

**LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH**  
 Community Planning Process – MHSA Three-Year Program and Expenditure Plan, 2024-2026  
 Community Planning Team – Workgroup Recommendations

**BACKGROUND**

This document contains the recommendations from the Community Planning Team’s four Workgroups:

- A. Community Supports Continuum (CSC)
- B. Homeless Services and Housing Supports (HSHR)
- C. Prevention and Early Intervention (PEI)
- D. Workforce Education and Training (WET)

The recommendations are organized into two types:

- A. Program, Service, or Intervention (PSI) Recommendations:
  - 1. Exists Already: Expand and/or Improve Existing PSI
  - 2. Does Not Exist: Add New PSI
- B. Policy, Practice, and/or Advocacy Recommendations

The last column in each table color-codes each recommendation based on its status in the following manner:

<b>COLOR</b>	<b>DESCRIPTON</b>
<b>GREEN</b>	DMH or partner agency is already doing this work, ongoing funds are already appropriated, and/or additional funds can be appropriated.
<b>RED</b>	MHSA regulations prohibit funding this recommendation, the recommendation is outside of the DMH’s authority, or the recommendation was not clear. CPT members can still advocate for these recommendations, but they cannot be funded by MHSA.
<b>YELLOW</b>	DMH needs Workgroup members to provide additional feedback.

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**HOMELESS SERVICES & HOUSING RESOURCES (HSHR)**

**BACKGROUND**

This section contains the recommendations of the HSHR Workgroup for each of the following categories:

<b>CATEGORIES</b>	<b>GOALS</b>
1. Eviction Prevention	<i>Strengthen eviction prevention services and supports.</i>
2. Street Outreach	<i>Strengthen street outreach.</i>
3. Service Quality	<i>Improve service quality.</i>
4. Types of Housing Options	<i>Increase types of housing options.</i>
5. Specific Populations	<i>Provide targeted support to specific underserved populations.</i>

**A. PROGRAM, SERVICE, AND/OR INTERVENTION RECOMMENDATIONS (PSI)**

1. EXISTS ALREADY: Expand and/or Improve Existing PSI

<b>CATEGORY</b>	<b>EXISTING PSI</b>	<b>DESCRIPTION: PROGRAM, SERVICE, OR INTERVENTION</b>	<b>EXPAND OR IMPROVE</b>	<b>ADDTL FUNDS</b>	<b>STATUS</b>
1	Preventing Homelessness & Promoting Health	1. Expand the Preventing Homelessness and Promoting Health (PH Square) collaborative program with Department of Health to provide psychiatric, medical, and other social service interventions to prevent imminent eviction.	Expand	YES	Q1
1	Full Service Partnerships	2. Provide flex funds for enrolled clients which can be used for eviction prevention and improve FSP to include life skills training to prevent eviction.	Improve		

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CATEGORY	EXISTING PSI	DESCRIPTION: PROGRAM, SERVICE, OR INTERVENTION	EXPAND OR IMPROVE	ADDTL FUNDS	STATUS
1	Interim Housing – Outreach Program	3. Provide mental health supports for interim housing sites to reduce exits to the streets (eviction) and increase movement to Permanent Supportive Housing (PSH) through an integrated approach. (This is also a job training opportunity for Peer Specialist positions.)	New Service January 2024		
1	Housing Support Services Program (HSSP)	4. Expand HSSP services in PSH units in collaboration with Department of Health Service’s Intensive Case Management Services providers and Department of Public Health’s Client Engagement and Navigation Services. When new PSH buildings open, services providers are contracted to render these services.	Expand		
1	Housing Services	5. Expand permanent congregate housing with on-site peer supportive services.	Expand	YES	Q2
1	Housing Assistance Program	6. Provide financial assistance to DMH clients of one month of unpaid rent, based on an individualized client plan for self-sufficiency.	Expand		
2	SKID ROW Concierge Program	7. This program provides street-based engagement and support to connect to mental health treatment and housing for individuals experiencing unsheltered homelessness in the skid row area.	Expand		
2	HOME	8. Expand HOME to increase street outreach to individuals with serious and persistent mental illness (SPMI) and to fill the need of new programming (e.g., Interim Housing Outreach Program)	Expand		
2	PMRT	9. PMRT (Psychiatric Mobile Response Team) provides field-based crisis services. Expand PMRT to include contracted Field Intervention Teams that are designated to respond to mental health crises of individuals in various types of housing.	Expand		
2	Community Health Promoters (CHWs)	10. Utilize CHWs to increase awareness about mental health issues and to disseminate resources to reduce mental stigma and improve working relationships within the community in order to deliver mental health services. Expand this program to include work in public spaces including libraries.	Expand	YES	

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CATEGORY	EXISTING PSI	DESCRIPTION: PROGRAM, SERVICE, OR INTERVENTION	EXPAND OR IMPROVE	ADDTL FUNDS	STATUS
3	Housing Data Collection Infrastructure	11. Improve infrastructure to support better data collection of homelessness and housing data that can be used to improve programs via Housing and Homelessness Incentive Program (HHIP).	Improve		
3	Mental Health Support	12. Provide mental health support in shared housing and traditional housing.	Expand	YES	
3	Peer Services	13. Use Peer Services for social supports and navigating benefits and paperwork available in Peer Run Centers, MHTSA Outpatient, and FSP programs.	Expand	YES	
3	Peer Run Respite Care Homes	14. Provide Peer Run Respite Care to support individuals in crisis to prevent homelessness.	Expand	YES	
4	Interim Housing Beds	15. Create new interim housing beds, enhance staffing/services in existing non-congregate interim housing sites, and provide CARE Court clients with rental assistance resources by accepting Behavioral Health Bridge Housing (BHBH) funding from the State. Expand interim housing in high need areas such as Skid Row.	Expand		
4	Interim Housing Families	16. Increase interim housing resources for families.	Expand		
4	Enriched Residential Care (ERC) & Board and Cares (B&Cs)	17. Increase access for Persons Experiencing Homelessness (PEH) to ERC and licensed residential care facilities by accepting funds in Community Care Expansion (CCE) State subsidies to ERC and provide funds for all licensed residential care facilities.	Expand		
4	Hollywood 2.0 - Interim Housing, ERC, & PSH	18. Continue current pilot of community-inclusive programming to support, treat, and house individuals in the Hollywood area.	Expand		
4	Dedicated Hotel/Motel Beds - HOME	19. Expand dedicated hotel/motel beds for Homeless Outreach Mobile Engagement (HOME), which provides street outreach for individuals who may need extensive engagement and support. This includes reentry programs for women and men.	Expand	YES	

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CATEGORY	EXISTING PSI	DESCRIPTION: PROGRAM, SERVICE, OR INTERVENTION	EXPAND OR IMPROVE	ADDTL FUNDS	STATUS
4	Permanent Supportive Housing	20. Expand Permanent Supportive Housing (PSH) across LA County	Expand		
4	Beds for Very Vulnerable Individuals	21. Provide housing in a home setting for up to 6 young adult males diagnosed with serious mental illness that face housing insecurity and are unable to live independently, grouped by same age range and same diagnosis (schizophrenia) in a supportive home model with 24/7 trained staff in the LEAP method and in-house holistic program that stimulates motivation, engagement and provides improvement in behavioral and physical health through nutrition, music and nature outings, besides job coaching to create purpose in staying well. The supportive housing model creates a social community where they can grow in trust and confidence and forge friendships, and the model also provides a sense of belonging and community, reducing the isolation and stigma that people with serious mental illness face.		YES	Q3
5	Transition Age Youth (TAY)	22. Expand TAY housing and service options including shelters, interim housing, and PSH, focused on youth transitioning from child welfare and probation systems	Expand	YES	
5	Justice Involved - Office of Diversion and Reentry	23. Support the Office of Diversion and Reentry (ODR) to fund Intensive Case Management Services (ICMS), Interim Housing, Enriched Residential Care (ERC) and Permanent Supportive Housing for individuals who are homeless, have a Serious Mental Illness and are incarcerated at LA County Jail. Incentivize psychiatrists, including with loan repayment programs at DMH and DHS to work with this population. Also ensure parity of pay for psychiatrists at DMH, DHS, VA and other County programs.	Expand		
5	Justice Involved - Care First Community Investment	24. Expand the Care First Community Investment (CFCI) model of interim housing for those with justice involvement to other sites.	Expand		
5	Justice Involved - Women's Community Re-entry	25. Expand hotel/motel beds that will serve as interim housing for Women's Community Re-Entry Program clients.	Expand	YES	

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CATEGORY	EXISTING PSI	DESCRIPTION: PROGRAM, SERVICE, OR INTERVENTION	EXPAND OR IMPROVE	ADDTL FUNDS	STATUS
5	LGBTQIA & Transgender	26. Expand or create housing settings specific to Transgender communities and provide extended hours to meet needs.	Expand		
5	BAH + UsCC: Utilities Support	27. Ensure funding for support services i.e. utilities for the Black and African Heritage (BAH) and other underserved communities	Expand		
5	Undocumented Clients – Interim Housing	28. At interim housing sites, increase staff capacity to provide culturally and linguistically appropriate services for undocumented clients and mental health support. IHOP will be implemented in 2024.	Improve		
5	Senior older adult population	29. All types of housing and housing that meets their unique needs including related to deteriorating physical and mental health.	Improve		

2. DOES NOT EXIST: Add New PSI

CATEGORY	DESCRIPTION: NEW PROGRAM, SERVICE, OR INTERVENTION	DMH OR PARTNER	ADDTL FUNDS	STATUS
1	1. Develop and implement trainings and materials focused on eviction prevention and available resources to train <u>mental health providers</u> to assist and educate clients at all levels of care. This includes information on community resources, legal services, and first-time homeowner programs.	Partner	YES	
1	2. Develop and implement trainings and materials on working with individuals with mental health needs for <u>landlords, law enforcement, and others</u> involved in the eviction process.	Partner	YES	
1	3. Develop rehabilitation and skill-building groups focused on helping consumers to maintain housing (e.g. budgeting, communication with property owners, being a good neighbor, employment etc.) as part of the service array in DMH clinics and contract agencies.	DMH Partner	YES	

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CATEGORY	DESCRIPTION: NEW PROGRAM, SERVICE, OR INTERVENTION	DMH OR PARTNER	ADDTL FUNDS	STATUS
1	4. Develop a <u>countywide eviction prevention program</u> that has a central phone number for support, provides training for law enforcement and landlords and property managers on working with mental health issues and available resources, helps individuals access eviction prevention funds available through county programs, and provides life skills trainings in the community.	Partner	YES	Q4
1	5. Develop a <u>housing resources landing page</u> on the DMH website that lists information on how to access all available resources for eviction prevention, housing support, and/or services related to housing retention.	DMH	YES	
1	6. Develop and implement a comprehensive <u>communication strategy</u> that informs clients about housing resources. This communication strategy would include Community Health Workers (e.g., <i>Promotoras</i> and Peer Specialists) in delivering this information.	DMH	YES	
2	7. Develop and implement trainings and resource materials focused on <u>finding resources in the community</u> (e.g., sobering centers, <i>SafeParkingLA</i> , mobile showers, housing resources).	Partner	YES	
2	8. Develop and implement trainings and materials for improving <u>coordination of care among service teams</u> and passing out the available resources in the various levels of care including interoperability with public safety. Ensure there is an investment in technology and a centralized system.	DMH	YES	
2	9. Develop <u>PMRT Team</u> dedicated to the <u>skid row area</u> and other areas where PEH are concentrated to improve mental health crisis response time.	DMH	YES	Q5
2	10. Develop and implement programs that assign mental health treatment and peer services staff to places where PEH are located including shopping centers and local libraries to treat and support library patrons experiencing homelessness.	DMH	YES	Q6
2	11. Incorporate mobile showers as part of the services provided by DMH Street Outreach by partnering with existing CBOs including the faith community that manage these resources.	DMH		
2	12. Develop public education about Senate Bill 43 which modernizes the definition of grave disability and probable cause for conservatorship. The bill broadens eligibility to people who are unable to provide for their personal safety or necessary medical care. In addition, Senate Bill 43 encompasses people with a severe substance use disorder, such as chronic alcoholism. Incorporate the new definition in HOME services in Los Angeles County if permissible. This should be done as an anti-stigma campaign to ensure we do not further stigmatize people.	DMH	YES	Q7

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CATEGORY	DESCRIPTION: NEW PROGRAM, SERVICE, OR INTERVENTION	DMH OR PARTNER	ADDTL FUNDS	STATUS
2	13. Develop safe sleep programs.	DMH	YES	Q8
2	14. Develop stationary hubs (centralized services) so there is a direct pipeline to DMH in the community including transportation with wheelchair access.	Partner	YES	Q9
3	15. Develop a one-stop online site that centralizes information about housing resources.	DMH & Partner	YES	
3	16. Develop or integrate into an existing program training and support for landlords and housing developers on working with and the needs of individuals with mental illness (e.g., implicit bias training).	Partner	YES	Q10
3	17. Implement or partner with services providing supports to adult children with SMI to improve access to support groups such as NAMI, and respite care options.	Partner	YES	Q11
4	18. Develop a damage mitigation pool of funding to repair damage in interim and permanent housing to repair damage by DMH clients.	DMH & Partner	YES	Q12
4	19. Use a community land trust model building upon innovative solutions presented in the Alameda County Supportive Housing Community Land Alliance Project Proposal to bring permanent affordability and community control to help ease Los Angeles County's housing crisis for SMI consumers whose income is 200% of the federal poverty level.		YES	Q13
4	20. Implement independent living centers and supports to increase the ability to live independently.		YES	Q14
5	21. <u>Justice-Involved and/or Undocumented Clients</u> : Support the Legacy Flexible Housing Subsidy Pool (FHSP) Program that provides ongoing rental assistance to clients who are homeless and do not qualify for federal housing subsidies due to their documentation status or type of felony offense (e.g., Registered Sex Offenders).	Partner		Q15
5	22. <u>Justice-Involved Clients</u> : Continue the operation of Interim Housing beds for those with justice involvement funded with CFCI dollars when the funding source terminates on June 30, 2024.	DMH		Q16
5	23. <u>Justice-involved Clients</u> : Establish dedicated interim housing beds for formerly incarcerated clients served through the Men's Community Reentry Program.	DMH		Q17
5	24. <u>Veterans</u> : Implement awareness campaign to improve access to housing resources for veterans.	Partner	YES	Q18
5	25. <u>TAY, LGBTQ, Transgender, Domestic Violence, and Older Adults</u> : Develop or expand existing housing <u>resource guides</u> to identify housing available to specific populations.	Partner	YES	Q19



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CATEGORY	DESCRIPTION: NEW PROGRAM, SERVICE, OR INTERVENTION	DMH OR PARTNER	ADDTL FUNDS	STATUS
5	26. <u>LGBTQIA</u> : Invest in housing specific to LGBTQ community.	Partner	YES	Q20
5	27. <u>Low-Income People Not Meeting the Definition of Homeless</u> : Increase MHSa funds for the Flexible Housing Subsidy Pool which can be used for rent subsidies in a variety of housing types, such as licensed care facilities, for individuals who do not meet the definition of homeless but do not have the income to move to other forms of housing such as licensed residential facilities. This Flexible Housing Subsidy Pool can help create more flow for special populations across different housing types.	DMH	YES	Q21
	28. Utilize a comprehensive, community-based approach, leveraging existing strengths to provide housing, a coordinated continuum of culturally competent health services, employment support and other recovery support services tailored to the needs of African immigrants, refugees and underserved populations experiencing homelessness in Los Angeles County, California.		YES	Q22

**B. POLICY, PRACTICE, AND/OR ADVOCACY RECOMMENDATIONS**

CATEGORY	DESCRIPTION: POLICY, PRACTICE OR ADVOCACY	STATUS
1	1. Integrate mental health needs/practices into the current eviction practices/protocols.	Green
1	2. Use tools like the CEO Equity tool to identify specific geographic areas of need within each Service Area and to target specific underserved populations when implementing and/or expanding programs.	Green
1	3. Address the high cost of living.	Red
1	4. Improve law enforcement response to avoid losing housing.	Red
1	5. Provide restorative housing.	Red
1	6. Increase homeownership opportunities.	Red
2	7. Tap into some of the models in West Hollywood, homeless outreach teams, collaboratives with different organizations including The People Concern/Step Up on Second/Tarzana Treatment Center/etc.	Red
2	8. Involve community leaders and CBOs with funding to outreach and relate to these sites.	Green
2	9. Identify existing community services and advocate for more services, such as safe parking and mobile showers. Collaborate with those in the community that provide these resources.	Green

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<b>CATEGORY</b>	<b>DESCRIPTION: POLICY, PRACTICE OR ADVOCACY</b>	<b>STATUS</b>
2	10. Help individuals with substance use disorders to accept housing in real time.	
2	11. Provide better support and training for peer specialists who support street outreach work.	
2	12. Provide better assistance to individuals that are homeless to get access to hot food and to find adequate housing.	
2	13. Add peer support across all programs.	Q23
2	14. Strengthen hiring and selection processes and reduce barriers for people with lived experience. Provide opportunities for CHW to meet to collaborate together and identify and advocate for training and supports needed.	
2	15. Implement resource fairs and collaborate with the community.	
2	16. Hire staff that are reflective of the communities served and ensure cultural and linguistic competence and provide training on implicit bias.	
2	17. Implement client satisfaction surveys across programs use that information to improve programs/services.	
2	18. Develop a structured approach to support individuals that have “failed” in many different programs and to coordinate across programs.	
2	19. Collect and analyze 911 usage for PEH issues.	
3	20. Integrate a housing navigator focused on supporting the Fire Department and EMS to avoid unnecessary emergency room visits for clients who qualify for housing supports.	
3	21. Promote awareness and access to benefits establishment services available throughout LA County	
3	22. Establish an oversight committee which is community-based and peer-led to assure and improve accountability for contract providers	
3	23. Remove barriers such as requirement of referrals to programs (allow self-referrals), verifications of identity (in forms of ID’s and/or certificates) for homeless individuals seeking housing services/supports.	
3	24. Improve timely access to temporary and permanent housing, and reduce bureaucratic barriers	
3	25. Improve safety in housing units and ensure housing developers include 24-hour security when underwriting projects. People that are providing security should be trained on de-escalation and trauma informed responses.	Q24
3	26. Enhance staffing/services in existing congregate interim housing sites.	Q25
3	27. Provide training, GED classes and employment opportunities.	
3	28. Implement customer satisfaction surveys	
3	29. Focus on client driven goals.	

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<b>CATEGORY</b>	<b>DESCRIPTION: POLICY, PRACTICE OR ADVOCACY</b>	<b>STATUS</b>
3	30. Increase self-sufficiency and independent living skills especially while in shelters.	
3	31. Collect performance measures and provide incentives for workers that are burned out.	
3	32. Train staff on how to develop quality SSI applications that will be approved.	
4	33. Contain costs per bed at less than \$100K.	Q26
4	34. Eliminate site control to expand types of housing.	Q27
4	35. Provide relentless engagement.	
4	36. Reduce bureaucracy to access housing.	
4	37. Ensure supportive services in PSH are adequate and focused on self-sufficiency.	
4	38. When DMH has resource fairs include housing resources.	
4	39. Ensure there is throughput between different types of housing including pathways out of shared housing settings.	
4	40. Inform PEH about peer support job opportunities.	
5	41. Strengthen communication between DMH's Enhanced Emergency Shelter Program staff and other providers of TAY Interim and Transitional Housing and improve connection to mental health and housing services for the youth in these settings.	
5	42. Establish funding for African American (AA) population to own/lead interventions related to their communities outside of faith-based groups.	Q28
5	43. Strengthen coordination with DCFS and Probation.	
5	44. Increase access for both documented and undocumented clients.	

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**HSHR WORKGROUP – CONSENSUS**

CPT Recommendations/MHSA Proposals Needing Additional Feedback

QUESTION	DESCRIPTION: RECOMMENDATION OR PROPOSAL	% STRONG OR VERY STRONG	ACTIONS
Q1	Expand the Preventing Homelessness and Promoting Health (PH Square) collaborative program with Department of Health to provide psychiatric, medical, and other social service interventions to prevent imminent eviction.	92%	CONSENSUS: Leave as is
Q3	Provide housing in a home setting for up to 6 young adult males diagnosed with serious mental illness that face housing insecurity and are unable to live independently, grouped by same age range and same diagnosis (schizophrenia) in a supportive home model with 24/7 trained staff in the LEAP method and in-house holistic program that stimulates motivation, engagement and provides improvement in behavioral and physical health through nutrition, music and nature outings, besides job coaching to create purpose in staying well. The supportive housing model creates a social community where they can grow in trust and confidence and forge friendships, and the model also provides a sense of belonging and community, reducing the isolation and stigma that people with serious mental illness face.	92%	ENDORSED: Adopted Consent agenda
Q2	Expand on <b>congregate housing (such as shared and permanent supportive</b> housing) with on-site peer supportive services. Develop glossary of key terms, such as shared housing; permanent supportive housing; congregate housing;	85%	CONSENSUS: Language change
Q14	Implement independent living centers and supports to increase the ability to live independently.	85%	ENDORSED: Adopted Consent agenda
Q16	Justice-Involved Clients: Continue the operation of Interim Housing beds for those with justice involvement funded with CFCI dollars when the funding source terminates on June 30, 2024.	85%	ENDORSED: Adopted Consent agenda
Q21	Low-Income People Not Meeting the Definition of Homeless: Increase MHSA funds for the Flexible Housing Subsidy Pool which can be used for rent subsidies in a variety of housing types, such as licensed care facilities, for individuals who do not meet the definition of homeless but do not have the income to move to other forms of housing such as licensed residential facilities. This Flexible Housing Subsidy Pool can help create more flow for special populations across different housing types.	85%	CONSENSUS: No change
Q23	Add peer support across all programs.	85%	ENDORSED: Adopted Consent agenda

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QUESTION	DESCRIPTION: RECOMMENDATION OR PROPOSAL	% STRONG OR VERY STRONG	ACTIONS
Q19	TAY, LGBTQ, Transgender, Domestic Violence, and Older Adults: Develop or expand existing housing resource guides to identify housing available to specific populations.	69%	CONSENSUS: Moved to Tier 1
Q17	Justice-involved Clients: Establish dedicated interim housing beds for formerly incarcerated clients served through the Men's <b>and Women's</b> Community Reentry Program.	77%	CONSENSUS: Moved to Tier 1 and language change
Q18	Veterans: Implement awareness campaign <b>targeting veterans and their families to address and target barriers to</b> improve access to housing resources.	77%	CONSENSUS: Moved to Tier 1 and language change
Q24	Improve safety in housing units and ensure housing developers include 24-hour security when underwriting projects. People that are providing security Should be trained on de-escalation and trauma informed responses.	77%	ENDORSED: Adopted Consent agenda
Q4	Develop a countywide eviction prevention program that has a central phone number for support, provides training for law enforcement and landlords and property managers on working with mental health issues and available resources, helps individuals access eviction prevention funds available through county programs, and provides life skills trainings in the community.	77%	ENDORSED: Adopted Consent agenda
Q5	Develop PMRT Team dedicated to the skid row area and other areas where PEH are concentrated to improve mental health crisis response time.	77%	ENDORSED: Adopted Consent agenda
Q28	Establish funding for African American (AA) population to own/lead interventions related to their communities outside of faith-based groups.	54%	CONSENSUS: Leave as is and move to Tier 2.
Q6	Develop and implement programs that assign mental health treatment and peer services staff to places where PEH are located including shopping centers and local libraries to treat and support library patrons experiencing homelessness.	69%	ENDORSED: Adopted Consent agenda
Q9	Develop stationary hubs (centralized services) so there is a direct pipeline to DMH in the community including transportation with wheelchair access.	69%	ENDORSED: Adopted Consent agenda
Q12	Develop a damage mitigation pool of funding to repair damage in interim and permanent housing to repair damage by DMH clients.	69%	ENDORSED: Adopted Consent agenda
Q13	Use a community land trust model building upon innovative solutions presented in the Alameda County Supportive Housing Community Land Alliance Project Proposal to bring permanent affordability and	69%	CONSENSUS: Leave as is

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QUESTION	DESCRIPTION: RECOMMENDATION OR PROPOSAL	% STRONG OR VERY STRONG	ACTIONS
	community control to help ease Los Angeles County’s housing crisis for SMI consumers whose income is 200% of the federal poverty level.		
Q25	Enhance <b>staffing and supportive services (such as, trauma informed training and job/employment support)</b> in existing congregate interim housing sites.	69%	CONSENSUS: Language change
Q7	Develop public education about Senate Bill 43 which modernizes the definition of grave disability and probable cause for conservatorship. The bill broadens eligibility to people who are unable to provide for their personal safety or necessary medical care. In addition, Senate Bill 43 encompasses people with a severe substance use disorder, such as chronic alcoholism. Incorporate the new definition in HOME services in Los Angeles County if permissible. This should be done as an anti-stigma campaign to ensure we do not further stigmatize people.	62%	ENDORSED: Adopted Consent agenda
Q8	Develop safe sleep programs.	62%	ENDORSED: Adopted Consent agenda
Q10	Develop or integrate into an existing program training and support for landlords, property managers and housing developers on working with <b>and addressing the needs</b> of individuals with mental illness (e.g., implicit bias training, <b>cultural awareness concepts and information on supportive programs</b> ).	62%	CONSENSUS: Language change
Q11	Implement or partner with services providing supports to adult children with SMI to improve access to support groups such as NAMI, and respite care options.	62%	ENDORSED: Adopted Consent agenda
Q20	LGBTQIA: Invest in housing specific to LGBTQ community.	62%	ENDORSED: Adopted Consent agenda
Q22	Utilize a comprehensive, community-based approach, leveraging existing strengths to provide housing, a coordinated continuum of <b>culturally and linguistic competent</b> health services, employment support and other recovery support services tailored to the needs of, <b>but not limited to, African heritage populations, indigenous immigrants</b> , refugees and <b>other</b> underserved populations experiencing homelessness in Los Angeles County, California.	62%	CONSENSUS: Language change
Q15	Justice-Involved and/or Undocumented Clients: Support the Legacy Flexible Housing Subsidy Pool (FHSP) Program that provides ongoing rental assistance to clients who are homeless and do not qualify for federal housing subsidies due to their documentation status or type of felony offense (e.g., Registered Sex Offenders).	54%	ENDORSED: Adopted Consent agenda

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QUESTION	DESCRIPTION: RECOMMENDATION OR PROPOSAL	% STRONG OR VERY STRONG	ACTIONS
Q27	Eliminate site control to expand types of housing.	31%	NO ACTION: Lack of understanding
Q26	Contain costs per bed at less than \$100K.	38%	CONSENSUS: Remove from recommendations