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SACHI A. HAMAI
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March 24, 2020

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

From: Sachi A. Hamai
Chief Executive Officer

Board of Supervisors
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ESTABLISHING A COMPREHENSIVE HOMELESSNESS CRISIS RESPONSE STRATEGY IN LOS ANGELES (ITEM NO. 2, AGENDA OF JANUARY 21, 2020)

On January 21, 2020, the Board of Supervisors (Board) directed the Chief Executive Office (CEO), co-led by the Office of Emergency Management (OEM) and the Homeless Initiative (CEO-HI), to collaborate with relevant County Departments including County Counsel, Health Services (DHS), Mental Health (DMH), Public Health (DPH), Public Social Services (DPSS), Public Works (DPW), and Regional Planning, as well as the Los Angeles County Development Authority (LACDA), Los Angeles Homeless Services Authority (LAHSA), and city partners, and in coordination with State officials, to report back to the Board within 60-days with the following information:

- a) A prioritized strategy for implementing or scaling up, where feasible, and advocating where appropriate, the recommendations outlined in the "Comprehensive Crisis Response Strategy to Address Homelessness Statewide";
- b) A legal framework and proposed implementation strategy, developed in conjunction with the previously-requested Urgent Housing Initiative, which includes targets and a timeline, to pilot an effort to ensure shelter or housing for those ready and willing to receive such services ("Crisis Response Framework"); and
- c) An assessment of available funding, including General Relief and Mental Health Services Act dollars, to implement the aforementioned Crisis Response Framework, in the broader context of the County's current efforts to end homelessness, and the extent to which these resources would need to be further scaled up, in partnership with the State ("Assessment of Available Funding").

The CEO-HI and OEM convened a workgroup comprised of the County Departments mentioned above, which has met four times to respond to the directives contained in the motion.

a) Comprehensive Crisis Response Strategy to Address Homelessness Statewide

Governor Gavin Newsom's Council of Regional Homeless Advisors sent a letter to the Governor on January 13, 2020, with a "Comprehensive Crisis Response Strategy to Address Homelessness Statewide" (see Attachment I), which is a collection of 40 strategies, divided into three categories:

- Addressing and Preventing Street Homelessness,
- Reducing Barriers to Building More Housing, and
- Getting More People into Treatment.

The workgroup assessed whether each recommendation would require programmatic and/or policy action to be implemented and prioritized the recommendations with the highest feasibility and most positive impact. A total of 16 strategies were identified as top priority (see Attachment II).

b) Crisis Response Framework

In order to establish a framework which the County could use, in partnership with the State, to develop a pilot to ensure shelter or housing for all those ready and willing to receive such services, the workgroup determined that the framework should target a specific sub-population. A subgroup comprised of CEO, DHS, DMH, LAHSA, and WDACS representatives developed a conceptual description of this potential pilot, with expert assistance from the Corporation for Supportive Housing (CSH). The sub-group, with concurrence of the larger workgroup, has preliminarily identified the 65 and older (65+) population as the appropriate sub-population for this pilot. For the purposes of this report, the focus, data, and analysis addresses the age threshold of 65+; however, the final selection of a specific age threshold, if this pilot were to be implemented, would require further legal analysis to ensure consistency with applicable laws. Attachment III describes an initial framework that could be used to develop a pilot for this population.

c) Assessment of Available Funding

If the pilot described in Attachment II were to be implemented, new on-going funding would need to be identified and various current funding sources would need to be leveraged. Per the motion, the workgroup looked specifically at the possibility of using General Relief (GR) and/or Mental Health Services Act (MHSA) funding:

- GR is not a viable funding source, since only 183 GR recipients (0.2 percent of GR population) are 65+. The vast majority of persons 65+ are ineligible for GR because they are eligible for Supplemental Security Income (SSI), Social Security, or other retirement income.
- MHSA is not a viable funding source, as all funding is currently obligated for other purposes. If MHSA funding were to be allocated for the purpose of this pilot, cuts would need to be made elsewhere.
- In addition, various funding sources, including California Advancing and Innovating Medi-Cal (CalAIM), In-Home Supportive Services (IHSS), and GR program savings, were identified as potential funding sources to leverage, subject to further exploration.

Conclusion

The County has been working aggressively to address the homelessness crisis. With assistance from the State, the County could do even more to help people move into housing. The CEO will await further direction from the Board regarding the priority recommendations identified in Attachment I and/or further development of the potential pilot described in Attachment II. If directed by the Board to proceed, the CEO will engage additional stakeholders, such as City and State officials, as appropriate, and provide a detailed multi-year cost estimate and an implementation framework for the potential pilot. If you have any questions, please contact Phil Ansell, Director of the Homeless Initiative at pansell@ceo.lacounty.gov or Kevin McGowan, Director of the Office of Emergency Management at kmcgowan@ceooem.lacounty.gov.

SAH:FAD:TJM
PA:RM:AA:tv

Attachments

c: Executive Office, Board of Supervisors
County Counsel
Health Services
Los Angeles County Development Authority
Mental Health
Public Health
Public Social Services
Public Works
Regional Planning
Workforce Development, Aging and Community Services
Los Angeles Homeless Services Authority

COMPREHENSIVE CRISIS RESPONSE STRATEGY TO ADDRESS CALIFORNIA'S HOMELESS CRISIS

Focus Area/Strategy	Bills Signed into Law by Governor Newsom	Proposed Next Steps <i>(via Executive Orders, Budgetary Considerations or Legislation)</i>
Addressing and Preventing Street Homelessness		
1. Expand rental protections statewide	AB 1482 - Establishes a yearly maximum rent increase of no more than 5%+CPI for tenants who have occupied a residential unit for 12 months.	AB 1482 does not cover all rental properties and would still allow a 5%+CPI increase annually. For example, Zillow research shows that a 5% increase alone in LA will contribute to 11K more individuals becoming homeless. Executive Order to include more units and further reduce the allowable annual rent increase.
2. Prevent evictions without just cause for all properties	AB 1482 - Requires just cause for termination of a tenancy for tenants in place more than 12 months.	AB 1482 authorize protections after one year and does not cover all households. Executive Order to expand this to a larger portion of the renter population in California.
3. Scale-up legal representation for evicted low- income tenants at greatest risk of homelessness	<p>AB 330 - Increases funding for legal aid in matters affecting basic human needs, including housing, to be paid for by a \$15 increase in certain court fees.</p> <p>Governor's budget provided a one-time \$20M augmentation for legal aid that would help represent clients in landlord-tenant disputes. The budget also created a \$331M fund to provide mortgage relief and tenant legal aid.</p>	Governor's budget request to increase available funding to target these resources to people at greatest risk of homelessness, or who meet predictive modeling criteria.
4. Expand and enhance the Adult Protective Services Program (APS), which serves vulnerable older adults who are victims of abuse, neglect, and exploitation, and many of whom are at risk of homelessness and have cognitive impairments	Recent expansion and investment of the Home Safe Program within APS, which provides housing and assistance to APS clients at risk of homelessness.	Intervene earlier by lowering the age of older adults served to 60. Provide longer-term, multi-disciplinary case management for victim requiring more intensive services. Expand the Home Safe Program further. Anticipated need is \$100 million.

COMPREHENSIVE CRISIS RESPONSE STRATEGY TO ADDRESS CALIFORNIA'S HOMELESS CRISIS

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<p>7. Establish a legal and accountable framework to dramatically reduce homelessness</p>		<p>Executive Order or legislation that establishes such a framework in California, ensuring focus is on the right of individuals to access permanent housing, including services provided in shelters providing pathways to permanent housing.</p> <p>Must define how city, county and state roles will be determined.</p>
<p>8. Expand flexible funding for those in need of interim housing/shelter</p>	<p>AB 101 - Budget trailer bill with numerous provisions, including allocations of \$650M for local government homeless assistance, \$500M for the state LHITC, \$500M for a new infill program, by-right siting of shelters and navigation centers, preferences in state funding for localities deemed pro-housing.</p> <p><i>The Governor's January 8th Executive Order directs the Department of Finance to establish the California Access to Housing and Services Fund which, according to the 2020-21 budget proposal, would receive \$750 million in state funds to help housing and service providers bring more affordable housing units online, provide rent and operating subsidies, and support board and care facilities.</i></p>	<p>Based on a gaps analysis that identifies the ideal churn of beds as people are accessing permanent housing, policy improvements needed to use all available beds, the number of beds already existing in California, the number of beds anticipated to open over the next two years, the number of Californians experiencing unsheltered homelessness, and an anticipated cost to provide supportive services in interim housing sites at approximately \$60/shelter bed/day, approx. \$500 million is needed as well as additional capacity.</p>

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10. Dedicate public employees to supporting the development and operation of facilities to serve people experiencing homelessness	The Governor's January 8, 2020 Executive Order directs the Department of General Services to supply 100 travel trailers and the Emergency Medical Services Authority to provide modular tent structures for use as temporary housing and to provide health and social services, and deploys the Homeless Coordinating and Financing Council to oversee a multi-departmental crisis response team to provide local jurisdictions with technical assistance and direct support for linking unsheltered individuals and families to housing and services.	Executive Order requiring State employees to assist/administer homeless-related programs as well as inspections of facilities to expedite development.
11. Creating more clarity and ease of permitting Statewide for interim housing	SB 190 - Requires the State Fire Marshal to develop model defensible space standards, to include a timeline for abatement, citations, and cost recovery if the owner or landlord fails to correct a violation.	Need to expedite the execution of this, as well as requirements from other local Building and Safety officials to create statewide uniform strategies around permitting.
12. Expand workforce development strategies to help implement a more robust safety net	Governor's budget includes \$47.4M to fund scholarships and loan repayments for mental health workforce development programs (\$1M earmarked for former foster youth)	Executive Order to create immediate incentives to recruit qualified professionals and para-professionals to scale up the workforce needs of public entities delivering related supportive services through counties to help address the crisis. Also create incentives to foster more people entering schools of social work to accept positions at county government or non-profit community-based organizations working to end homelessness. Train people with lived expertise of homelessness to work in the field.

COMPREHENSIVE CRISIS RESPONSE STRATEGY TO ADDRESS CALIFORNIA'S HOMELESS CRISIS

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16. Create a Single Point of Authority for Homelessness in State Government	SB 1380 (passed 2016) created California as a Housing First state, while also establishing the Homeless Coordinating & Financing Council, intended to coordinate the activities of state agency/department staff around homelessness.	Since homelessness crosses multiple state agencies and jurisdictions, we strongly recommend a single high-level official and team be established to coordinate housing, health and human services and other state responsibilities relating to homelessness. The high-level authority should report directly to the Governor, have authority over other departments and agencies, oversee the Homeless Coordinating and Financing Council, and run a funders collaborative that would coordinate and standardize state funding toward evidence-based housing and services interventions, as well as attract philanthropic investment.
17. Streamline state funding for homelessness and rehousing.	n/a	<p>Ensure all funding sources work together. Currently, the HOME program will not allow projects with LHITC 9% to apply for HOME. This is a critical flaw in HCD practice.</p> <p>Consider streamlining funding for homelessness and rehousing under one administrative entity with streamlined application, contracting, and reporting requirements.</p>

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Focus Area/Strategy	Bills Signed into Law by Governor Newsom	Proposed Next Steps <i>(via Executive Orders, Budgetary Considerations or Legislation)</i>
2. Identify and develop sites owned by the State and other public entities for long-term affordable housing	Executive Order to Assess and Dispose of State Property for Housing.	Direct HCD to expedite development across the state (current focus on two northern California areas)
3. Waive regulatory burdens and onerous contracting requirements for housing projects	<p>AB 1197 - Exempts from CEQA certain projects approved or carried out by the City of Los Angeles for supportive housing and emergency shelters.</p> <p>SB 450 - Exempts from CEQA conversions of hotels and motels to transitional or permanent supportive housing, as long as the number of units does not increase.</p>	<p>Support or promote legislation to apply AB 1197 authority across the entire state and to allow local jurisdictions to waive zoning requirements for ELI (0-30% AMI) housing to create housing for people experiencing homelessness.</p> <p>Consider CEQA exemptions for planning documents designed to meet affordable housing objectives outlined in Housing Elements.</p>
4. Require that localities adequately plan for Extremely Low Income (0-30% AMI) housing units	n/a	Legislation that reforms Housing Element Law to include housing goals for ELI units in the Regional Housing Needs Allocation (RHNA) process.
5. Reform documentation requirements for non- Federally-funded housing programs	n/a	Legislation or executive order providing a one-year grace period for documentation requirements (ID, proof of income) for individuals who are chronically homeless moving into State or locally-funded permanent supportive housing.
6. Establish regional housing entities to receive State revenue and generate and allocate regional tax revenues for housing and homeless responses	AB 1487 established the authority for a regional housing finance authority in the Bay Area.	Legislation expanding AB 1487 to regions statewide.

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Focus Area/Strategy	Bills Signed into Law by Governor Newsom	Proposed Next Steps <i>(via Executive Orders, Budgetary Considerations or Legislation)</i>
12. Allow housing projects that are intended for low-income people and that receive government funding or assistance to be developed, constructed, or acquired without a local referendum.	n/a	Repeal Amendment 34 that requires local approval intended for low-income people.
13. Create incentives to allow the broader use of mobile homes in rural areas	n/a	Allow 2-3 mobile homes on a parcel without registering as a park under HCD. Regulate insurance rates for mobile homes to reduce costs.
14. Expanding infrastructure for new housing and updating existing infrastructure to expand housing capacity in rural areas.	AB 101 - provided \$500 million in one-time grant funding to improve infrastructure that supports infill affordable housing, including a \$90 million non-competitive program for smaller jurisdictions. Rural cities and unincorporated areas, however, have unique circumstances that warrant additional funding and flexibility.	In rural communities there may be parcels without basic infrastructure such as roads, electricity, water and sewer. In these cases, infrastructure investments will be needed in order to site mobile homes, or other affordable housing options. While AB 101 included a broader definition of infill than prior grant programs, there are rural sites appropriate for more intensive housing development that may not qualify as infill pursuant to existing definitions. Moreover, additional flexibility in the timing of investments could help support rural affordable housing projects. Local agencies should be allowed to access state funding to complete basic infrastructure improvements up-front in rural areas targeted for affordable housing in an approved housing element or other land use plan, rather than only in conjunction with an individual affordable housing development application. Basic infrastructure improvements are often necessary in advance to attract developer interest in a particular site/area. Local agencies accessing such funding should be required to commit to an expedited, by-right approval of proposed housing projects in the affected project site/area.

COMPREHENSIVE CRISIS RESPONSE STRATEGY TO ADDRESS CALIFORNIA'S HOMELESS CRISIS

Focus Area/Strategy	Bills Signed into Law by Governor Newsom	Proposed Next Steps <i>(via Executive Orders, Budgetary Considerations or Legislation)</i>
5. Reform MHSA	<p>On January 8th, the Governor directed the establishment of a Behavioral Health Task Force and Prop 63 review. The Administration is establishing a Behavioral Health Task Force that will bring together relevant state departments, counties, advocates, health plans, providers, and other stakeholders to review existing policies and programs and coordinate system changes to prevent and respond to the impacts of mental illness and substance abuse in California. The Administration will consider updates to the Mental Health Services Act (Prop. 63) to serve persons with mental illness who are experiencing homeless, justice-involved populations and early intervention of children. The Administration will submit a proposal in Spring 2020 regarding Prop. 63's proposed reforms, which may include new metrics to track local governments' use of these resources, namely the number of people served and the efficacy of spending. The Administration will work with health plans, providers, patient representatives, and other parties to update and strengthen enforcement of mental health parity laws, focusing on timely access to treatment, network adequacy, benefit design and plan policies.</p>	<p>Reform the MHSA to remove funding percentage restrictions and instead align the MHSA to measurable outcomes, including outcomes that support homelessness prevention and addressing the needs of the seriously mentally ill homeless.</p> <p>Reform the MHSA to allow county behavioral health to use funds for individuals with a primary SUD diagnosis.</p>

COMPREHENSIVE CRISIS RESPONSE STRATEGY TO ADDRESS CALIFORNIA'S HOMELESS CRISIS

Focus Area/Strategy	Bills Signed into Law by Governor Newsom	Proposed Next Steps <i>(via Executive Orders, Budgetary Considerations or Legislation)</i>
8. Unrestricted health funding	n/a	Legislation to reform eligibility for health care dollars by making them more flexible to assist homeless people regardless of diagnosis or acuity.
9. Fund pre-trial diversion to prioritize treatment, housing, and services for individuals being diverted from incarceration	<p>AB 1810 - prioritizes access to mental health services for individuals at risk of or experiencing homelessness.</p> <p>The Governor's January 8th Executive Order announced the Community Care Collaborative Pilot (CCCP), which includes \$24.6 million in his proposed 2020-21 Budget and \$364.2 million over 6-years for the Department of State Hospitals to implement efforts in three pilot counties to place individuals with mental health needs, specifically those designated Incompetent to Stand Trial, into stable placements in the community instead of state hospital placements.</p>	Allocate ongoing, scaled up funding, consistent with AB 1810, to provide services and supports to individuals avoiding homelessness and incarceration.

TOP PRIORITY CRISIS RESPONSE STRATEGIES IDENTIFIED BY COUNTY WORKGROUP FROM RECOMMENDATIONS BY GOVERNOR'S COUNCIL OF REGIONAL HOMELESS ADVISORS

The 16 strategies listed below were identified as top priority by the County workgroup; the numbers correspond to the numbers listed in the Council's report.

<i>Addressing and Preventing Street Homelessness</i>	
1.	Expand rental protections statewide (State Policy)
3.	Scale-up legal representation for evicted low-income tenants at greatest risk of homelessness (Programmatic Action and State Policy)
13.	Create financial incentives for property owners to maintain the affordability of their properties (Programmatic Action and State Policy)
14.	Establish a new ongoing State revenue source for localities to prevent and combat homelessness (State Policy)
15.	Stabilize and improve Board and Care options for older adults and individuals with serious mental health issues (Programmatic Action and State Policy)
<i>Reducing Barriers to Building More Housing</i>	
1.	Expand the number of rental subsidies and financing mechanisms for affordable housing with additional funding (State Policy)
2.	Identify and develop sites owned by the State and other public entities for long-term affordable housing (Programmatic Action and State Policy)
3.	Waive regulatory burdens and onerous contracting requirements for housing projects (State Policy)
4.	Require that localities adequately plan for Extremely Low Income (0-30% AMI) housing units (State Policy)
7.	Suspend the Public Contract Code and related procurement protocols to allow for a streamlined contracting process (State Policy)
8.	Institute more aggressive requirements for local governments to authorize more housing, streamline the development process for housing, and allow for the siting of more housing by-right (State Policy)
9.	Expand the welfare tax exemption to spur the development of median income and workforce housing (State Policy)
<i>Getting More People Into Treatment</i>	
1.	Create interim solutions to allow local governments to intervene humanely and effectively for people who are gravely disabled (State Policy)
3.	Repeal or modify the IMD Exclusion to expand the number of federally-financed sub-acute care beds (State Policy)
6.	Assist individuals with mental and physical illness who are unable to live independently (Programmatic Action and State Policy)
7.	Capitalize on existing, publicly-owned land and assets to create an array of integrated services and housing on medical campuses and other similar sites (Programmatic Action and State Policy)

HOMELESSNESS CRISIS RESPONSE FRAMEWORK: POTENTIAL PILOT TO ELIMINATE HOMELESSNESS AMONG OLDER ADULTS

I. Pilot Concept

Develop a pilot to eliminate unsheltered homelessness for all adults age 65+ who desire shelter and eliminate homelessness for all adults age 65+ who desire housing.¹

- Substantial, net new funding would be required to implement this pilot concept; the actual estimated cost would still need to be developed.
- Leveraging of mainstream programs which serve older adults would be central to this pilot.
- This pilot would not create a mandate or legal right to shelter or housing, but it would establish an intention on the part of Los Angeles County to eliminate homelessness among adults age 65+.

II. Rationale for Age 65+ Population Focus

Several factors influenced the focus on the age 65+ population: this group's rapid growth, extreme need, and use of costly services to meet their needs while they are homeless. At the same time, most adults age 65+ have some income which can at least partially cover the cost of rent. In addition, Measure H offers a framework and opportunities to leverage to successfully eliminate homelessness for this population.

The 2019 Greater Los Angeles Homeless Count reports that 5,231 older adults age 62+ in the Los Angeles Continuum of Care are experiencing homelessness at any given point in time.² This group makes up nearly nine percent of the homeless population in Los Angeles County, is chronically impoverished and is expected to grow rapidly over the next decade. This age group saw a 22 percent increase in 2018, and then grew an additional eight percent in 2019. This growth rate reflects that of California's older adult population as a whole.

According to the Los Angeles Homeless Services Authority (LAHSA) Homeless Management Information System (HMIS), a total of 4,957 single adults who were at least 65 years of age as of July 1, 2018 were served in Fiscal Year 2018-19. A total of 3,117 of these 4,957 single adults (or 62.9 percent) had records in HMIS indicating that they were receiving Supplemental Security Income (SSI). This indicates that the population often has a steady source of income.

More likely to be chronically homeless than other age groups, older adults experiencing homelessness have greater risk of negative health outcomes, falls, depression, reduced life

¹ The selection of a specific age threshold, if this pilot were to be implemented, would require further legal analysis to ensure consistency with applicable laws.

² LAHSA. 2019 Greater Los Angeles Homeless Count – Aging Population. (2019). Excludes Pasadena, Long Beach and Glendale. Accessed at <https://www.lahsa.org/documents?id=4017-hc2019-aging-population-data-summary>

expectancy, and increased mental health and substance abuse challenges, than if they were housed.³ As individuals experiencing homelessness age, they likely incur increasingly higher healthcare costs from hospitalization and nursing home placements.⁴ Older adults' disproportionately high healthcare needs result in the critical importance of healthcare for this population and opportunities to generate savings in other public programs, savings which could potentially be re-invested in this pilot.

Los Angeles older adults on fixed incomes, such as SSI, find housing ever more unaffordable, resulting in an excessive rent burden, which impedes their ability to pay for medical care and basic necessities and increases their risk of becoming homeless. In addition, where needed, permanent supportive housing, combined with specialized older adult services such as geriatric healthcare, in-home supportive services, transportation, mobility assistance, and age-appropriate community activities and socialization, can decrease homelessness effectively.⁵

A study conducted by a University of Pennsylvania research team led by Professor Dennis Culhane, PhD, highlights how the increasing older adult population strains homeless services and healthcare providers. This multi-site study of Boston, New York City and Los Angeles County points to an urgent need for housing interventions, including permanent supportive housing, shallow subsidies and rapid re-housing, to reduce the excess use of hospitals, shelters and nursing homes; savings from such cost reductions may in turn offset costs for housing interventions.⁶ It is projected that the number of older adults who are homeless will triple over the next decade in all three localities, amplifying costs for healthcare and shelter.

III. Services Available for the 65+ Population

Many mainstream services and benefits are critically important for older adults experiencing, and at-risk of homelessness, and effectively leveraging these services would be a critical element of a comprehensive effort to eliminate homelessness among adults age 65+. These key mainstream services include, but are not limited to:

- Medi-Cal
- Medicare
- Social Security Retirement Income
- Supplemental Security Income (SSI)
- Social Security Disability Income (SSDI)

³ Homeless Policy Research Institute (HPRI), Older Adults Experiencing Homelessness. (2019). Accessed at <https://socialinnovation.usc.edu/wp-content/uploads/2019/08/Older-Adults-Literature-Review-Final.pdf>

⁴ Culhane, D., Metraux, S., & Kuhn, R. (2018). A Data-based Re-design of Housing Supports and Services for Aging Adults who Experience Homelessness. At <https://www.aisp.upenn.edu/wp-content/uploads/2019/01/LA-County-Report.pdf>

⁵ Henwood, B. F., Katz, M. L., & Gilmer, T. P. (2014). Aging in place within permanent supportive housing. *International Journal of Geriatric Psychiatry*, 30(1), 80–87. Accessed at <https://doi.org/10.1002/gps.4120>

⁶ Culhane, D., Treglia, D., Byrne, T., Metraux, S., et al. (2019). The Emerging Trend of Homelessness: Could Housing Solutions Be Funded by Avoidance of Excess Shelter, Hospital, and Nursing Home Costs? Accessed at: <https://www.aisp.upenn.edu/wp-content/uploads/2019/01/Emerging-Crisis-of-Aged-Homelessness-1.pdf> and https://works.bepress.com/dennis_culhane/223/

- In-Home Supportive Services
- Adult Protective Services
- Older Americans Act programs.

Within Los Angeles County, older adults are served through the homeless services system at a rate that is comparable to their presence in the countywide population of people experiencing homelessness. However, for the most part, the services that they receive are not age-specific and may, therefore, not be ideally suited to meet their needs. In this context, in January 2018, the CEO-HI established an Older Adult Workgroup comprised of multiple departments, agencies and non-profit older adult and homeless services providers to design pilot projects, identify opportunities and oversee the ensuing work. In May 2018, the Board of Supervisors directed the CEO-HI to collaborate with LAHSA and the Departments of Workforce Development, Aging and Community Services (WDACS), Health Services (DHS), Mental Health (DMH), and Public Social Services (DPSS), the Los Angeles Community Development Authority (LACDA), and the Los Angeles City Department of Aging to describe programs and services in place, assess ways that Measure H-funded strategies are addressing the needs of older adults, and develop any potential opportunities to prevent and address older adult homelessness.

The following current efforts will increase interim and permanent housing capacity and services for older adults experiencing, or at risk of homelessness:

- *Home Safe*, with California Department of Social Services (CDSS) funding for two years, will house Adult Protective Services (APS) clients at-risk of experiencing homelessness who have suffered elder abuse or self-neglect.
- DHS and DMH are offering an enhanced rate to Residential Care Facilities for the Elderly (RCFEs) and Adult Residential Facilities (ARFs) for homeless individuals with complex psychosocial issues, including older adults, who require a permanent housing solution that includes care and supervision.
- DHS has operationalized three recuperative care sites with a total of 50 beds for older adults and LAHSA has designated 100 enhanced bridge beds for older adults. In the three recuperative sites, DHS is assessing instrumental activities of daily living (IADLs) in older adults and providing specialized support, as well as testing the feasibility of providing palliative and hospice care in these settings.
- LAHSA's *Shallow Subsidy Program* assists older adults age 62+ at risk of homelessness to pay rent.
- DPSS expedites In-Home Supportive Services (IHSS) applications received from DHS and DMH interim housing providers. By processing applications two weeks before individuals exit interim housing to permanent housing, IHSS can be in place from the very beginning of the housing placement.

LAHSA is also leading three efforts to align systems and processes to better serve older adults:

- LAHSA has hired an Older Adults Coordinator to lead system alignment activities across SPAs.
- LAHSA is reviewing the Vulnerability Index-Service Prioritization Tool (VI-SPDAT) to ensure older adults are appropriately engaged, assessed and served.
- LAHSA is coordinating with WDACS, the Los Angeles Aging Advocacy Coalition, and the Corporation for Supportive Housing, to form a cross-sector collaborative of older adult and homeless services providers to develop older adult training and knowledge-sharing activities in Service Planning Areas 2 and 7.

IV. Coordinated Housing Intervention

In order to move forward with the pilot, a coordinated intervention for older adults would be needed in the key domains of prevention, rapid re-housing, permanent housing with services and housing placement retention. Housing options that allow for variable intensity of services and length of stays will be required. Substantial, net new on-going funding would be needed to implement this pilot.

Table I provides a summary of interim housing interventions for homeless older adults and the associated estimated cost per person. Older adults are currently served primarily through interim housing that is not age-specific. Given the particular needs of adults age 65+, an expansion of specialized interim housing for this population would be optimal.

Table 1. Interim Housing – Estimated Average Cost Per Person (Including Case Management Services)

Acuity Score Category	Estimated Average Cost Per Interim/Bridge Housing Bed	Estimated Average Length of Stay
1 (most vulnerable)	\$4,500/month	9 months
2	\$3,300/month	9 months
3	\$2,000/month	9 months
4 (least vulnerable)	\$1,800/month	9 months

Table 2 describes potential services and permanent housing options for older adults experiencing homelessness. Each older adult would receive the following assistance, as needed: (1) one-time move-in costs; (2) intensive case management services (ICMS); and (3) either a standard rental subsidy, shallow subsidy, or an enriched residential care subsidy. The estimated average rent cost is \$1,200 and the participant would pay 30 percent of their income. Based on an estimated average income of \$1,000 per month, the participant would pay approximately \$300 per month for rent, resulting in an average monthly rental subsidy of \$900.

Table 2. Permanent Housing – Estimated Average Cost Per Person

Acuity Score Category	Average One Time Move-in Cost	Average Intensive Case Management Services (ICMS)	Permanent Housing Types		
			Average Standard Rental Subsidy	Average Shallow Subsidy	Average Enriched Residential Care Cost
1 (most vulnerable)	\$1,000 - \$3,700	\$450/month (higher acuity)	\$900/month	N/A	\$3,000/month
2	\$1,000 - \$3,700	\$450/month (higher acuity)	\$900/month	N/A	\$2,000/month
3	\$3,700	\$225/month (lower acuity)	\$900/month	\$300/month (single) \$500/month (couple)	N/A
4 (least vulnerable)	\$3,700	\$0 - 225/month (lower acuity)	\$900/month	\$300/month (single) \$500/month (couple)	N/A

Each homeless older adult in need of subsidized housing would be served through one of the three permanent housing types identified in the table, plus one-time moving costs and/or intensive case management services, as needed.

The following factors would need to be further explored before an overall cost estimate could be developed:

- Estimated number of adults 65+ who will live with other household members (for example, spouses, grandchildren, etc.)
- Estimated number of currently homeless adults 65+ who would need interim housing and each of the permanent housing types
- Estimated inflow of adults 65+ into homelessness

- Estimated exits of formerly homeless adults 65+ from subsidized permanent housing
- Estimated exits of adults 65+ from interim housing to destinations other than subsidized permanent housing
- Estimated exits of adults 65+ from unsheltered homelessness to destinations other than subsidized permanent housing
- Estimated number of adults 65+ who would need a shallow subsidy to avoid becoming homeless

V. Conclusion

With greater numbers of older adults falling into homelessness than ever before, it is important that we continue to improve access to interim and permanent housing with appropriate supportive services for this population. Retaining older adults in housing, costs less and is more humane than the alternative of older adult homelessness. If directed by the Board of Supervisors, we will develop a multi-year budget projection, implementation framework, and potential timeline.