

MOTION BY SUPERVISOR HILDA L. SOLIS

June 28, 2022

Skid Row Action Plan: Improving Service to Skid Row Residents by Addressing Homelessness Stemming from Decades of Institutional Racism

According to the 2020 Greater Los Angeles Homeless Count, there are 4,662 people experiencing homelessness (PEH) in Skid Row of which 2,093 are unsheltered (45%). The majority of Skid Row's PEH population is male (72%). Another 28% identify as female. A total of 59% of PEH in Skid Row identify as Black/African American and 23% identify as Hispanic/Latinx. Around 35% of the Skid Row PEH population suffers from substance use disorder, 38% from serious mental illness, and 26% from a physical disability. Skid Row has the highest rate and number of overdose mortalities in Los Angeles County. These rates are higher in Skid Row as compared to the entire County PEH population. Nowhere in the County are the consequences of structural and systemic inequalities clearer.

The County needs a stronger response to undo the decades of institutional racism that helped to create the status quo in Skid Row. Undoing decades of harm and rebuilding the trust needed to effectively serve the residents of Skid Row will undoubtedly take time.

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This is why the Board of Supervisors must act to improve the lives of the Skid Row community.

The time is now to develop a comprehensive action plan by collaborating with Skid Row residents, service providers and other community stakeholders, County Departments, and City of Los Angeles partners to review, redirect existing resources, and add new resources to improve the health and well-being of the residents within the Skid Row community. This collaborative Skid Row Action Plan should consider core components from which to build including:

1. **Increased Permanent Housing** – Identify strategies to increase permanent housing opportunities in and around Skid Row including creating more units and adding services to ensure that people remain housed.
2. **Safe Services** – Implement a “safe services” space for individuals to access services in one place including health, mental health, substance use, veterinary, Department of Motor Vehicles, Department of Public Social Services, legal, housing navigation, housing retention, case management, activities to engage individuals, etc. The safe service space would include toilets, showers, and laundry.
3. **Increased Interim Housing** – Identify ways to increase the number of beds available to temporarily house individuals who sleep on the streets in Skid Row. Explore the “Safe Sleep” model, reuse of vacant Single Room Occupancy units, and other innovative strategies to bring individuals indoors and on the road to permanent housing solutions.
4. **Substance Use Health Hub** – Implementation of a Substance Use Health Hub

space is critical to the well-being of the people who reside in Skid Row. This Hub should include access to low barrier Medications for Addiction Treatment (MAT), health services, substance use services with a full spectrum of resources, mental health services, respite/detox beds, and chill out spaces. An overdose prevention/safe consumption site could be added once new legislation, or a Skid Row overdose state of emergency is enacted. The Hub would also include space for 24/7 phone charging, showers, toilets, laundry, snacks, and activities related to reducing negative outcomes from substance use.

5. 24/7 Low Barrier Health Services including Physical and Behavioral Health

Urgent Care Services – Full scope 24 hours a day, 7 days a week low barrier health clinic with enhanced services that includes urgent care for health and behavioral health and improved access to reproductive and sexual health services including STD testing and treatment. Services would reduce police/emergency services calls, unnecessary jail visits, emergency room visits, and deaths.

6. Increased Sanitation Services – Improve the health conditions by adding dumpsters, increased trash collection, permanent sharps bins, and additional bin storage spaces. Consider additional Refresh Spots, to create more access to showers, bathrooms, and laundry services.

7. Increased Sources of Income – Identify strategies to increase ongoing access to public benefits and community financial service options as well as education and employment opportunities.

Los Angeles County's Housing for Health (HFH) program was established in 2012 as a division within the Los Angeles County Department of Health Services (DHS) to provide a continuum of housing and services for people experiencing homelessness who have complex medical and behavioral health issues. Since its inception, HFH has taken a leading role in coordinating services for housed and unhoused residents of Skid Row. In 2014, HFH moved its headquarters to Skid Row. Since that time, HFH has created over 300 Interim Housing beds in Skid Row, partnered on the Star Apartments and several other permanent supportive housing projects for the most vulnerable unhoused individuals, and launched the Star Health Clinic, which serves individuals who have challenges accessing health services at traditional clinics. In addition, HFH created the four County, City, Community multidisciplinary teams (MDTs) that operate in Skid Row, which was the pilot for the 70 current Measure H MDTs throughout the County. Lastly, HFH is home to the County's Skid Row Coordinator, who oversees all the County departmental activities in Skid Row.

I THEREFORE MOVE that the Board of Supervisors:

1. Direct the Department of Health Services Housing for Health (HFH) in conjunction with the CEO Homeless Initiative to convene working groups including representatives from the City of Los Angeles Mayor's Office, Los Angeles City Council District 14, Department of Public and Social Services (DPSS), Department of Mental Health (DMH), Department of Public Health (DPH), Workforce Development Aging and Community Services (WDACs), and Skid Row community partners including residents, service providers, and stakeholders, to develop a collaborative Skid Row Action Plan. The working

groups should meet for a six-month period and include conversations to leverage existing resources to support the plan. HFH should report back in 45 days with a workgroup meeting schedule and a list of participants and provide a 3-month and 6-month report back to the Board on the working groups' progress.

2. Direct County Department Heads, as listed in Directive 1, to appoint representatives to the working groups to participate, identify, leverage, and bring new resources to Skid Row.
3. Direct the Chief Executive Officer to work with relevant County Departments and the City of Los Angeles to identify funding resources to support the Skid Row Action Plan. This should include working with the applicable County Departments to prioritize the residents of Skid Row and bring the maximum amount of departmental resources to bear.

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