health Services  
LOS ANGELES COUNTY



## GOALS

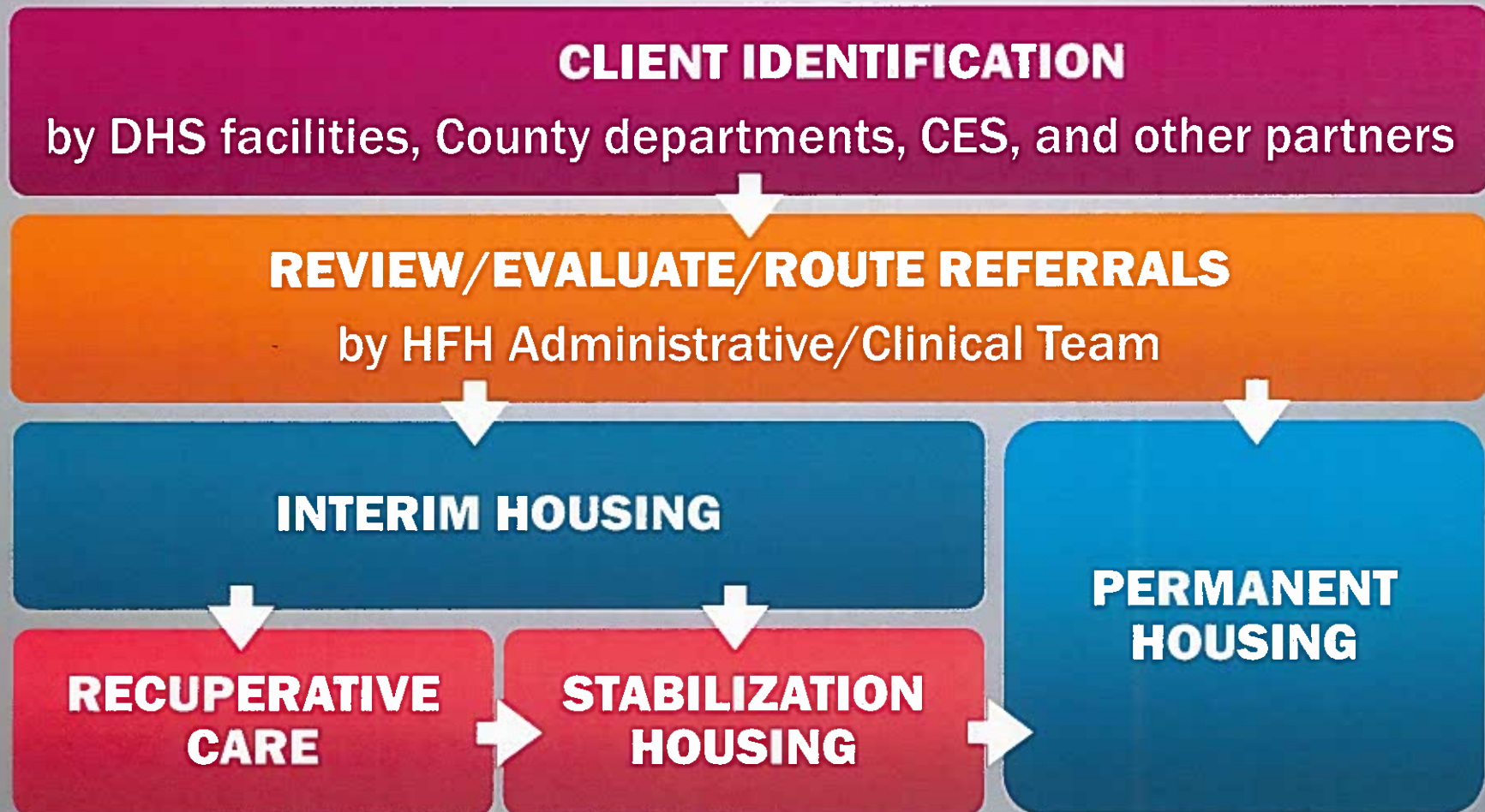
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- 1. Create 10,000 units of housing**
- 2. End homelessness in LA County**
- 3. Reduce inappropriate use of expensive health care resources**
- 4. Improve health outcomes for vulnerable populations.**

## CLIENTS HOUSED

- Housing for Health (HFH) provides housing and supportive services to homeless clients with physical and/or behavioral health conditions, high utilizers of county services, and other vulnerable populations.

# HFH CLIENT PROCESS

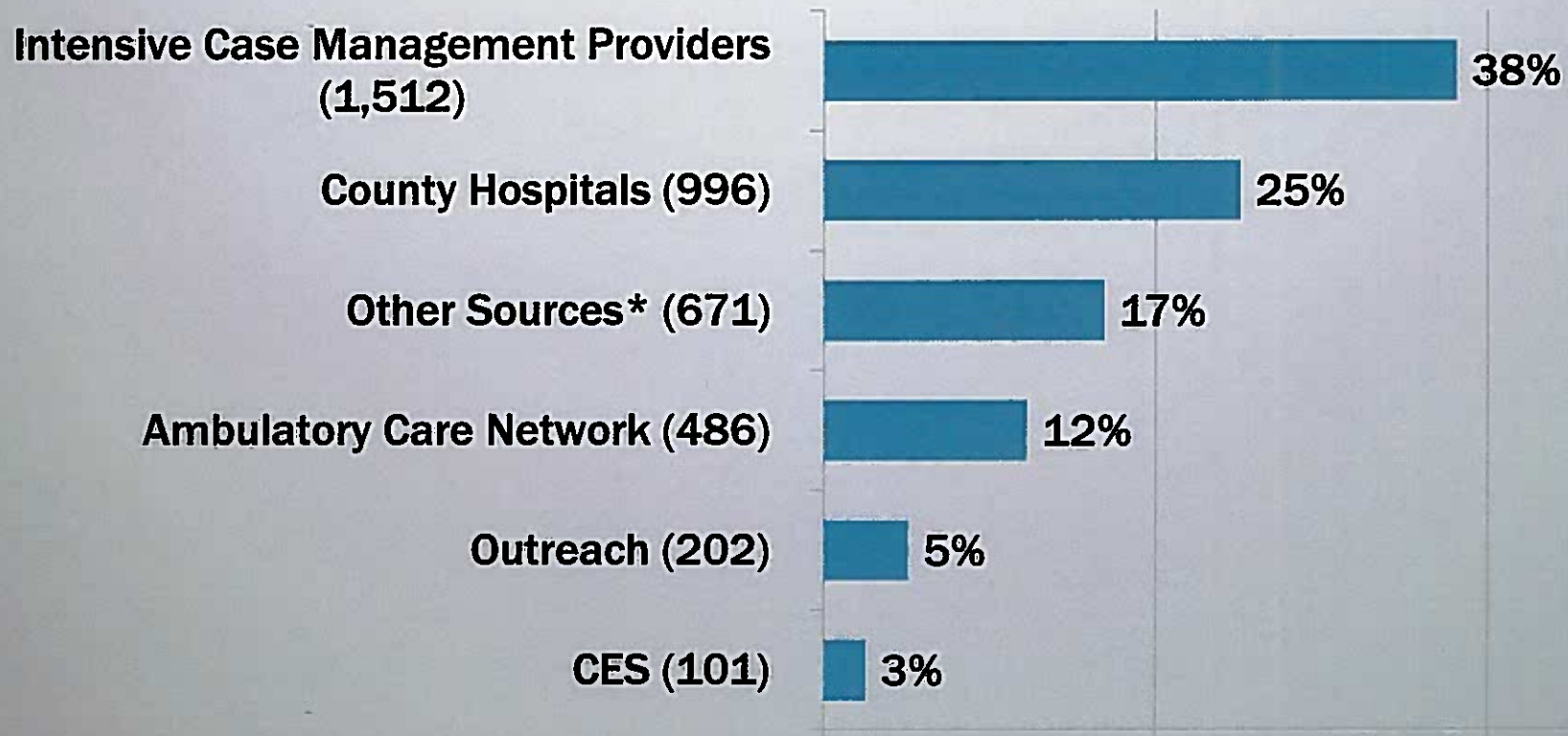


## Supportive Housing Quarterly and Program-to-Date Outcomes

Total # of clients who have attained housing since HFH began in November 2012	3,968
Total # of clients who are currently housed	3,572
Total # of clients housed July–September 2017	379

# WHERE DO HFH REFERRALS COME FROM?

## Referral Source of Clients Housed (N=3,968)



\*Other sources includes County departments and DHS Interim Housing Projects

# HEALTH CONDITIONS OF CLIENTS HOUSED

## MOST COMMON CONDITIONS:

- Depression
- Hepatitis C
- Asthma
- Substance Use Disorder
- Schizophrenia
- Anemia
- Seizure Disorder
- Bipolar Disorder
- Cancer
- Neuropathy
- Schizoaffective Disorder
- HIV/AIDS

Most HFH clients have **MULTIPLE CHRONIC HEALTH CONDITIONS**

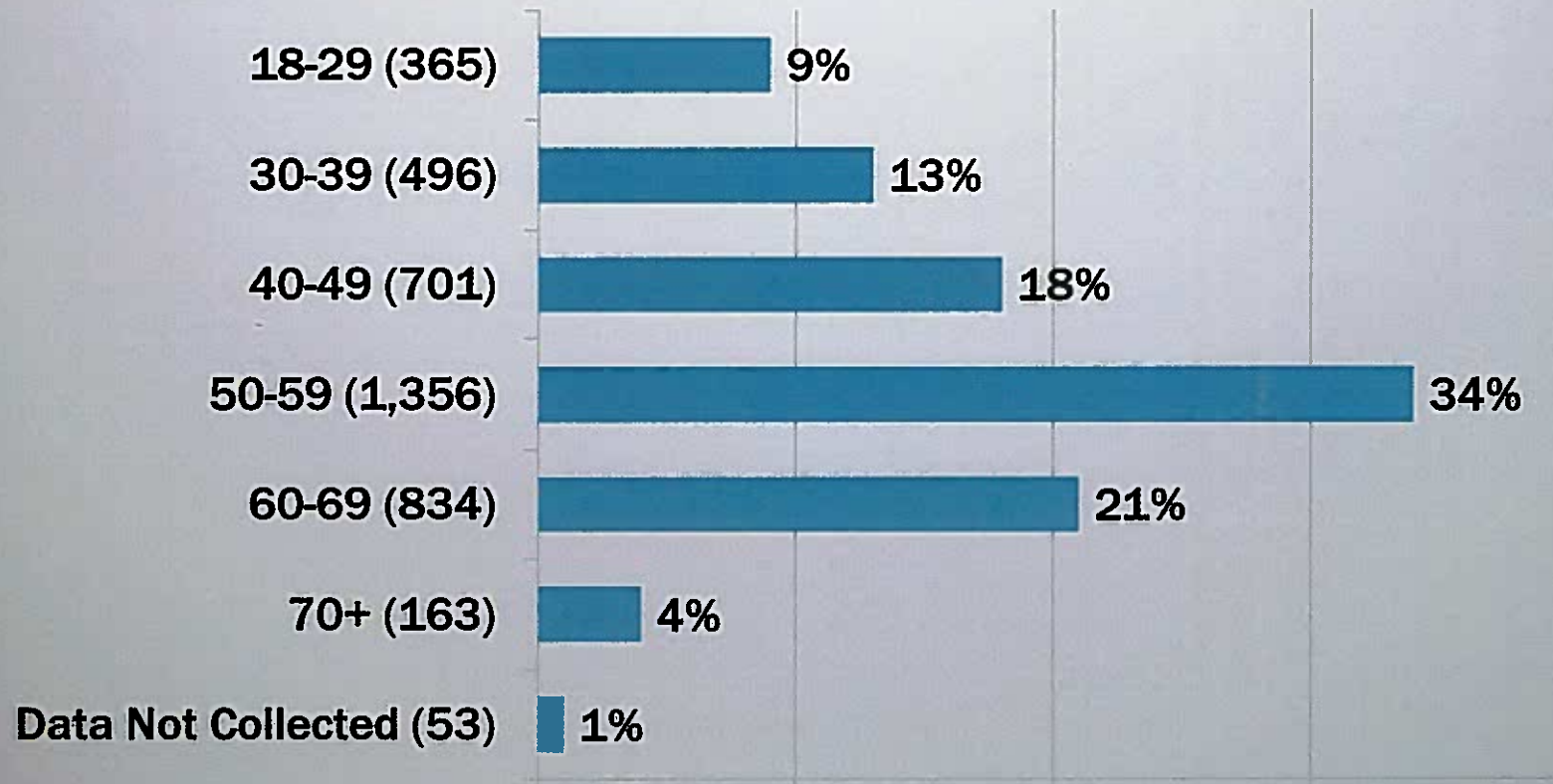
# GENDER OF CLIENTS HOUSED

Gender of Clients Housed (N=3,968)



# AGE OF CLIENTS HOUSED

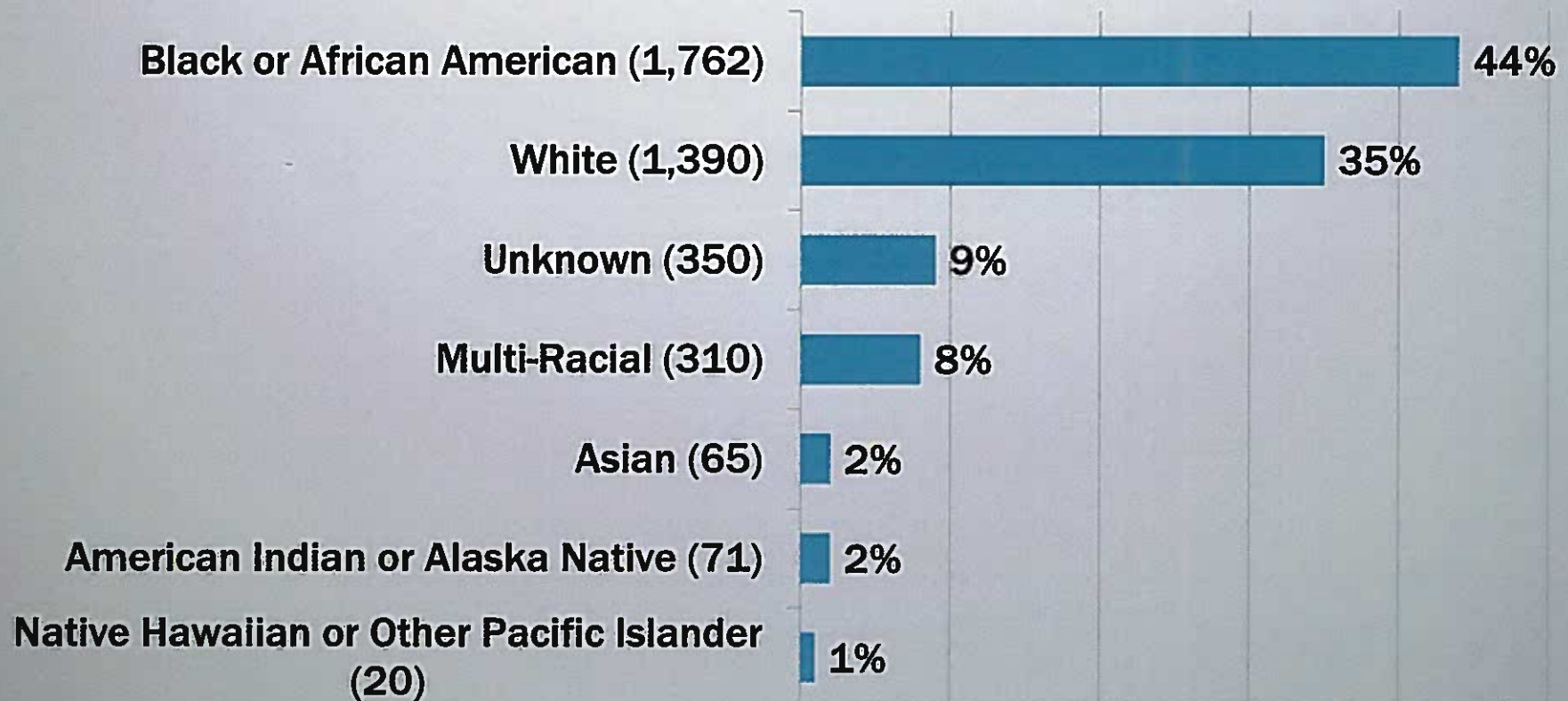
Age of Clients Housed (N=3,968)





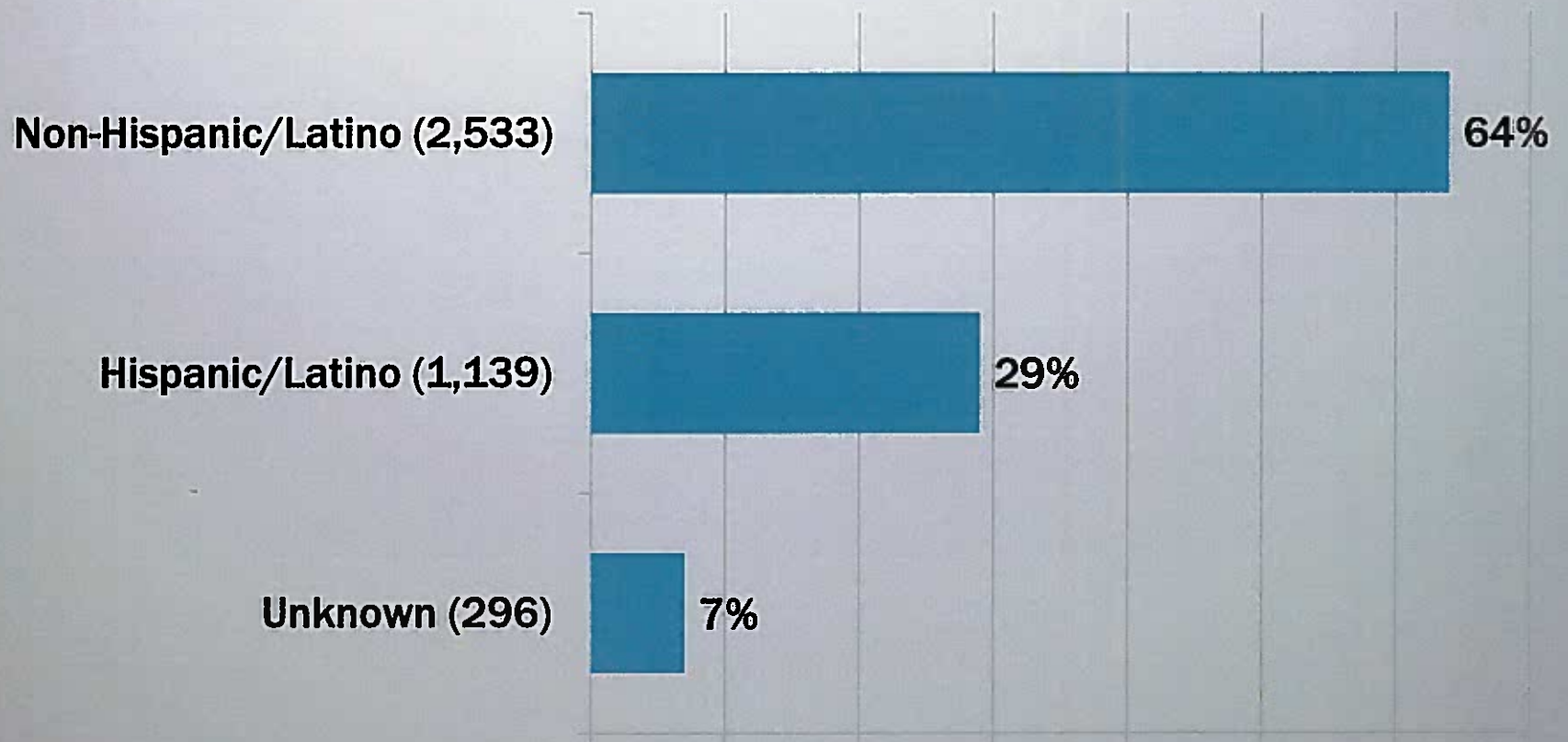
# RACE OF CLIENTS HOUSED

## Race of Clients Housed (N=3,968)



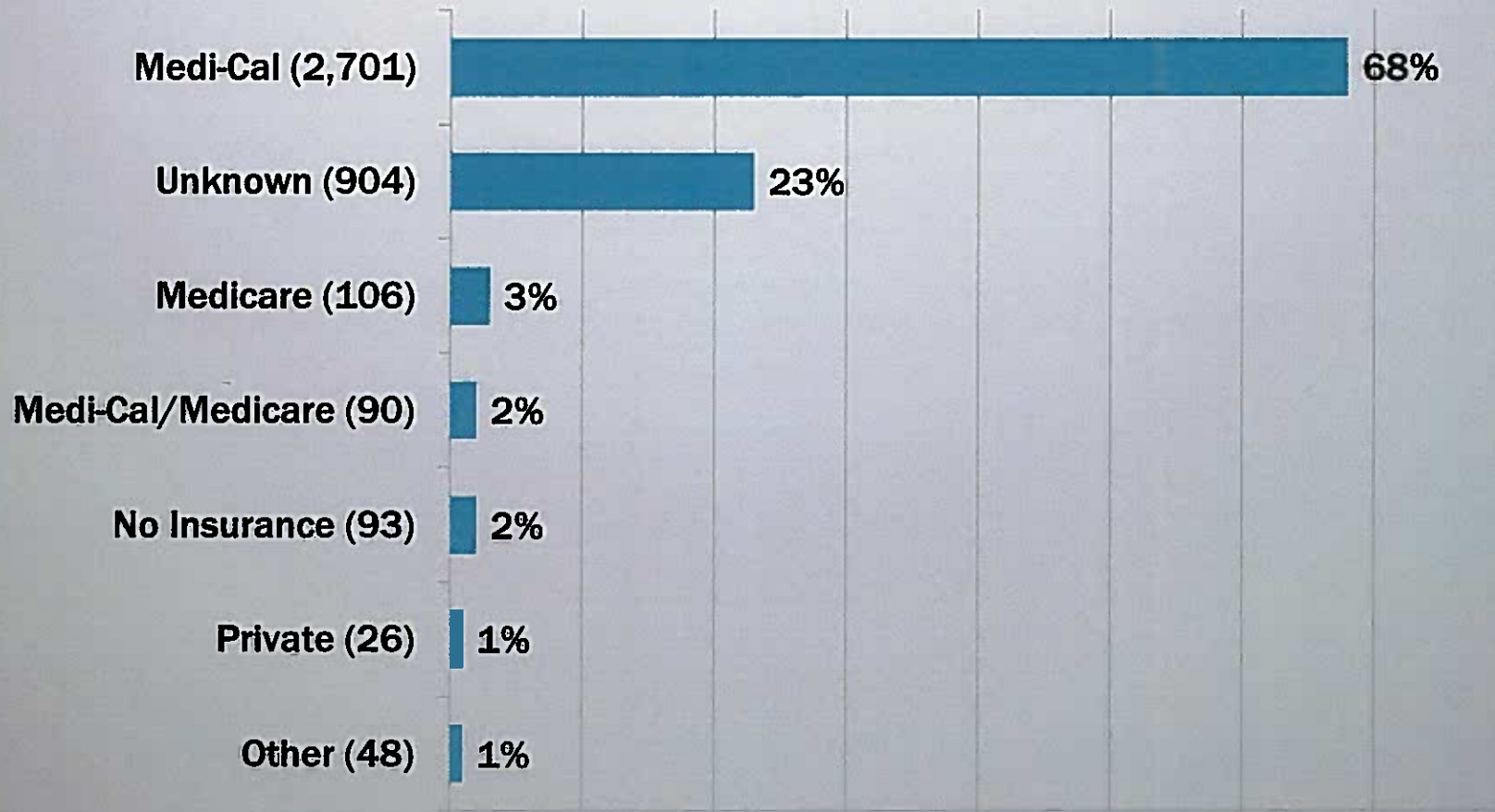
# ETHNICITY OF CLIENTS HOUSED

## Ethnicity of Clients Housed (N=3,968)



# HEALTH INSURANCE OF CLIENTS HOUSED

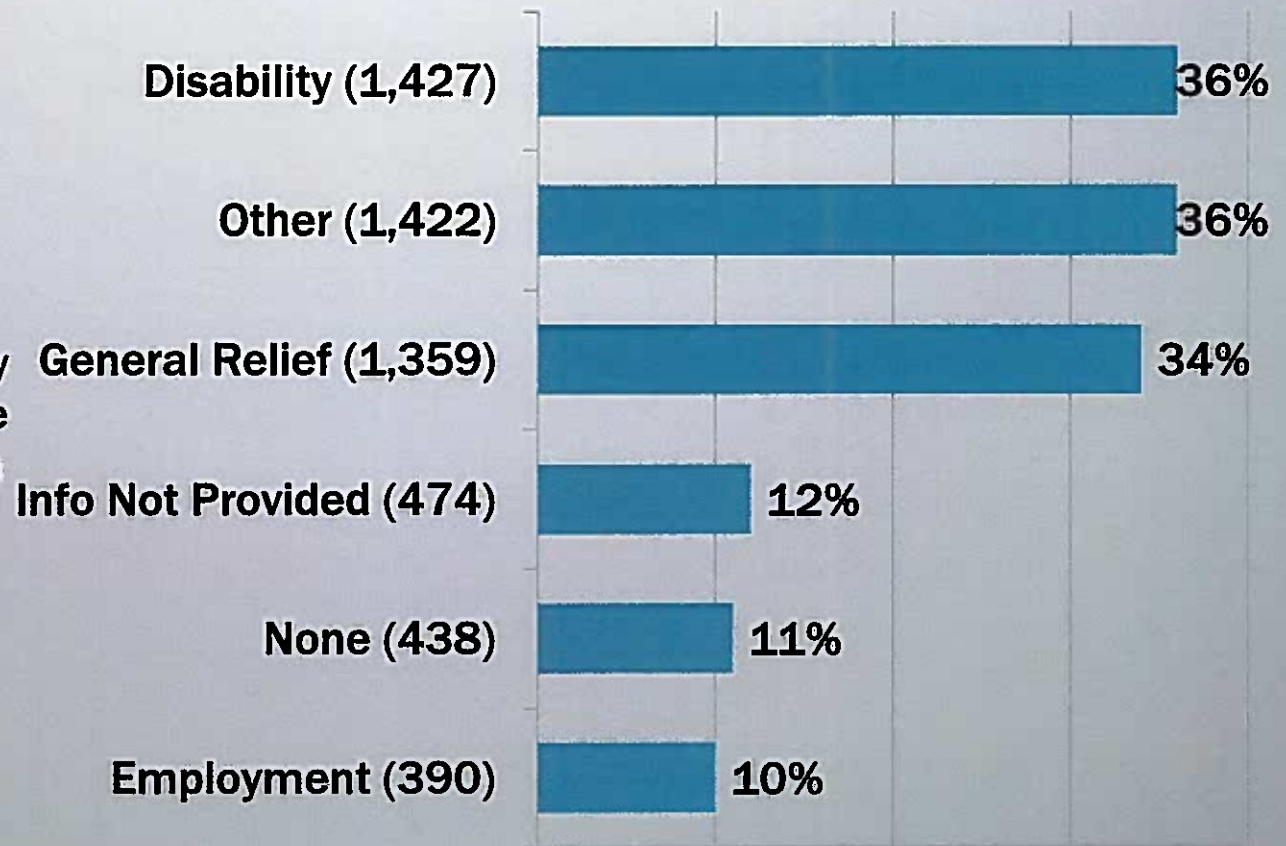
Health Insurance Type for Clients Housed (N=3,968)



# INCOME SOURCES OF HOUSED CLIENTS

## Income of Clients Housed (N=3,968\*)

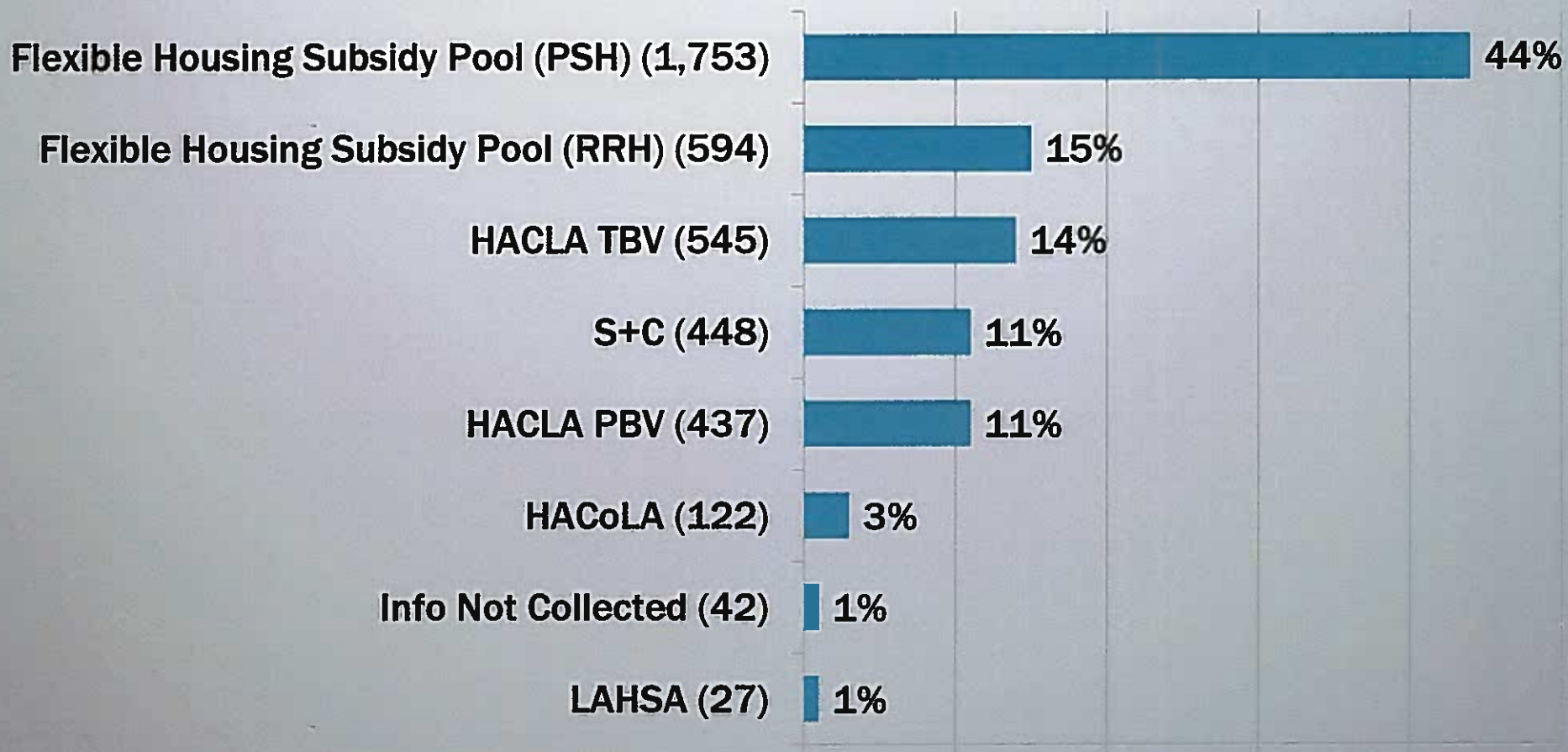
During the client intake and assessment process, the Intensive Case Management Services (ICMS) provider obtains information on the client's income and health benefits. If the client appears to be eligible for a benefit they are not currently receiving, the ICMS provider will assist them to obtain any necessary documents and will complete and track applications for DPSS Services (CalFresh, Medi-Cal, GR, CalWORKs, and IHSS) and SSI.



\*Please note that clients can have more than one source of income.

# TYPE OF HOUSING SUBSIDY

## Subsidy Type for Clients Housed (N=3,968)



# INTENSIVE CASE MANAGEMENT

---

- **Every client** connected to services.
- **Individualized service** planning and linkages to health, mental health, and substance use disorder services.
- **Help clients retain** housing and reach health and wellbeing goals.
- **Services provided by** on-site staff or mobile teams.

# HOUSING STATUS AND RETENTION

## Homeless Status

- The average length of time that clients experienced homelessness was 3 years and 6 months and the median length of time was 2 years.
- The majority of HFH clients were chronically homeless (81%), which means they were homeless for more than one year or experienced four or more episodes of homelessness in the last three years.

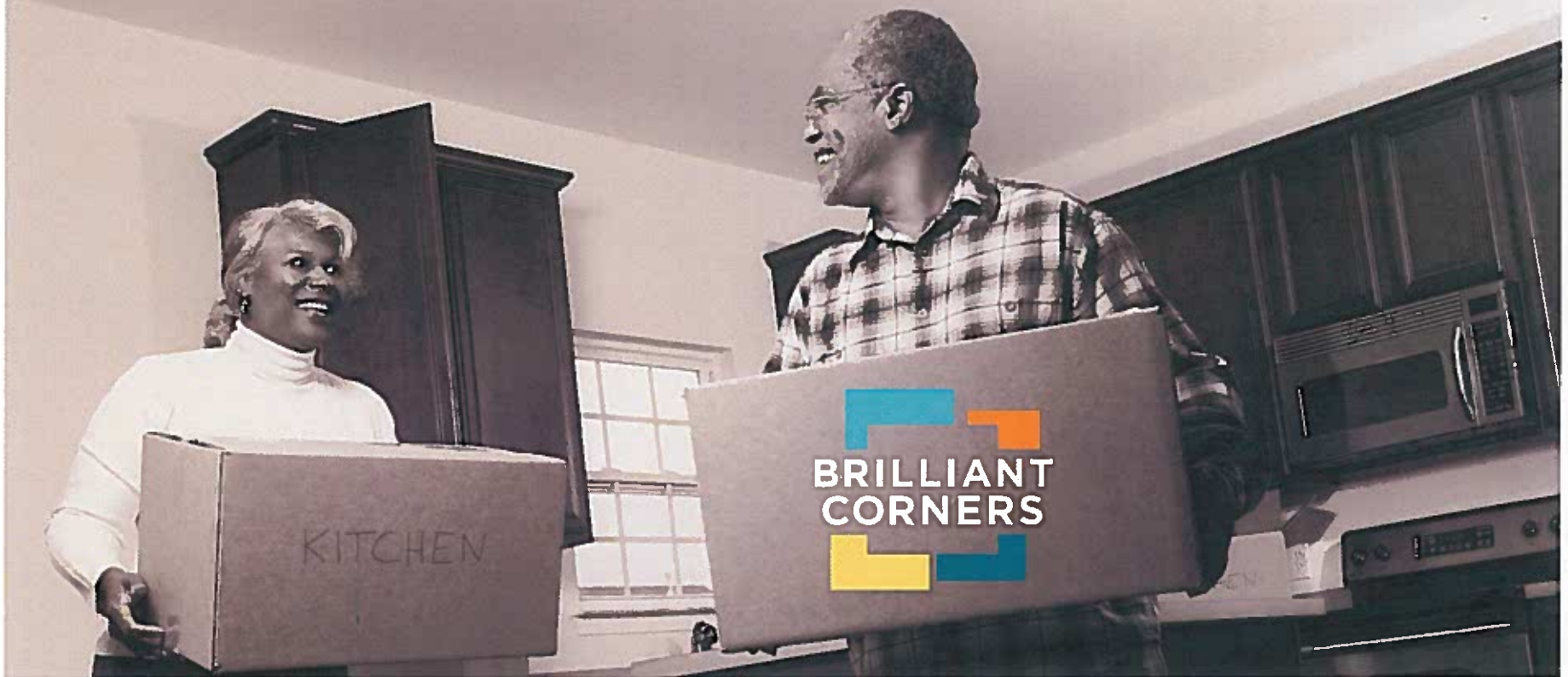
## Housing retention rate

- 97% of clients retained housing (remained in unit or exited to other permanent housing) after 12 months.

## Exits from housing this quarter

- Fifty three (53) clients exited housing this quarter. Nine (9) passed away, twelve (12) voluntarily surrendered, five (5) moved into other independent living situations or moved in with family and friends, fifteen (15) left for an unknown reason, eight (8) were incarcerated, one (1) was evicted, three (3) moved to a higher level of care.

# FLEXIBLE HOUSING SUBSIDY POOL





# FHSP PARTNERS



Los Angeles County  
Dept. of Health  
Services



503(c) nonprofit  
coordinating community-  
based partner



Property owners  
throughout Los  
Angeles County



LAC-DHS Supportive  
Housing Rental  
Subsidy Program

# FHSP Quarterly and Program-to-Date Outcomes

Move-ins July-September 2017\*

473

Total move-ins to date \*\*

2,855

Units secured\* July-September 2017

403

Total units secured to date

2,695

\* Move Ins July-September 2017 are for the following FHSP projects: DHS (155), Housing and Jobs Collaborative Rapid Rehousing Program (125), WISH (6), DHS Board and Care (58), ODR (69), Breaking Barriers (12), SAM-MIT (4), AB109 (9) and SAM DPSS (35).

\*\* Total move-ins include AB109 funded Board and Care, Breaking Barriers, DHS, DMH, DHS B & C, Housing and Jobs Collaborative, ODR, SAM DPSS, SAM MIT, WISH.

# CHARACTERISTICS OF FHSP HOUSING UNITS

- Units in the HFH portfolio range in size and type across the County from large apartment buildings to smaller single family homes and are appropriate to household size and composition.
- In the most recent quarter, Brilliant Corners secured an additional 403 units in Los Angeles County for the Flexible Housing Subsidy Pool. Of the 403 units, 71 are Studios, 134 are one-bedrooms, 25 are two-bedrooms, 4 are three-bedrooms, 87 are rooms in shared homes, 18 are SRO's and 64 are rooms in Residential Care Facilities.
- Brilliant Corners engages with private landlords, local developers, and local property management agencies, in an effort to provide a diverse pool of units to the program. From a wheelchair accessible studio unit located on the ground floor of a small 2 story apartment complex, to a 1-bedroom unit located in a 45 unit complex, Brilliant Corners is able to provide patients with a unit that offers the greatest chances of long-term housing success.

# **HFH EVALUATION BACKGROUND**

**In 2017, RAND quantitatively analyzed and evaluated 890 Housing for Health clients\*:**

- **83% met HUD's definition of chronically homeless**
- **88% had a co-occurring medical and mental health or substance use condition**
- **More than 96% were stably housed for at least one year**

**\*Published report will be available in December 2017.**

# KEY EVALUATION QUESTIONS

---

- **Did Housing for Health PSH recipients use fewer public services in the year after receiving housing compared to the year prior?**
- **Did the change in service use produce net savings to the county?**
- **Was the program associated with improvements in participants' health?**

# KEY EVALUATION FINDINGS

The average public service utilization cost per participant the year before housing totaled \$38,146. In the year after receiving housing and services, the total cost per participant totaled \$15,358.

Taking PSH costs into account, this represents a 20% net cost savings to the county.

# KEY EVALUATION FINDINGS

**76%**

*reduction in  
inpatient  
medical  
services in  
the year  
after  
housing  
placement*

**67%**

*reduction in  
emergency  
medical  
services in  
the year  
after  
housing  
placement*

**59%**

*reduction in  
crisis  
stabilization  
services in  
the year  
after  
housing  
placement*



# FEATURED PATIENT STORY



Health Services  
LOS ANGELES COUNTY



# FEATURED CLIENT SUCCESS STORY

**\*Irma and her family found themselves living in a homeless shelter for families with young children in Northridge, California just before Christmas last year. Irma and her family sought shelter there after she lost her job due to ongoing medical problems and in turn lost their apartment. Irma's older daughter had joined her mother after fleeing from intimate partner violence and had recently given birth to a baby girl. Irma and her daughter were worried for the health of the baby in the shelter and were anxious to find housing, where they felt they could regain their own health and get back on their feet.**

**Housing for Health referred them to The People Concern for Intensive Case Management Services and assisted her in completing an application for a Flexible Subsidy Housing Pool voucher through Brilliant Corners. Once the family was approved, the housing search began and a three-bedroom apartment was located in Winnetka, close to where Irma had grown up. They signed a lease and received their furniture a couple weeks later. For the first time in several months, Irma and her family began sleeping in their own rooms, cooking home-made meals, and Irma was able to regain employment.**

**The People Concern continues to provide support and coordination assistance to help Irma and her family settle into their new apartment and gain momentum in areas important to them. Case Manager Ben Safford accompanied Irma to MEND Clothing Center to access business attire to support her continued employment success. Additionally, Irma called her case manager and said her middle daughter was soon starting middle school and was in need of connection to resources which could provide school uniforms and classroom materials. Case Manager Ben Safford researched community agencies and transported Irma and her daughter to the Volunteer League of the San Fernando Valley. They left their appointment with their hands full of bags of brand new school clothes and classroom supplies which all came free of charge.**

**Irma and her family are well settled into their apartment. They live close to Irma's father and cousin, who together help care for her children. Irma is working part-time, her daughter is attending middle school, and her older daughter stays home to care for her own baby and little sister. They have created a new and vibrant home where they have been able to regain their health and safety. The People Concern will continue to provide services intended to ensure that Irma and her family can live comfortably and in good health while working towards their goals.**

**\*Name changed**