

Homeless Initiative

Los Angeles County Emergency Response

Los Angeles County Board of Supervisors



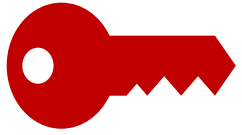
Chief Executive Office.



County of Los Angeles
Homeless Initiative



FOUR PEH MISSIONS



ENCAMPMENT
RESOLUTION

1



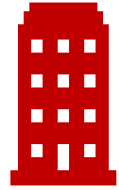
HOUSING

2



MENTAL HEALTH
AND
SUBSTANCE USE
DISORDER
TREATMENT

3



EVICTION
PREVENTION

4



Strategies to Address People Experiencing Homelessness with Substance Use Disorders

September 17, 2024

Los Angeles County Department of Public Health
Substance Abuse Prevention and Control Bureau





Impact of the Homeless Emergency Declaration on SAPC Services

- **The pace of new initiatives, priorities, legislation, and work consistently outpaces the timing of bringing in staff or contracting for and procuring services and products to execute this new work**
 - Homeless flexibilities have been essential to allow SAPC to:
 - More quickly bring in critical staff to meet a variety of growing responsibilities related to homelessness, CalAIM, SB 43, payment reform, operationalizing new funding such as opioid settlement/BHBH/MHSOAC, etc.
 - Establish contracts via a truncated timeline to expand needed services more quickly.
 - Expediate procurement of supplies such as overdose prevention kits to minimize homeless overdose deaths
 - Each of these areas (hiring, contracting, procurement) are essential to address County priorities around homelessness and **months have been saved through each of these processes due to these flexibilities**



SAPC's Leveraging of the Homeless Emergency Declaration

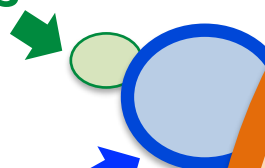
- **Hiring**
 - Examinations opened through HI →
 - SAPC Examinations: 13 Other DPH Programs with HI Nexus: 4 examinations
 - Hired candidates through the HI examination process →
 - SAPC Hires: 37 candidates Other DPH Programs with HI Nexus: 23 candidates
 - Ordinance Position Authority (OPA's) to support expedited hiring through HI → 32+ items
- **Contracting**
 - New contracts executed → 5 harm reduction & 3 opioid settlement related contracts
 - Contract amendments executed → 9 (7 harm reduction and 2 juvenile justice SUD treatment)
- **Procurement**
 - Substance Use Disorder Network Learning Platform
 - In-process of procuring items for 25,000 overdose prevention kits



Support from the Board of Supervisors

- **Consider making homeless emergency declaration flexibilities permanent** (hiring/contracting/procurement) to routinize the urgency of this work to better support PEH

Those seeking out services



Those interested in but
not seeking out services

Those not interested in
services

**Fundamentally,
people with SUDs can be
categorized into 3 groups**

A Continuum of Substance Use Interventions



Youth Development & Health Promotion

- Programs at school- and community-level

Drug Use Prevention

- Universal, selected, and indicated prevention

Harm Reduction → Currently largely serves people who are using drugs and not yet interested in SUD treatment

- Low threshold services proven to reduce morbidity and mortality, including outreach, overdose prevention (naloxone and fentanyl test strip distribution, etc), syringe exchange, peer services, linkages to SUD treatment and other needed services, etc.

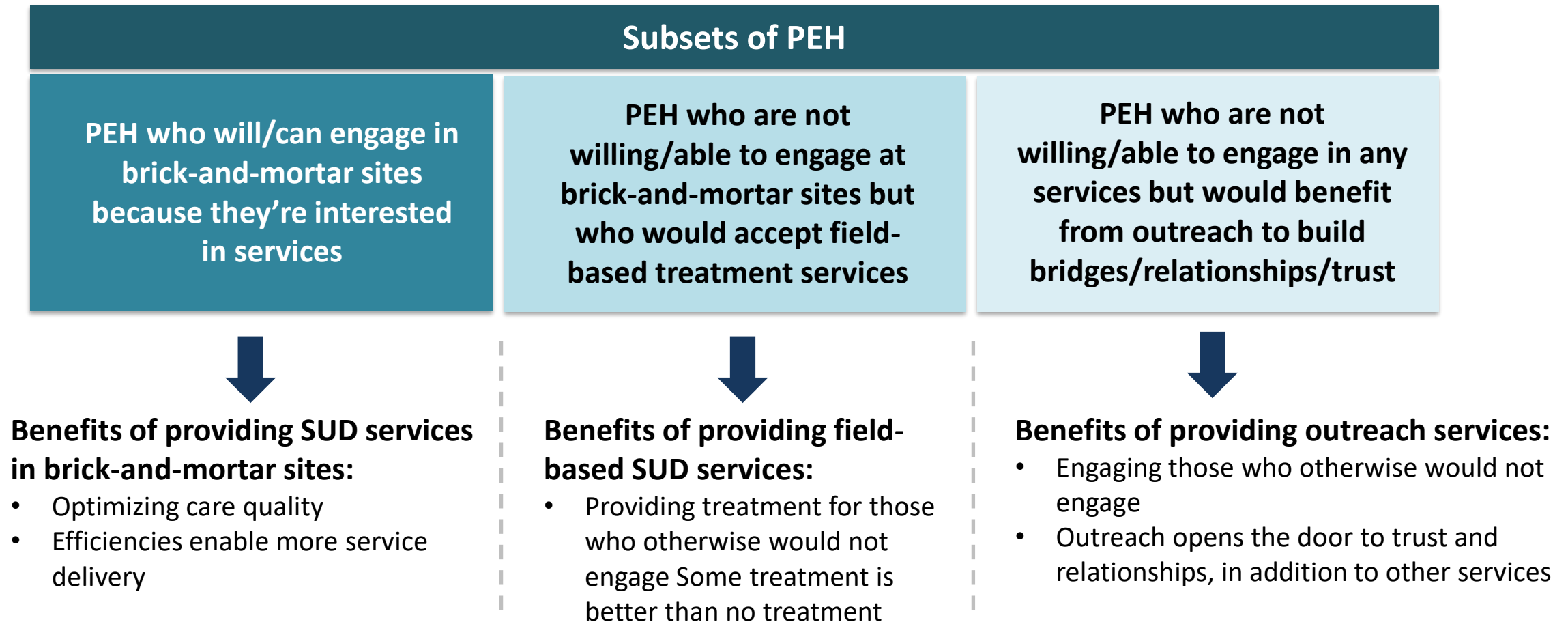
SUD Treatment & Recovery → Currently largely serves people who are ready for abstinence

- Involves a spectrum of settings: opioid treatment programs, outpatient, intensive outpatient, residential, inpatient, withdrawal management, Recovery Services, Recovery Bridge Housing, field-based services, care coordination and navigation, etc.

Surveillance of drug use and its community impact

Strategic Approach to Meeting PEH Needs

- **Optimizing the matching of resources to need**





Expanding SUD Services and Reach

- **Brick-and-Mortar SUD treatment**

- Field-based SUD treatment
- Outreach & harm reduction expansion

- **Ideal for individuals who will actively seek out SUD treatment, with or without support (e.g., transportation).**
- **Service participants receive all components of SUD treatment:**
 - Individual counseling
 - Group counseling
 - Medications for addiction treatment
 - Care coordination
 - Family therapy
 - Higher levels of care (withdrawal management, residential, inpatient, etc.)
- **Growth of SAPC's specialty SUD treatment system since implementation of the Drug Medi-Cal waiver in 2017:**
 - Overall, **275% increase** in SUD treatment investments due to **830% increase** in leveraging of Drug Medi-Cal, resulting in:
 - **>200% increase** in residential SUD treatment beds
 - **50% increase** in outpatient SUD treatment
 - **>700% increase** in Recovery Bridge Housing beds



Expanding SUD Services and Reach

- Brick-and-Mortar SUD treatment
- **Field-based SUD treatment**
- Outreach & harm reduction expansion

- **Field-based SUD treatment (FBS) is provided in non-traditional settings such as encampments, shelters, interim or permanent housing, etc.**
- **Goal is to increase access to SUD treatment services, promote patient engagement, and better serve hard-to-reach populations**
- **Primary components of SUD treatment are more limited compared to brick-and-mortar settings:**
 - Individual counseling
 - Care coordination
 - MAT available through the MAT Consultation Line operated by DHS and funded by SAPC
- **FBS scaling challenges for SUD providers: staffing shortages, cost-to-volume of service recipient ratio (reimbursement)**
- **SAPC has streamlined the FBS application process and significantly expanded FBS:**

Fiscal Year	FBS Agencies	FBS Service Sites
FY 22-23	16	56
FY 23-24	22	111
FY 24-25	26	144

} 98% increase
} 30% increase
} 157% increase

Expanding SUD Services and Reach

- Brick-and-Mortar SUD treatment
- Field-based SUD treatment

- **Outreach & harm reduction expansion**

Client Engagement and Navigation Services (CENS)

- Services include outreach, engagement, SUD education, linkage to services, navigation, harm reduction strategies
- Provided in interim housing, encampments, courts, urgent care centers, etc.
- Previous CENS scaling challenge was funding-related, but due to CalAIM policy changes, SAPC started billing Drug Medi-Cal for a portion of CENS services starting in 2024
- SAPC has significantly expanded CENS sites, particularly for PEH:

Fiscal Year	CENS Agencies	CENS Sites
FY 22-23	8	162
FY 23-24	8	228
FY 24-25	8	418

} 41% increase
} 83% increase
} 158% increase



Expanding SUD Services and Reach

- Brick-and-Mortar SUD treatment
- Field-based SUD treatment
- **Outreach & harm reduction expansion** (cont'd)

Harm Reduction Services

- Harm reduction service services include outreach, engagement, naloxone and test strip distribution, syringe exchange, SUD education, linkage to services, etc.
- Provided via both brick-and-mortar and street-based settings
- Harm reduction funding is limited and various funding streams have restrictions, but SAPC's fiscal strategies have allowed it to significantly expand harm reduction investments by over 500% over the past three years
- **Investing in the full continuum of SUD services**
 - Importantly, SAPC's increased harm reduction investments have been made in the context of also increasing investments in:
 - SUD prevention by 260%
 - SUD treatment by 275%



Expansion Plan – SAPC’s PEH-Focused Services

- **Across the board expansion:**
 - Brick-and-mortar sites – Projected **~50% expansion** over the next 2 fiscal years
 - Field-based sites – Projected **~30-40% expansion** over the next 2 fiscal years
 - Outreach and engagement services – Projected **~40-50% expansion** of SAPC-funded services (e.g., CENS, harm reduction services) over the next 2 fiscal years
 - **Outreach and engagement are appropriately shared responsibilities across various partners** – This projected growth in SAPC’s outreach and engagement services does not include similar services provided by multidisciplinary teams funded by other County partners that also help to identify and refer individuals who would benefit from SUD services, so this expand is on top of those services



▶▶ Leveraging The Emergency Declaration



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**DEPARTMENT OF
MENTAL HEALTH**
hope. recovery. wellbeing.

▶▶ Use of Delegated Authorities for Homeless Services and Housing Programs

Sole Source Contracts:

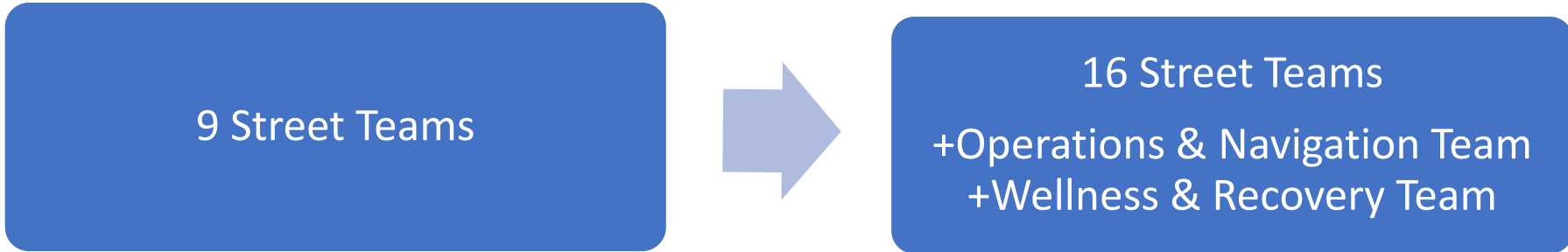
- Behavioral Health Bridge Housing (BHBH)
 - Contracted with two consultants to support early implementation
 - Contracted with Brilliant Corners to administer the BHBH program and DMH's current interim housing portfolio
- Hollywood 2.0
 - Fountain House - Clubhouse Program
 - Anew Dawn – Highly Enriched Residential Care Services
 - RAND – Evaluator
- Interim Housing Outreach Program (IHOP)
 - Regents of California Los Angeles/California Policy Lab- Evaluator

Hiring:

- Emergency Appointments between January 1, 2023 and August 15, 2024 :
 - Approved Ordinance Position Authority – 290
 - DMH hired/promoted– 503
 - Countywide Engagement Division – 165 staff
 - Housing and Job Development Division -23 staff
 - Approved Special Step Placements – 23

Expansion of Homeless Outreach & Mobile Engagement (HOME)

Expanded the **HOME** program by **107** FTE positions



Year	Total Served	Housed	5150s	Conservatorships
2023	1919	428	196	80
2024 YTD	1888	346	138	73



Operations & Navigation team is responsible for managing planned admissions and bed management

Wellness & Recovery team is responsible for preventing individuals from falling through the cracks and supporting transitions to lower levels of care.

▶▶ Creating the Hollywood 2.0 Ecosystem

New Service Model

- Hollywood Mental Health Cooperative

New Housing Resources

- 102 Interim Housing Beds (Mark Twain & Hollywood Walk of Fame)
- 100 Adult Residential Care Facility subsidies
- 50 Permanent Supportive Housing vouchers

New Programs

- Clubhouse
- Highly Enriched Residential Care Services

Coming Soon...

- Supported Employment – RFP Proposals Due on 8/22/24
- Psychiatric Urgent Care w/Peer Respite



Interim Housing Outreach Program (IHOP)- A Collaborative Approach

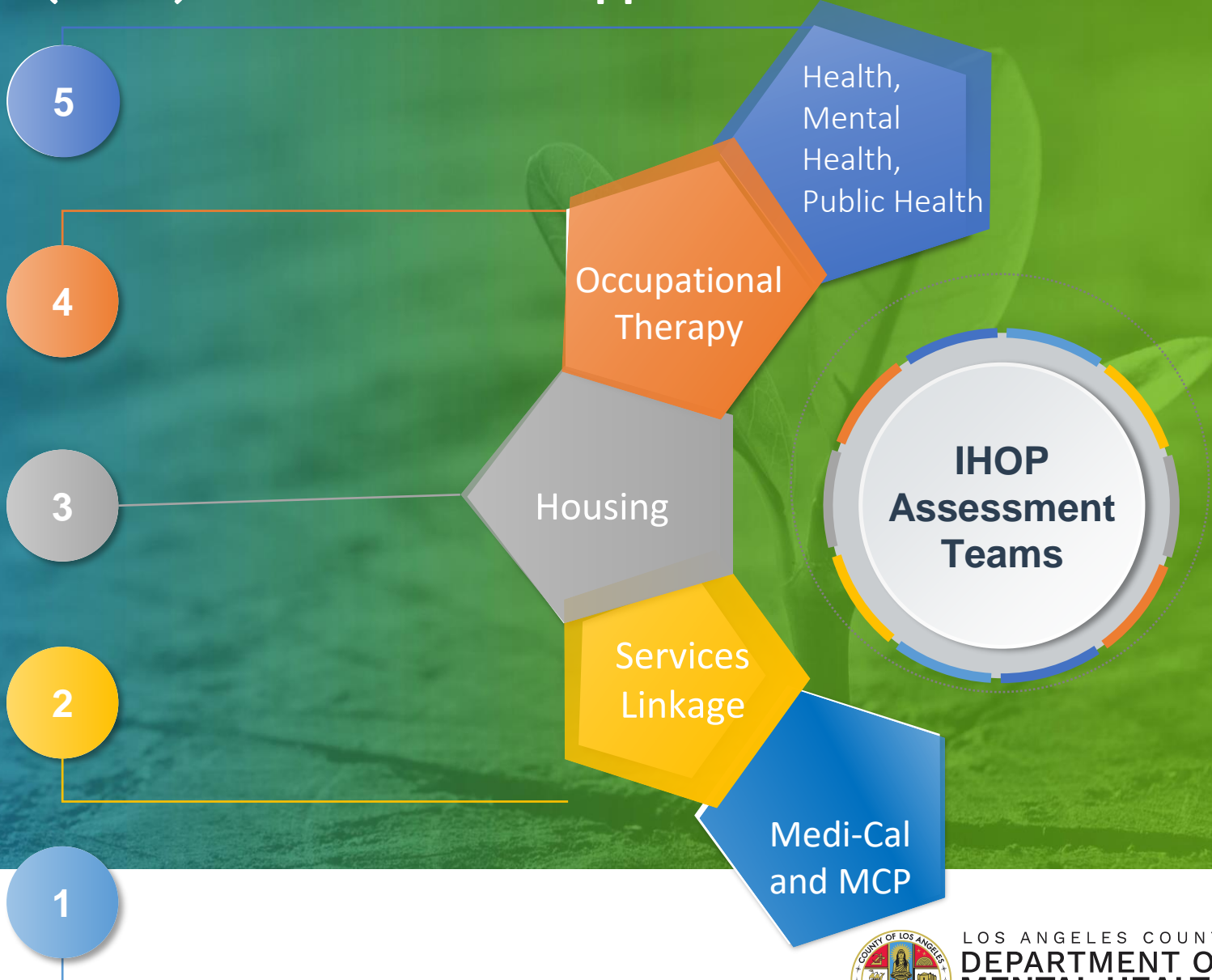
LA County Departments working together in collaboration

Critical supports during the assessment/stabilization process to ensure maximal function and safety for those with ADL deficits

Getting people connected to DHS' Housing Navigation services allow people to get document ready and assessed in CES or be referred for Enriched Residential Care if needed

Services include linkage to primary care (inc. mobile clinics), CBEST, mental health/SUD services

Linkage and referral to Medi-Cal, authorization for personal care and homemaker services and housing navigation services, and care coordination



Funded by the Mental Health Services Act and Homeless and Housing Incentive Program (HHIP)



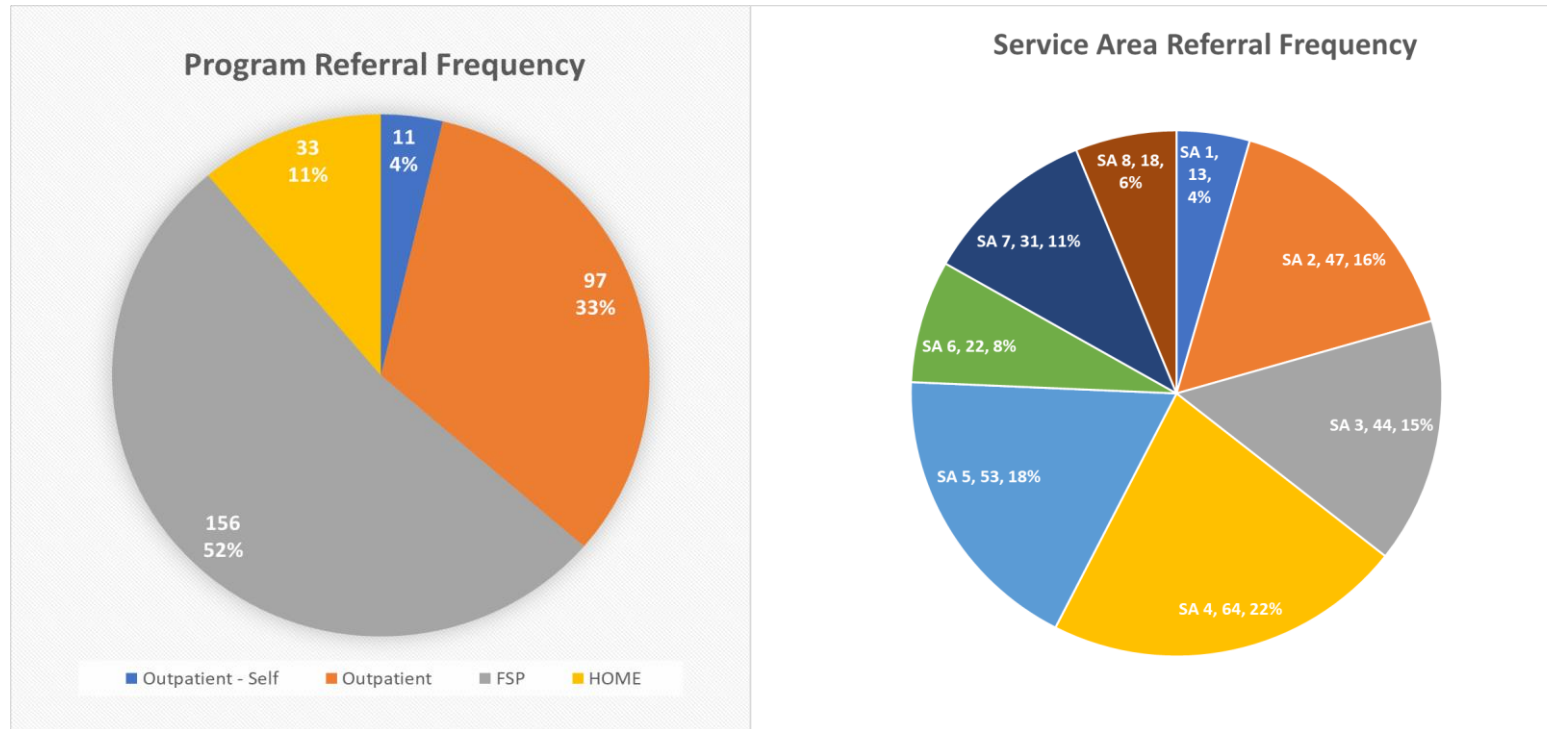
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Universal Entry Portal

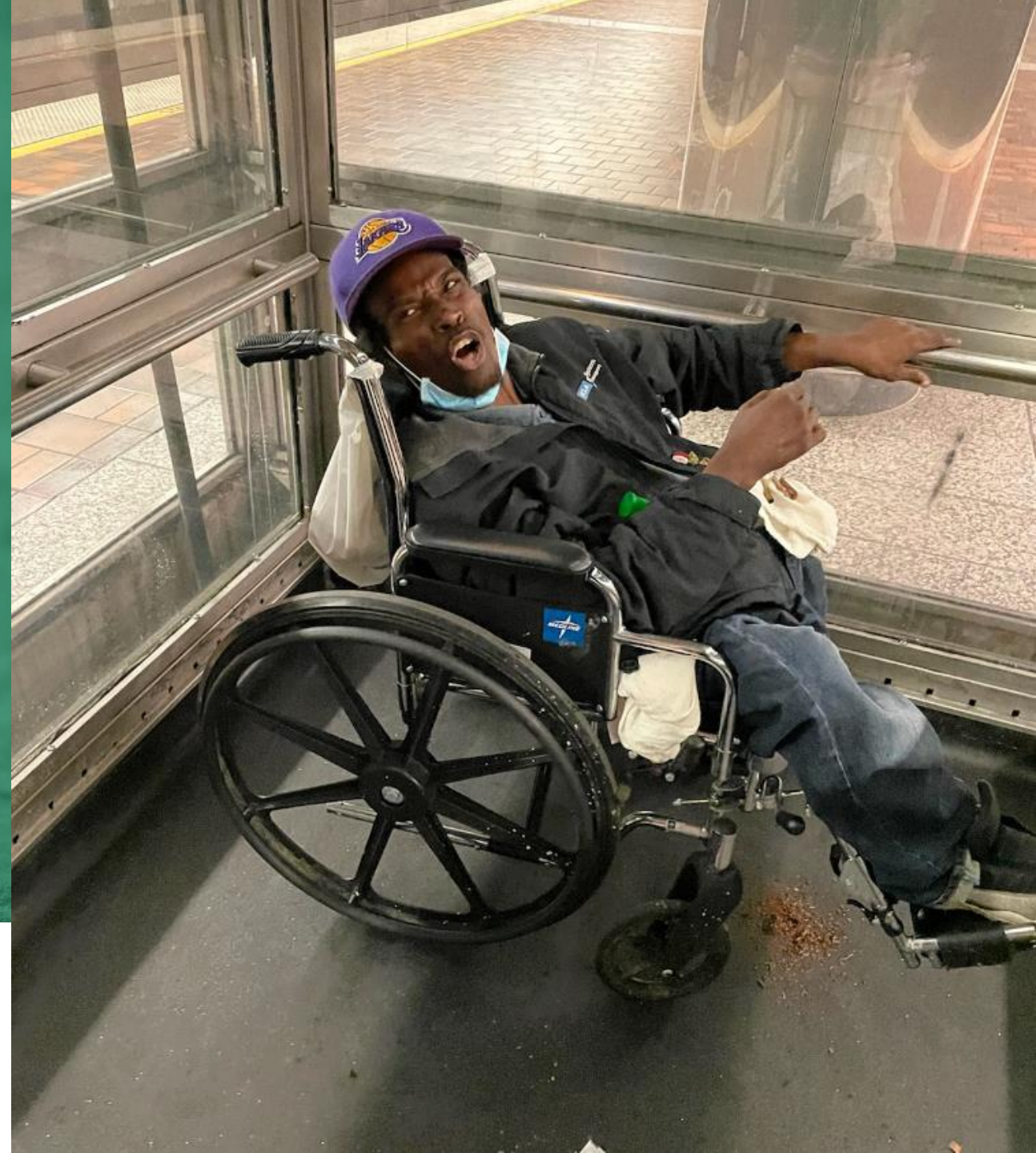


- Stems from demand for Homeless outreach workers (from Metro, LAHSA, City of LA) to have a “direct referral pathway” into DMH
- The Outreach Worker Referral (OWR) screening tool was developed. Street outreach workers complete the OWR tool with information they know about the client
- The information provided in the questionnaire determines the most appropriate DMH program (Crisis, HOME, FSP, Outpatient) for the client using a built in algorithm
- The referral information is then transferred/sent to the appropriate program to follow up with the client

▶▶ Status of Referrals (May 9 – September 2)



- Victim of gun violence as adolescent
- Left paraplegic, requiring catheter and colostomy bag
- Developed psychotic illness in his 20s
- Paranoid, suspicious, delusional belief he is Kobe Bryant
- Leaves family, leaves care facilities
- Becomes homeless
- Refuses all offers of service and resources from outreach workers
- He's Kobe, he's rich and famous, he doesn't need help
- Eventually stops caring for himself effectively
- Develops bedsores and ulcers



Before HOME Involvement

Services Provided in 2020	Cost
Fire Department: 200 calls at \$1000/call	\$200,000
St. Joseph's ED: 33 visits at \$6,145.76/visit	\$202,810
Cedars, Tarzana, and Holy Cross EDs: 77 visits	\$470,223
ED visits at other facilities: 100 \$6,145.76/visit	\$614,576
Limb Amputation	\$121,294
One Year Total Prior to HOME	\$1,608,903

With HOME Involvement Structured Placement

Services Provided in 2023	Cost
Psychiatric Skilled Nursing Facility: \$249/day	\$90,885
Current Yearly Total	\$90,885

With HOME Involvement Step Down to Enriched Residential Care

Services Provided in 2023	Cost
Enriched Residential Care Facility: \$157.68/day	\$57,553.68
Current Yearly Total	\$57,553.68



