# Los Angeles County Bed Status Report Update

Tuesday, February 13, 2024

#### **Presenters:**

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CEO-HI - Cheri Todoroff

JCOD - Judge Songhai Armstead, Ret.

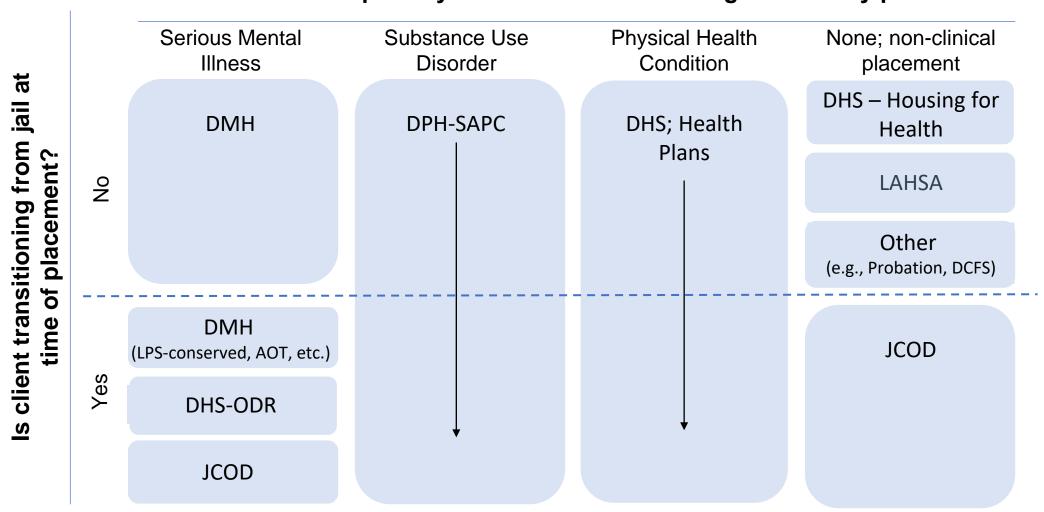
#### **RECAP: LA County Cross-Department "Continuum of Care"**



		Treati	ment Beds				Housing Beds	
	Crisis Receiving & Stabilization		Acute Inpatient/ Subacute		sidential/ Residential	Licensed Residential Care	Interim Housing	Permanent Housing
	Up to 24 hours (licensed; except sobering center)		Hospital level care (licensed)		with onsite ment services nsed)	Residential "board and care" (licensed)	Shelter with supportive services (unlicensed)	Permanent housing with supportive services (unlicensed)
		<u>Acute</u>	<u>Subacute</u>	Crisis Res.	Extended Res.			
DEPARTMENT OF MENTAL HEALTH hope, recovery, wellbeing.	Urgent Care Centers	Acute Inpatient Psych	Subacute, State Hospitals	Crisis Residential Treatment Programs	Enriched Residential Services (ERS)	Enriched Residential Care (ERC)	Interim Housing	Permanent Supportive Housing
Health Services LOS ANGELES COUNTY	Psych ERs	Acute Inpatient Psych	ODR Beds			Enriched Residential Care (ERC)	Stabilization Housing, Recuperative Care	Permanent Supportive Housing
COUNTY OF LOS ANGELES Public Health SAPC	Sobering Centers	Inpatient Withdrawal Management		Residential Withdrawal Management	High/Low Intensive Residential		Recovery Bridge Housing	
LOS ANGELES HOMELESS SERVICES AUTHORITY							Bridge Housing, Shelters, Motel Vouchers	Rapid Re-Housing and Shallow Subsidy
JUSTICE CARE  OPPORTUNITIES DEPARTMENT							Reentry Interim Housing, Interim Housing with DMH FSP, Diversion Housing	Breaking Barriers (Rapid Re-Housing)
	High ◀				—— Acuity —			Low

# **Current Major County Departmental Activity in Building New Community Bed Placements**

#### What is the client's primary clinical condition driving community placement?



#### **Mental Health**



			Accessed 1	Treatment Beds/Slo	ots		Housing Beds/Units			
		Crisis Receiving & Stabilization		Acute Inpatient/ Subacute		Crisis Residential/ Extended Residential		Interim Housing	Permanent Housing	
		Up to 24 hours (licensed; except sobering center)	Hospital level	Hospital level care (licensed)		Residential with onsite clinical/treatment services (licensed)		Shelter w/ supp. services (unlicensed)	Permanent housing with supportive services (unlicensed)	
		<b>Urgent Care Centers</b>	Acute Inpatient Psych	Subacute, State Hospitals	Crisis Residential Treatment	Enriched Residential Services	Enriched Residential Care	Interim Housing	Permanent Supportive Housing	
No. Beds/Units	Existing/ Accessed Beds as of December 2023	<b>168</b> Total Chairs	<b>2887</b> Total licensed beds	1262 Average monthly census	<b>252</b> Total beds	440 Average monthly census	Est number of people served based on allocated funding	<b>810</b> Total beds	<b>5545</b> Funded units available to be occupied	
Z	Beds/Units Added May - Dec 2023	8 Chairs	<b>118</b> Beds	<b>25</b> Beds	<b>64</b> Beds	<b>12</b> Beds	<b>550</b> Beds	<b>133</b> Beds	<b>334</b> Units	
	Target Populations	<ul> <li>Psychiatric crisis clients</li> <li>Danger to self/others (DTS/DTO) or gravely disabled</li> <li>ALOS &lt; 24 hrs</li> <li>Locked</li> </ul>	<ul><li>Psych crisis</li><li>DTS/DTO</li><li>ALOS 7-10 days</li><li>Locked</li></ul>	<ul> <li>Can't manage in community</li> <li>Need 24hr nursing</li> <li>ALOS 18 mos</li> </ul>	<ul> <li>In crisis but accepts voluntary treatment</li> <li>ALOS 30 days</li> </ul>	<ul> <li>Can manage</li></ul>	• SMI adults needing 24/7 care & supervision	• SMI clients including TAY, unhoused adults & their children	SMI clients including TAY, adults, older adults, families & veterans	
		High			Acuity -				Low	

- 4

#### **New Beds & Beds Coming Online**

**Beds/Units Added** (May to December 2023)

LOC	# Beds	Comments
UCC	8	Pacifica UCC added 8 beds as part of a phased opening.
Acute	118	53 FIT (Field Intervention Team) Pilot Program beds have increased access through a more targeted contracting method.
Subacute	25	10 of the beds added used a single use agreement method.
CRTP	64	DMH has opened 4 new CRTP facilities with 16 beds each.
ERS	12	
ERC	550	Added capacity due to additional funding through Hollywood 2.0, MHSA and CCE.
IH	133	Added capacity due to additional funding through Hollywood 2.0 and MHSA, which includes 2 additional interim housing sites for individuals leaving jail.
PSH	334	Represents new tenant- and project- based resources.

#### **Beds Being Built** (January – December 2024)

LOC	# Beds	Comments
UCC	16	
Acute	180	Three facilities that will expand inpatient beds through BHCIP grant funds.
Subacute	Est up to 125	Facilities are pending so 125 is an estimate.
CRTP	80	Future Restorative Care Village (RCV) sites.
ERS	0	
ERC	0	
IH	580	Represents expansion through Behavioral Health Bridge Housing (BHBH) funds.
PSH	859	Represents new project-based resources in development.

### **Barriers & Challenges**

1 - Multiple and sometimes competing federal, state, and county priorities that demand the department's attention and resources.

2 - IMD limitations.

**3** - Increase in volume and the complexity of DMH clients.

**4 -** BHCIP Round 6 delay.

#### **Public Health - SAPC**



		Treatn	nent Beds		Housing Beds		
	Crisis Receiving & Stabilization	Acute Inpatient/ Subacute		esidential/   Residential	_	erim ısing	
	Up to 24 hours (licensed; except sobering center)	Hospital level care (licensed)	Residential with o treatment service		Shelter w/ supp. services (unlicensed)		
	Sobering Centers	Inpatient Withdrawal Mgmt (ASAM 3.7-WM, 4-WM)	Residential Withdrawal Mgmt (ASAM 3.2-WM)	Residential Treatment (ASAM 3.1, 3.3, 3.5)	Recovery Bridge Housing	Recovery Housing *New*	
Current Existing	rent Existing 15 78		78 100 <sup>1</sup> 2		1,213	0	
Funded – In Development	I – In Development 16 0		48	366³	450	150	
Historical Rate per Bed per Day	~\$200	\$1000	\$400	\$214 - \$243	\$55-\$60	\$50 - <b>\$</b> 55	
Target Populations	Actively intoxicated	All Populations	All Populations	All Populations	All Populations	All Populations	
	High		Acuity				

<sup>1 -</sup> Beds are estimated as the State does not distinguish between licensure for Residential WM (ASAM 3.2-WM) and Residential (ASAM 3.1, 3.3, 3.5) beds and SAPC's providers utilize these beds flexibly based on need. Historically utilization has been at 4% of residential beds that may be used for WM.

<sup>2 -</sup> Bed counts are updated to reflect all fully executed contract actions and the numbers change as beds are added, beds are removed (in addition to facility openings and closures.

<sup>3 -</sup> Beds include BHCIP recipients currently contracted with SAPC, although additional BHCIP related beds may be funded upon completion of BHCIP projects, DHCS DMC licensure or certification, and meeting SAPC contracting requirements



### **SAPC Treatment Service Expansion**

- DHCS BHCIP SUD Service Awards: SAPC can contract with awardees for DMC treatment services upon completion of DHCS DMC licensure or certification; this is anticipated to result in over 500 new SUD treatment beds in FY 2024-2025 and beyond.
- SAPC has an open contracting process and continues to contract for new beds and treatment sites to increase access to needed SUD services
  - Recovery Bridge Housing (RBH) Recovery-oriented interim housing for up to 180-days when participating in outpatient treatment
    - 400 total new beds (300 RBH beds funded through DHCS BHBH, and 100 RBH beds funded through opioid settlement) ~250 RBH beds anticipated to be online by the end of FY 2023-2024
  - <u>Recovery Housing (RH)</u> \*NEW\* Recovery-oriented housing for up to 12-months for those in recovery but who may or may not be participating in treatment services
    - 150 total new beds (100 RH beds funded through DHCS BHBH and 50 RH beds funded through opioid settlement) ~100 RBH beds anticipated to be online by the end of FY 2023-2024

# Services to Support Successful Access and Placement to SUD Treatment/Beds



Client Engagement and Navigation Services (CENS) are primarily in-person services that assist people experiencing homelessness (PEH) and others access SUD services at co-located sites, including shelters, interim housing, unsheltered encampments, courthouses, Probation offices, etc.

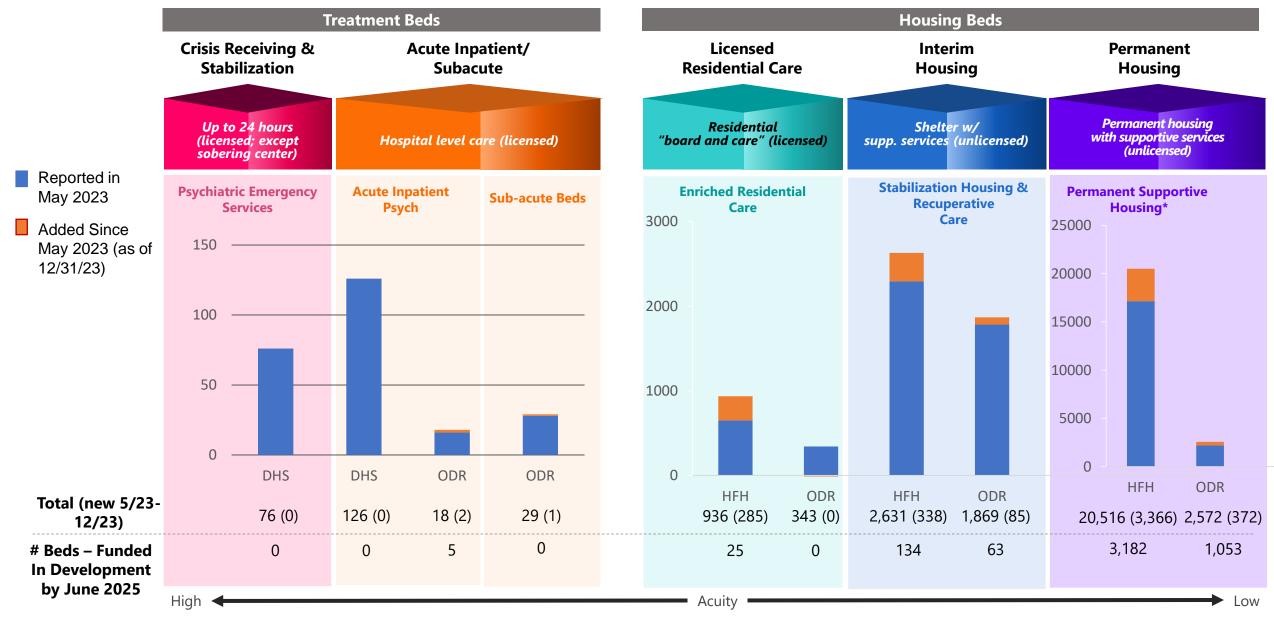
• CENS staff supports the LA City Inside Safe and County's Pathway Home operations and participates in Service Connect Days for individuals brought indoors from encampments.

#### Additional Support for Vulnerable Populations: Taking Services to Where Individuals Are

- Expanded clinical SUD services at Probation's juvenile detention facilities
- Field-based harm reduction services, including distribution of overdose prevention kits and connections to services
- Expanded field-based and 'in home' SUD treatment and MAT services in housing and other settings
- Mental Health Services Act Innovations Grant: Interim Housing Outreach Program (IHOP)
  - 28 CENS SUD counselors participate in Regional Multidisciplinary Teams with DHS and DMH to serve residents in over 200 Interim Housing sites.
  - 16 SUD clinicians embedded in co-occurring capable residential programs alongside mental health clinicians to serve people with SUD and mental health conditions.

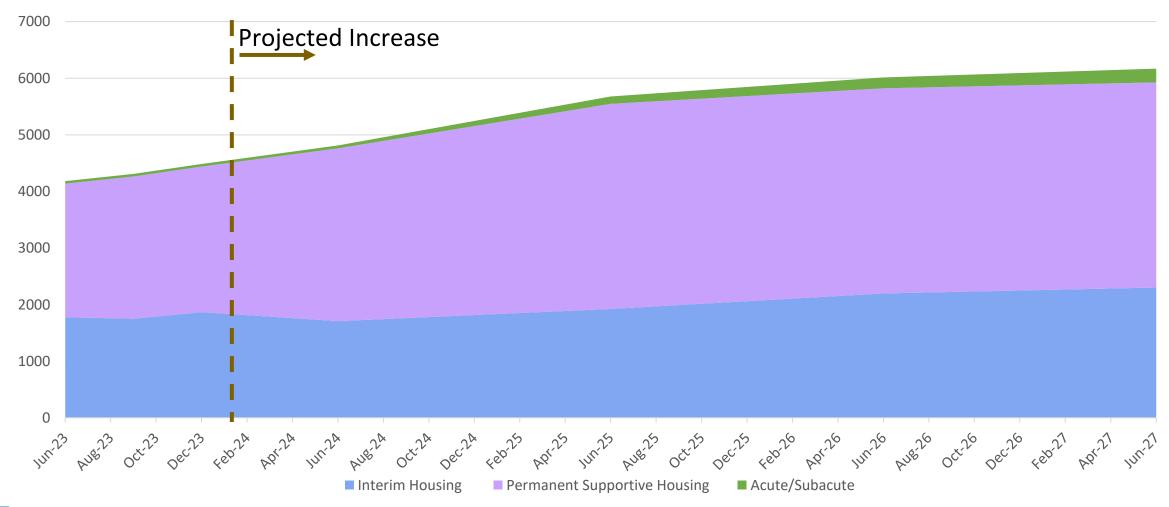
#### **Health Services Beds**





### **ODR Jail-based Diversion Bed/Slot Expansion**

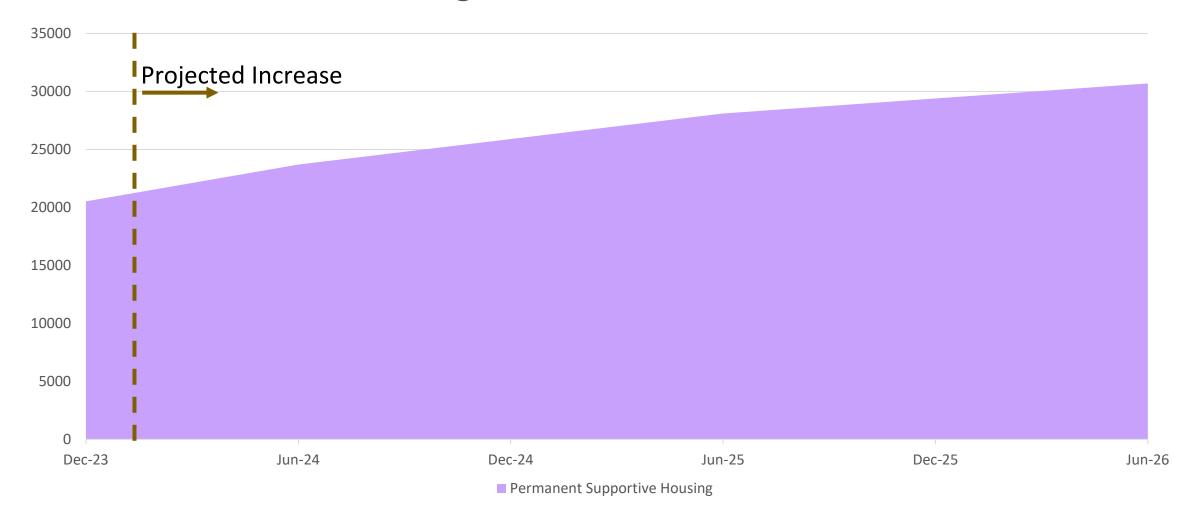
Based on Available Funding





## **HFH Permanent Supportive Housing Expansion**

#### Based on Available Funding





#### Housing for Health SagePointe in Wilmington

Opened October 2023

SagePointe is a new supportive housing community in LA's Wilmington neighborhood. It includes:

• **54 one-bedroom homes** for seniors (age 55+) who have experienced homelessness

Linc Housing provides **comprehensive on-site services** for PSH clients, including:

- Intensive Case Management Services
- Mental and Physical Health Services
- Substance Use Counseling
- Employment Counseling and Placement
- Money Management
- Referrals to other services/resources





Accelerating ramp up of ODR and HFH housing capacity would require additional investment

Funding for additional Interim Housing (IH) & Permanent Supportive Housing (PSH) expansion

- Funding needed especially for PSH
- ODR needs funding in Q3-4 2025 for expansion plan for submission Supplemental budget FY24-25

Increased rates to address inflation & community workforce shortages

 Evaluating near-term rate increases to address provider concerns, retain and recruit communitybased providers and serve sicker participants

Expand DHS/ODR administrative and programmatic staffing to accelerate growth

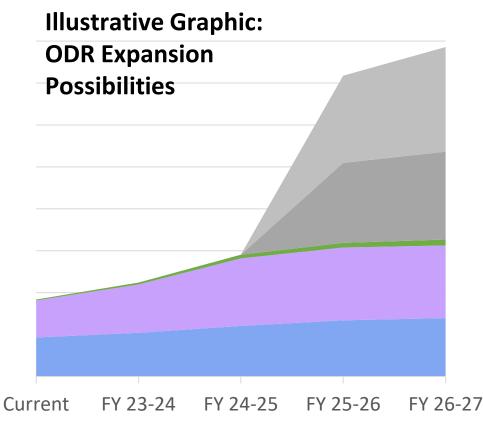
 Greater support for administrative and programmatic infrastructure would accelerate growth to meet demand

Work with Courts & Justice Partners to Scale and increase access to ODR Programs

- Accelerate ODR Courts expansion to maximize diversion & competency restoration
- Expand Justice partner staffing

Funding for additional acute and subacute beds in ODR

- Sufficient until FY 26-27 for FIST program
- TBD in ODR Housing depends on success in diversion to subacute settings with Courts



- Major expansion with additional funding & infrastructure
- Moderate expansion with additional funding
- Acute/Subacute
- Permanent Supportive Housing
- Interim Housing Beds

# DHS Beds Funded by Homeless Initiative Homeless Initiative Bed Count "Overlay"





				Housing Beds					
	Crisis Receiving & Stabilization		npatient/ acute	Licensed Residential Care	Interim Housing	Permanent Housing			
	Up to 24 hours (licensed; except sobering center)			Residential "board and care" (licensed)	Shelter w/ supp. services (unlicensed)	Permanent housing with supportive services (unlicensed)			
				Enriched Residential Care	Stabilization Recuperative Housing Care	Permanent Supportive Housing*			
Current Existing	76	126 DHS 16 OV/ODR	28 ODR	<b>217</b> HFH <b>343</b> ODR	<b>1,335</b> HFH <b>335</b> HFH <b>1,772</b> ODR <b>12</b> ODR	<b>1,044 (15,189)</b> HFH <b>715</b> ODR			
Funded – In Development				0 HFH 0 ODR	<b>109</b> HFH <b>566</b> ODR	<b>0 (3,054)</b> HFH 536 ODR			
Historical Rate per Bed per Day**	<b>n/a</b> (directly operated)	n/a (directly operated)	\$300-400	\$100-140	<b>\$75-100</b> Stabilization <b>\$150-200</b> Recuperative <b>\$100-200</b> ODR	\$50-75			
Target Populations	Individuals seeking (or on WIC involuntary hold for) an evaluation for acute psychiatric hospitalization	Primarily FIST clients diverted from jail	FIST clients diverted from jail	<ul> <li>Unhoused PEH with physical &amp; behavioral health needs</li> <li>Persons diverted from LA Co. Jail; Disability Applicants; Formerly Incarcerated</li> </ul>	Unhoused PEH with physical and behavioral health needs.  Beasth persons diverted from LA Co. Jail  Unhoused PEH with physical and behavioral health needs.	<ul> <li>Unhoused PEH with physical &amp; behavioral health needs</li> <li>Persons diverted from LA Co. Ja</li> <li>Disability Applicants</li> <li>Medi-Cal high utilizers</li> <li>Formerly Incarcerated</li> <li>PEH living with HIV/AIDS</li> </ul>			

<sup>\*</sup> First number outside parentheses (e.g., 1,044 and 0) are Homeless Initiative funded Flexible Housing Subsidy Pool rental subsidies; numbers inside parentheses represent total PSH, including those funded by federal subsidies (i.e., there are 15,189 PSH slots with either FHSP or Federal subsidies, and an additional 3,054 units in development funded with federal subsidies). All 15,189 current and 3,054 future units receive Homeless Initiative funded Intensive Case Management Services through DHS Housing for Health.

Low

<sup>\*\*</sup> Cost estimates exclude administrative and overhead costs.

#### **DPH/SAPC** Beds Funded by Homeless Initiative





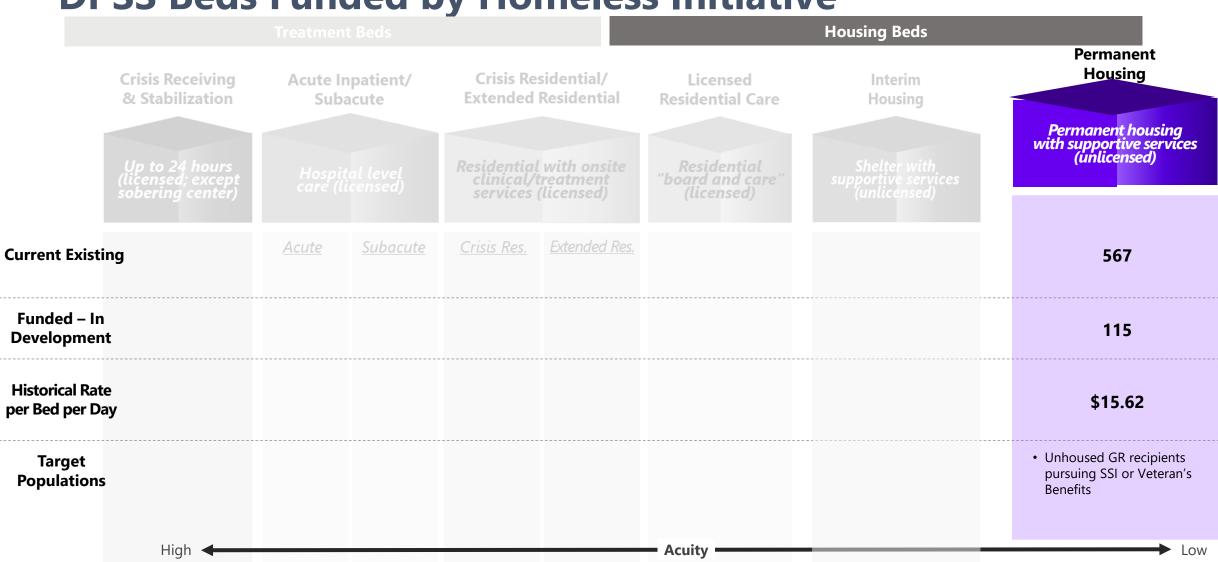
Homeless Initiative Bed Count "Overlay"

			ds	Housing Beds				
	Crisis Receiving & Stabilization	Acute Inpatient/ Subacute	Crisis Residential/ Extended Residential	Licensed Residential Care	Interim Housing	Permanent Housing  Permanent housing w/ supportive services (unlicensed)		
	Up to 24 hours (licensed; except sobering center)		Residential with onsite clinical/treatment services (licensed)	Residential "board and care" (licensed)	Shelter w/ supp. services (unlicensed)			
		<u>Acute</u> <u>Subacut</u>	e <u>Crisis Res.</u> <u>Extended Res.</u>		Recovery Bridge Housing			
urrent Existing					550			
Funded – In Development					<del></del>			
Historical Rate er Bed per Day					\$55-60			
Target Populations					All populations			





#### **DPSS Beds Funded by Homeless Initiative**







**LAHSA Beds Funded by Homeless Initiative** 



# No. Bed

#### Cities, Councils of Government, and Continuums of Care



					Housing Beds	
	Crisis Receiving & Stabilization	Acute Inpatient/ Subacute	Crisis Residential/ Extended Residential	Licensed Residential Care	Interim Housing	Permanent Housing
	Up to 24 hours (licensed; except sobering center)		Residential with onsite clinical/treatment services (licensed)	Residential "board and care" (licensed)	Shelter with supportive services (unlicensed)	Permanent housing with supportive services (unlicensed)
		<u>Acute</u> <u>Subacute</u>	Crisis Res. Extended Res.		Interim Housing	Time Limited Subsidies
Current Existi	ing				540	86
Funded – In Developmen					110	
Historical Rate per Bed per Da					\$60-\$106	\$6-\$70
Target Populations	3				• Unhoused PEH	• Unhoused PEH
	High <b>◀</b>			Acuity —		Low

### **Project Homekey**





					Housing Beds	
	Crisis Receiving & Stabilization	Acute Inpatient/ Subacute	Crisis Residential/ Extended Residential	Licensed Residential Care	Interim Housing	Permanent Housing
	Up to 24 hours (licensed; except sobering center)		Residential with onsite clinical/treatment services (licensed)	Residential "board and care" (licensed)	Shelter with supportive services (unlicensed)*	Permanent housing with supportive services (unlicensed)
		<u>Acute</u> <u>Subacute</u>	Crisis Res. Extended Res.		Interim Housing	Perm Supportive Housing
Current Existing					764	157
Funded – In Development					583 186 (HK3)*	1,351
Historical Rate per Bed per Day					\$105-110	\$15-20
Target Populations					• Unhoused PEH	• Unhoused PEH
H	ligh <del></del>		Acu	ity —		Low

#### **Consolidated Homeless Initiative-Funded Beds**



Current, In the Pipeline, and Costs/Funding

	Level of Care	Target Population	Current Existing	Funded - In Development		Funding Sources <sup>2</sup>
	Licensed Residential Care	Individuals who need permanent housing plus around-the-clock non-medical care/supervision	217	0	\$100-140	Measure H, HHAP, HHIP
Housing Beds	Interim Housing	Individuals who need immediate housing, with varying levels of supportive services onsite	7,846	1,374	\$30-200	Measure H, HHAP, ARPA, NCC, HPI-HSF, Homekey
	Permanent Housing	Individuals who need permanent housing	19,610	4,520	\$6-75	Measure H, HHAP, Homekey
		Total	27,673	5,890	\$6-200	

21

<sup>1</sup> This does not include all County-funded services provided to clients placed in these beds (e.g., outpatient services for clients in housing).

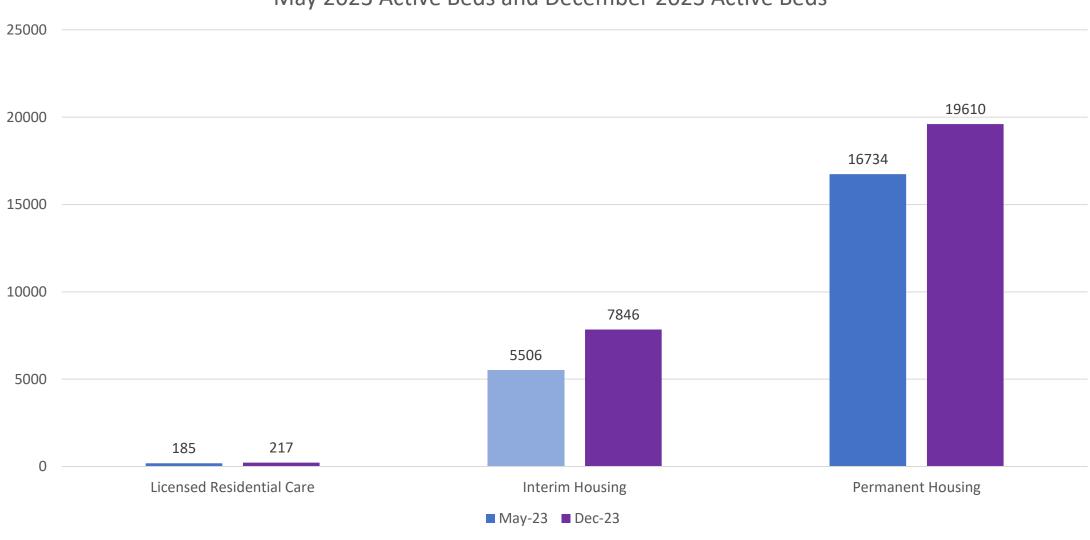
<sup>2</sup> This is a representative but not exhaustive list of funding sources utilized.

<sup>3</sup> Current existing number of interim housing beds does not include winter shelter beds and augmented winter shelter beds. See Appendix at end for explanation of funding acronyms

#### **Consolidated Homeless Initiative-Funded Beds**







### **Justice, Care and Opportunities**



							Housing Beds	
	Crisis Receiving & Stabilization		Acute Inpatient/ Subacute  Hospital level care (licensed)		esidential/ I Residential	Licensed Residential Care	Interim Housing	Permanent Housing
	Up to 24 hours (licensed; except sobering center)				nl with onsite /treatment (licensed)	Residential "board and care" (licensed)	Shelter w/ supp. services (unlicensed)	Permanent housing with supportive services (unlicensed)
		<u>Acute</u>	<u>Subacute</u>	<u>Crisis Res.</u>	Extended Res.		Reentry Interim Housing, Interim Housing with DMH FSP, Diversion Housing	Breaking Barriers (Rapid Re-Housing)
Current Existing							781*	220
Funded – In Development								
Historical Rate per Bed per Day							\$60-152	~\$40/day subsidy
Target Populations							Pretrial, Diversion, Alternative Sentencing, and Reentry individuals needing immediate housing	Reentry individuals needing employment support + subsidized permanent housing
	High ◀					Acuity —		Lov

<sup>\*</sup> Includes 44 beds associated with two (2) Incubation Academy participants

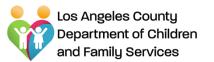
#### **Probation**



						Housing Beds				
	Crisis Receiving & Stabilization		npatient/ acute		esidential/   Residential	Licensed Residential Care	Interim Housing	Permanent Housing		
	Up to 24 hours (licensed; except sobering center)		tal level icensed)	clinical/	l with onsite (treatment (licensed)	Residential "board and care" (licensed)	Shelter w/ supp. services (unlicensed)	Permanent housing w/ supportive services (unlicensed)		
		<u>Acute</u>	<u>Subacute</u>		Extended Res.	Skilled Nursing Facility, Board and Care	Transitional Housing, Sober Living Programs, Recuperative Care			
Current Existing						9	546			
Funded – In Development										
Historical Rate per Bed per Day						\$175-250	\$42-175			
Target Populations						Adults on AB109 probation supervision in need of licensed residential care services	Adults on AB109 probation supervision in need of interim housing with various levels of on- site supportive services			
H	ligh <b>←</b>					Acuity —		Lov		

# No. Beds

### **DCFS (Housing Beds for Adult Clients)**



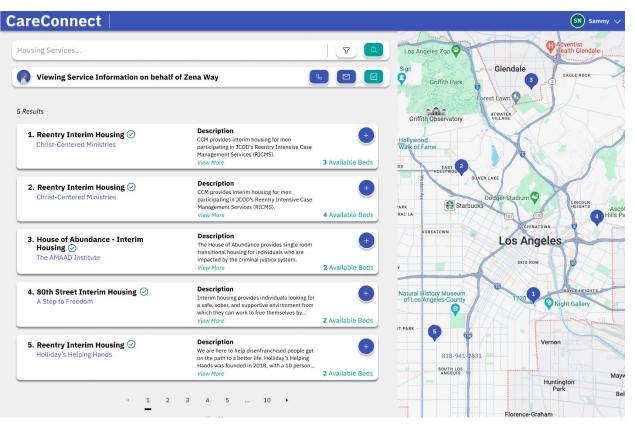
						Housing Beds			
	Crisis Receiving & Stabilization			Crisis Residential/ Extended Residential		Licensed Residential Care	Interim Housing	Permanent Housing	
	Up to 24 hours (licensed; except sobering center)	Hospital le care (licens		Residential with onsite clinical/treatment services (licensed)		Residential "board and care" (licensed)	Shelter w/ supp. services (unlicensed)	Permanent housing w/ supportive services (unlicensed)	
		<u>Acute</u> <u>Si</u>	<u>Subacute</u> <u>(</u>	Crisis Res.	Extended Res.		Independent Living and Transitional Housing Programs		
Current Existing							704		
Funded – In Development									
Historical Rate per Bed per Day							\$83-168		
Target Populations							Current and former foster or probation youth		
F	ligh <b>←</b>					— Acuity —		Low	

#### JCOD's LA County CareConnect

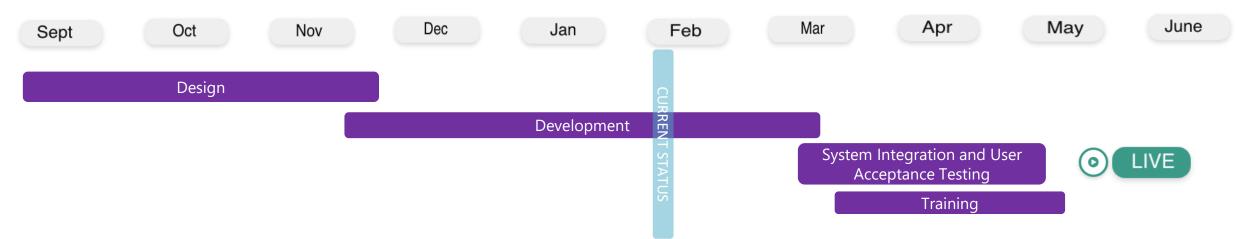
**Services and Beds Availability and Navigator App** 

#### **LA County CareConnect will:**

- Support initial screening for client needs
- Allow users to search for services and beds
- When appropriate, allow users to view availability of services and beds
- Help generate closed-loop referrals to reserve services and beds (for service providers and County departments that participate)
- Collect client data and obtain consent to share data necessary for closed-loop referrals



The contract with the developer started in September 2023. CareConnect is scheduled to go live in May/June 2024.



# Questions?



### **Appendix: Acronyms Used In This Presentation**

#### **Funding Acronyms**

ACR	Alternative Crisis Response
ARPA	American Rescue Plan Act
CCE	Community Care Expansion
DHSP	Division of HIV and STD Programs
DMC	Drug Medi-Cal
DSH	Disproportionate Share Hospital payments
EPSD	Early Period Screening Detection
FFP	Federal Financial Participation
HDAP	Housing and Disability Advocacy Program
HHAP	Homeless Housing, Assistance and Prevention Grant
HHC	Housing and Homelessness Committee
HHIP	Housing and Homelessness Incentive Program
MC	Managed Care
MHSA	Mental Health Services Act
SABG	Substance Abuse Prevention and Treatment Block Grant
SAMHSA	Substance Abuse and Mental Health Services Administration
SGF	State General Fund

#### **Other Acronyms**

ALOS	Average Length of Stay
FFS	Fee For Service
DTO	Danger to Others
DTS	Danger to Self
PHF	Psychiatric Health Facility
SD	Short Doyle
SMI	Severely Mentally III
TAY	Transitional Age Youth