

# HOUSING FOR HEALTH

LOS ANGELES COUNTY DEPARTMENT OF HEALTH SERVICES  
January 2018



Health Services  
LOS ANGELES COUNTY

**CHERI TODOROFF, DEPUTY DIRECTOR**  
ctodoroff@dhs.lacounty.gov

# 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**

# POPULATION

- Homeless individuals with physical and/or behavioral health conditions, high utilizers of public services, and other vulnerable populations.

# CONTINUUM OF SERVICES

---

- **Street Based Engagement**
- **Interim Housing**
- **Rapid Re-Housing**
- **Permanent Supportive Housing**
- **Benefits Advocacy**
- **Sobering Center**

# **STREET BASED ENGAGEMENT**

---

- **Multi-Disciplinary Teams including mental health clinician, nurse, substance use disorder counselor, outreach worker and peers.**
- **C3 launched in January 2016 in Skid Row**
- **Expanded to serve specific communities**
- **Homeless Initiative supported expansion countywide in each Service Planning Area**

# INTERIM HOUSING

---

## **Recuperative Care**

- Provides short-term care for homeless clients who are recovering from an acute illness or injury or have a condition that would be exacerbated by living on the street or in shelter
- Program offers temporary housing, medical and mental health monitoring, meals, case management, and transportation

## **Stabilization Housing**

- Provides short-term housing and support for homeless clients who are moving into permanent housing soon
- Program offers temporary housing, meals, case management, and transportation

# PERMANENT HOUSING

---

## **Permanent Supportive Housing**

- Permanent housing with rental subsidies and on-site/mobile supportive services for homeless clients with complex health and/or behavioral health conditions

## **Rapid Re-Housing**

- Time limited rental assistance and targeted supportive services for clients with low to moderate housing barriers

# COMPONENTS OF HFH PERMANENT HOUSING

---

## HFH Permanent Housing includes:

- Rental Subsidies (Flexible Housing Subsidy Pool and Federal subsidies)
- Project based housing or housing navigation for scattered site housing
- Intensive Case Management Services

# INTEGRATED SERVICES IN PSH

---

- **DHS – Intensive Case Management Services (All clients)**
- **DMH – Housing Full Service Partnerships (~1/3 of clients)**
- **DPH SAPC – Substance use disorder outreach, assessment and service navigation (~1/3 of clients)**

# INTENSIVE CASE MANAGEMENT SERVICES (ICMS)

---

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

# **COUNTYWIDE BENEFITS ENTITLEMENT SERVICES TEAM (C-BEST)**

---

- **C-BEST provides SSI, SSDI, and Veteran benefits advocacy services to individuals who are homeless or at risk of homelessness.**
- **Services are provided in community based locations in all Service Planning Areas and in DPSS offices. Services will also be provided in County custody facilities.**
- **C-BEST will assist with the submission of 10,000 applications annually.**

# SOBERING CENTER

---

- **24/7 facilities that provide safe, short term monitoring and management of persons under the influence of alcohol and drugs.**
- **Sobering centers provide an alternative destination for law enforcement and fire departments to send people whose primary presenting issue at the time of contact is severe intoxication rather than an acute medical crisis. Clients are also referred into sobering centers by street outreach teams and hospital emergency rooms.**
- **The Dr. David L. Murphy Sobering Center in downtown Los Angeles opened in January 2107.**

# 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

## 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*