**HUMAN SERVICES GRANTS PROGRAM (HSGP)**

**FY 2021-22 PROGRAM STATUS REPORT**

Agency: \_\_The People Concern\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program: \_\_Access Center\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

###### FY 2021-22 SUBMISSION CALENDAR



**Instructions:**

* This document should be used by HSGP grantees to report on mid-year and year-end outcomes and accomplishments.
* All reports submitted to the City are considered public record. Please note that staff will use the information provided in the mid-year and year-end reports to provide Council and the public with summary reports of agency performance highlighting key outcomes, successes, findings and concerns.
* Some programs or agencies may be subject to additional or different reporting requirements per the program’s Exhibit A, Special Funding Conditions, of your executed Grant Agreement with the City.
* It is important, when preparing this report, to be familiar with the program’s Exhibit B, Program Plan, of your executed Grant Agreement with the City.
* Please insert responses in the spaces provided for Sections I-VII for both the Mid-Year and Year-End Program Status Reports.
* A separate Program Status Report must be prepared for each Program Plan specified in your contract.
* To submit your completed report to the City, upload the file to your agency’s SharePoint folder. A link to your agency’s SharePoint folder as well as instructions on how to use the site will be emailed to your staff separately

**SECTION I: PROGRAM ACCOMPLISHMENTS, CHALLENGES, AND CHANGES**

**Overview:**

For decades, The Access Center has served as a reliable source of essential services for people experiencing homelessness in Santa Monica. Located in downtown Santa Monica at 5th and Olympic, the Access Center serves members of the community who are most in need of assistance: those who are homeless, as well as living with severe mental and physical illnesses, struggling with substance use disorders, and suffering from the trauma caused by domestic violence.

The Access Center provides a full range of integrated services. It is the main point of entry for many of our clients and provides basic services to an average of 250 people daily. People experiencing homelessness can receive food, providing a steady source of nutrition to a population accustomed to food instability. Other resources, such as the Center’s phone services and the ability for clients to list the facility’s location as a personal address, can be essential when applying for housing or employment opportunities. A shower, laundry, and locker program (SWASHLOCK) helps clients maintain their hygiene and store their belongings, providing them with the freedom to leave their belongings in a secure location while they search for new housing or employment opportunities.

The People Concern views each of these services as an opportunity to build rapport with our clients, increasing the likelihood that they will access additional services, including those that lead to interim and eventually permanent housing. Our staff are dedicated to our mission of helping our clients rebuild their lives and provide them with both immediate services and long-term planning towards their personalized goals, as well as referrals to additional resources through the Center’s case management services.

**ACCOMPLISHMENTS**

**COVID-19:**

While the program has faced challenges in this reporting period due to the COVID-19 pandemic, the Access Center has adapted and maintained a safe and efficient way to continue providing services. While other organizations closed for several months, the Access Center quickly pivoted and implemented safety protocols while continuing to provide all of its needed services.

To protect the health of our clients and staff, the Access Center and SWASHLOCK uphold a variety of safety procedures including, but not limited to, the strict utilization of masks, social distancing, and sanitizing. While nearly all of our services have continued, the Access Center holds them in modified form and/or with reduced capacity to maintain social distancing. Clients coming to the Access Center are required to wear masks and if they do not have one, masks are provided to them while they are waiting in line for services. Clients are instructed to practice social distancing by using tape marking the ground at 6-foot intervals both inside and outside the Access Center. Staff are required to wear personal protective equipment (PPE) at all times. Disinfection occurs after every client contact, and a deep cleaning is conducted frequently. Finally, Department of Health Services outreach teams provide on-site weekly COVID-19 testing.

When state and local authorities relaxed safety and health requirements in the reporting period, staff at the Access Center began expanding services while continuing to take precautionary measures to protect clients and staff. To this end, case managers are now seeing clients on-site and in the field more regularly while utilizing phone appointments when that is the preferred method of engaging in services by the client or the safest way for a client to access services given their current health status. In addition, the Venice Family Clinic (VFC), which is co-located at the Access Center, utilizes phone or video appointments when necessary but can now see patients on-site and has increased their walk-in capacity. Patients are referred to the Rose Avenue Clinic or the VFC main office the following day if walk-in slots are filled or if they require a service that cannot be administered on site.

Some of our programs which were temporarily suspended during the pandemic have reopened this reporting period. For example, client groups are once again available. Each week, three groups are scheduled three times a week to provide clients a space to work on their individual needs with workshops that include substance use and harm reduction 101, life skills, and anger management (stress management), which provide clients with support in rebuilding their lives.

**Housing:**

The ultimate goal of all Access Center’s services is to support our neighbors in being housed, safe, and stable. To this end, Access Center Case Managers have diligently worked to place clients in interim and permanent housing. At year-end, 233 unduplicated individuals were enrolled in ongoing case management services or outreach engagement to begin their introduction to housing and housing resources, of which 136 were Santa Monica Program Participants (SMPPs). 41 of the 136 SMPP clients in case management and outreach were previously housed and are continuing to receive retention services through the agency in a collaboration between the Access Center and The People Concern’s Housing Department. 39 of the 41 individuals were able to successfully maintain their permanent housing status throughout this year. Of the two who did not maintain housing, one passed away while in housing and the other’s whereabouts are unknown. Of the remaining 95 participants, 49 were engaged in outreach services and 46 were enrolled in case management services. Eight of the 49 clients engaged in outreach services, eight were then enrolled into case management services, for a total of 41 clients in outreach services and 54 clients in case management. One client was switched from outreach to case management services, per their request (This client also affected the unhoused SMPP case management numbers, resulting in 28 participants in that program.) All 54 of the clients were offered referrals to interim housing. Of those 54, 11 SMPP were able to access permanent housing and 15 SMPP entered interim housing.

Of the remaining 69 unhoused SMPP clients, 41 continued to be engaged in outreach services and 28 participants were in case management. Our Outreach program entails outreach on a weekly basis to build rapport and provide resources. Of the 28 clients in case management, four clients are holding vouchers and are currently searching for apartments. Additionally, staff have worked with seven clients to complete Santa Monica Housing Authority (SMHA) applications, six of which were submitted to SMHA and the remaining one is in process of being reviewed internally for SMHA submission approval. Twelve clients are working with staff on gathering the necessary supporting documentation for the SMHA voucher application; three are in the early stages of engagement at this time.

Finally, the remaining five are ineligible for SMHA housing vouchers: two are undocumented individuals, one has since deceased, and two individuals self-exited the program before we could assist them in applying for a SMHA voucher. For our undocumented clients, the Access Center is currently working to assess their eligibility for other resources specifically for the undocumented homeless community. For example, The People Concern worked with an immigration attorney at Bet Tzedek, to initiate a partnership to overcome this systemic obstacle. The goal of this partnership is to provide training for staff to identify whether undocumented participants can achieve housing eligibility and how to support them in that process. With this support, one of the two undocumented clients was referred to Chagolla while the other was transferred to a different program.

Staff training on Department of Mental Health Interim Housing Program referrals have led directly to increased interim housing placements throughout the year. In addition, The People Concern’s Directors of Interim Housing provided training to the Access Center on their referral process into each of their sites, which provided greater clarity on our internal system and allowed our program to increase interim housing placements. In addition to providing skilled assistance to people experiencing homelessness, The People Concern provides the infrastructure and resources necessary for clients to apply for housing and employment, including a place where they can securely mail items. 2,208 participants were active in the mail program this fiscal year, of whom 537 were new enrollments.

The Access Center has participated in the City of Santa Monica’s Project Homecoming since its inception and makes all the arrangements for housing placement, transportation, and background checks. Three case managers are assigned daily as the designated staff to manage Project Homecoming clients and are able to mobilize quickly when a client expresses interest in accessing this resource. As a result, twenty-five confirmed individuals utilized Project Homecoming to secure housing with friends or family during the reporting period.

All clients were encouraged to take advantage of the LA County Winter Shelter program once it opened and were provided with the necessary information to do so. Staff use the LAHSA interim housing referral process to help clients find temporary placements when they are available. Access Center case managers conduct assessments for Project Room Key and refer eligible clients into the program. During this reporting period, 12 people were referred to Project Room Key, none of whom were SMPP. However, while the Project Room Key program did not place any SMPP this reporting period, its success with other clients demonstrates its potential to assist Santa Monica residents in the future. When a client is accepted into Project Room Key, our staff not only provides the direct linkage through transportation to the site, but additionally, they continue to provide ongoing case management for those clients.

The SPA 5 Coordinated Entry System (CES) has limited the eligibility for matches to housing resources to those clients with a minimum acuity score of 17 on the VI-SPDAT universal assessment tool, which makes it difficult to find permanent supportive housing for those who have lower acuity but are otherwise considered a fit for permanent supportive housing. To help address the challenges posed by the CES system, staff have undergone training for the CES survey and revision tools, allowing for more accurate VI-SPDAT scores that can prioritize clients most in need.

Staff have also worked to find alternative solutions for clients with low SPDAT scores. For example, the Access Center has implemented a new screening procedure for our problem-solving program. This program, which can prioritize clients in need of problem solving services, allows more clients to be classified as problem solving referrals in contrast to case management clients. This process allows the clients to be seen more quickly and decreases pressure on the already impacted CES system. Additionally, our staff work to find alternative housing resources for these clients, such as shared housing, family reunification, board and care homes, or skilled nursing facilities. As needed, staff reevaluate clients’ VI-SPDAT scores using LAHSA’s CES Score Revision Tool to ensure client acuity scores accurately reflect client’s current vulnerability and eligibility for permanent supportive

housing matches.

**Case Management Services:**

Case management services continue to be a highly sought after and necessary service, which the Access Center reliably provides. 233 program participants were enrolled in ongoing case management services. The agency continues to prioritize case management for Santa Monica Program Participants (SMPP), and at year-end had served 136 of the annual target of 168 SMPP’s (81 percent of the annual target). Eligible SMPP are prioritized and able to access case management services immediately, including all people referred by the City. The triage coordinator assists in scheduling case management appointments. The Outreach Case Manager works to engage and conduct intakes on SMPP clients, motivating them to come to the Access Center for services such as meals, showers, or VFC medical care as a first step to enrollment in case management. Case management services may be provided on the streets for individuals with physical barriers that keep them from entering the Access Center in order to ensure the most vulnerable are still able to begin their transition into permanent housing.

This reporting period, 95 unhoused individuals and 41 permanently housed individuals received case management services through the City of Santa Monica contract. The unhoused individuals are working towards accessing Section 8 vouchers as a long-term plan and interim housing placements in the short-term, as well as exploring opportunities through the City’s Project Homecoming program. They are also working with staff to obtain the required documentation (birth certificate, driver license, and proof of income), increase life skills, and to increase their income. 87 individuals in case management were screened for income development and 84 of the 87 individuals (over 97 percent) increased or maintained their income when they participated in the program.

When health and safety precautions allow, case management orientations are facilitated using proper safety protocols. In small, socially distanced, and masked groups, clients are asked to complete enrollment information and provide any documentation they may have available. Staff facilitate an integrated care triage process with all new clients in order to assess their mental health and to ensure clients receive any necessary referrals for mental health and psychiatric services. They learn how The People Concern will help them apply for housing and financial assistance, and what other services are available to support their transition into permanent housing, as well as achieving other personal goals. This may include obtaining identification, verifying their homeless status, screening for benefits eligibility, as well as other elements of housing readiness.

Case Management orientation was conducted for the first half of the year and was paused in October due to the increasing number of COVID outbreaks in the County. When case management orientation was paused, the program was restructured to bypass orientation. This process has allowed clients to enter the program more efficiently, enrolling more than ten clients per week. The program also expanded our problem-solving program in order to continue serving high-need clients. All clients are first assessed for the problem-solving program and screened for SMPP eligibility. Staff also accept direct referrals for case management from The People Concern’s C3 program and Venice Family Clinic. When COVID-19 cases declined, case management orientation resumed in April 2022 before being paused again after another outbreak in June. Since then, the program has once again bypassed the orientation and has utilized the problem-solving program in serving high-need clients. After receiving additional evidence regarding the efficiency of bypassing case management orientation, this change will become permanent.

**Wellness Program:**

Due to the relaxing of some public health and safety guidelines, the Access Center was able to restart socially distanced groups this fiscal year. These groups have a maximum of 8 participants at any given time and are facilitated at least once a week. These groups have proven to be highly effective in building individual housing preparedness and life skills, resulting in increased confidence and higher permanent housing retention rates. Currently, the Access Center offers groups related to substance use and harm reduction, how to acquire benefits, life skills, anger and stress management, HIV testing, and a resource table for clients interested in applying for their identification and birth certificates. Importantly, the Access Center has continued its housing readiness groups, which had previously been discontinued due to COVID-related staffing reductions. This program includes offering groups in which clients can obtain a voucher that covers the cost for a new identification card from the DMV, which is one of the requirements for housing placement.

Clients had previously used various resources throughout the City of Santa Monica (library, coffee shops) to plug in and charge their phones, but with the Public Health Orders in place, many of these locations closed their doors to our clients. Because The People Concern is aware of how vital having a phone is for clients in order to stay connected to services, family, and other resources, clients can now drop off their devices to be charged while they are accessing other services at the Access Center. By leveraging a grant for the Access Center, the agency was able to purchase high-end charging towers with the capacity to charge 10 phones and devices at a time. This resource had the double benefit of further connecting the program with vulnerable clients and providing them with the ability to maintain a charged phone at all times, a critical resource that could connect them to services and opportunities such as permanent housing and employment.

The Triage Coordinator offers referrals to resources including shelters, employment assistance, shared housing opportunities, and other resources that may be needed. This serves as a low-barrier entry into services for those who are not ready to commit to case management.

In response to the rapid spread of COVID, the Access Center collaborated with the Department of Health Services (DHS) to provide weekly on-site COVID testing. Every Monday morning, the DHS teams are stationed at the Access Center, providing walk-in COVID testing to those who are living on the streets, as well as staff. When positive results occur, clients are assisted with accessing referrals and transportation to Quarantine and Isolation (QI) sites. For those who decline the QI site, clients living on the streets are provided with instructions and PPE for quarantining away from others. Outreach teams encourage their clients, as well as those who show up for meals, showers and other services, to participate in testing. Hundreds of individuals have been tested through this clinic throughout the fiscal year.

**Medical Care:**

This reporting period, in partnership with Venice Family Clinic, 650 unduplicated patients received medical care at the Access Center. The capacity for walk-in patients increased over the course of the reporting period, although appointments can still be completed on the phone at the client’s request. Clients with COVID symptoms remain eligible to receive medical care on-site with proper safety measures in place, allowing the VFC to provide treatment for anyone who may be experiencing COVID without delay. If a patient needs to see a provider for another reason, the Access Center team is able to provide referrals and transportation to the VFC Rose Avenue clinic. During this reporting period, the Access Center established a Venice Family Clinic referral process for case management, wherein the Venice Family Clinic can directly refer patients into the program if a participant is not able to attend the case management orientation due to medical reasons.

To help maintain social distancing for the safety of our clients and staff, this reporting period the Access Center added a separate area for Venice Family Clinic to discharge clients. This discharge waiting area is located in the Access Center lobby and is able to have a maximum of 2 patients at a time.

Notably, along with The People Concern’s Samoshel Interim Housing program, the Access Center hosted COVID-19 vaccination and booster vaccination events in December and February, which were available to anyone in the community. These events successfully provided vaccinations for over 180 people. Additionally, the Access Center was fortunate enough to partner with Common Ground in 2021, enabling the program to provide free HIV testing twice a month during the first half of the fiscal year.

**Outreach and Engagement:**

The three-person Outreach Team at the Access Center consists of the Outreach Program Manager and two Outreach Case Managers. Each Case Manager is responsible for engaging specific SMPP individuals and maintaining a caseload. The Outreach Case Managers are primarily responsible for providing linkages and referrals to individuals, including re-connecting clients with their case managers from other programs. Additionally, these staff are primarily responsible for answering city referrals and coordinating services for the people on their caseload. The Outreach Case Manager position was created to increase the ability to collaborate with outreach teams, such as C3, E6, and Homeless Multi-Disciplinary Street Team (HMST), to engage SMPP clients to receive services at the Access Center. Since then, C3 and Access Center have established monthly team meetings to coordinate services, plan outreach, and direct referrals from C3. The engagement and case management of SMPP clients is the outreach team’s priority. In this reporting period, staff have established a direct referral process for SMPP clients from the C3 team to the Access Center, allowing for more efficient services to better serve our clients. Once engaged, outreach team members assist Service Registry clients as they complete the Santa Monica Housing Authority application, search for an apartment, and complete a lease. One of the Outreach Case Manager positions is currently vacant.

Due to staff vacancies and pandemic-related limitations, the Access Center’s outreach program currently exists in modified form. Outreach takes place three mornings a week, Monday, Wednesday, and Friday, from 8am to 11am. Clients are invited to come to the Access Center, but services can be delivered wherever the client is willing to engage in order to overcome barriers preventing them from coming into the Access Center. This is particularly important during the pandemic, when health and safety concerns can be a barrier to receiving services. The Outreach Case Manager uses evidence-based practices including Motivational Interviewing and Harm Reduction to support the clients’ focus on housing readiness. Outreach staff perform their duties while practicing social distancing and wearing all appropriate PPE. They also educate clients on the risks of COVID-19 and distribute masks, gloves, and hand sanitizer in an effort to reduce the spread of the disease.

The Access Center continues to seek opportunities to expand and innovate its outreach work. For example, this fiscal year the program redelegated some caseloads from outreach staff to case managers, which has allowed more time to be dedicated to outreach. To make outreach and engagement efforts more efficient and effective, staff have also developed a new SMPP targeted outreach strategy, which involves plotting the locations of all SMPP client referrals on a map and creating driving routes. These hot spot maps are continuously updated to reflect changes in clients’ locations whenever necessary. Alongside the maps, staff have created a new tracking system to more clearly organize clients on the outreach list and more efficiently deliver services.

Furthermore, the program continues to utilize the Akido Santa Monica Connect first responder service tool and is currently implementing it within our system. Staff also continues their monthly meetings with the leaders of the C3 and HMST outreach teams to improve collaboration and therefore improve outreach and engagement efforts. The Access Center shared the SMPP client referral list, which includes clients’ names and locations, so partner teams can be on the lookout for clients and provide updates on their locations. These partnerships will also improve the client referral and warm hand-off process. Finally, the Access Center received a request from the Santa Monica Police Department’s (SMPD) Homeless Liaison Team to provide outreach for a client. Since then, the program has been in contact with SMPD to increase collaboration, establish direct relationships, and expand impact.

As a result of above efforts and innovations, the agency enrolled more individuals under outreach and exceeded our objectives. This reporting period, the outreach team engaged a total of 67 unduplicated clients and had 633 contacts. The team also provided 32 transports for case-managed and outreach clients for to medical, mental health, and housing appointments.

**Mental Health:**

During this fiscal year, clinicians based at the Access Center provided Mental Health Services to numerous clients, consisting of 617 contacts overall, including 29 SMPP clients. These 29 SMPP received Integrated Care Tool assessments, linking them to mental health services. This accomplishment is especially noteworthy as DMH budget cuts recently reduced Access Center mental health staff from two to one during the first half of the reporting period, and from one to zero during the second half of the fiscal year. Notably, staff vacancies have limited the number of SMPP served by the Clinical Services Program (further explained the variance report). However, the program has begun to explore ways to utilize internal resources, including interns, to work between multiple sites for our high needs clients.

During the first half of the fiscal year, The People Concern’s mental health services were restructured into the Clinical Services program, allowing for more efficient service delivery. This program continues to provide mental health services to our clients at multiple sites, but now our Clinical Services program focuses on providing mental health services, including medication support, to unhoused clients, regardless of case management status. In contrast, housed clients are routed to case management services and referred to outside mental health resources for their ongoing mental health needs.

The Department of Mental Health (DMH) funded for a case manager who provided services to the Access Center for the first half of the fiscal year. This staff member provided needs assessments, goal planning, and personalized support with referrals to appropriate mental health services. This case manager served as a great asset during the first half of the fiscal year before being removed due to further DMH budget cuts during the second half of the reporting period.

**Food Services:**

Food is both a basic necessity we provide for those in need and an incentive for people to enroll in services. During this reporting period, 64,923 sack lunches and 1,653 bags of groceries were provided to clients. The food distribution at the Access Center has been in operation continuously every day since the start of the pandemic. These meals and groceries were especially critical for our homeless neighbors during this time when grocery chains and other community programs experienced disruption in services. Importantly, the Access Center has also incorporated an extra snack into our food services in response to client feedback. These snacks are nutritious and healthy, with the knowledge that dense meals are important to a community facing food insecurity.

During this reporting period, the grocery program has expanded its services and capacity. Due to the relaxation of some pandemic-related health and safety measures, the grocery program now utilizes volunteers and allows clients to enter the site to select their groceries, whereas during the Stay at Home Order, staff would package the products for them. With this development, clients have continued to enjoy access to produce, recipes, meal-oriented ingredients, and other household products.

**Hygiene Services:**

The SWASHLOCK program provides a place where clients can meet their hygiene needs. Clients are provided with the required necessities to shower, do laundry, and store their items. This serves as a major outreach tool to connect people to other agency services, including case management. Several lockers are reserved for clients who are not enrolled in case management but are employed and/or enrolled in school. This is an opportunity to assist clients to increase their income, which would ultimately allow them to afford housing without the need for enrolling in formal case management. During this reporting period, SWASHLOCK provided 12,776 showers and 1,563 laundry services, and 28 unduplicated clients were enrolled in the locker program.

While SWASHLOCK continued to operate every day during this reporting period in order to provide people with access to showers and laundry facilities, due to social distancing requirements the program has continued to see reduced numbers compared to pre-pandemic. During a two-month COVID outbreak, shower numbers were reduced by 50%, and laundry services and locker intakes were temporarily suspended. In addition, the men’s restroom was briefly shut down for plumbing and repairs. When clients could not be accommodated because of these restrictions, they continued to request to-go hygiene bags in order to meet their personal hygiene needs.

**Housing for Individuals with Low VI-SPDAT Scores:**

Those with low VI-SPDAT scores have relatively few options for services, as most services are prioritized for those with the highest acuity needs. Case managers have been encouraging these clients to apply for any affordable housing that they may qualify for, such as senior housing and tax credit buildings. Some low acuity clients have been able to reunify with friends and family for support as well, and staff make sure all are aware of Project Homecoming. Case Managers are exploring all options for housing with clients and are working with all of our clients to ensure they are accessing all benefits available to them. We connect those who are able to work to Chrysalis for employment opportunities, and we leverage LAHSA funding for staffing and flex funds under the Problem-Solving program to assist this population. Staff continues to encourage clients to utilize SHARE! Collaborative Housing, or SRO type housing which they may be able to afford without a rental subsidy once benefits have been established. If the person’s circumstances change, we work to update their VI-SPDAT scores to reflect their actual vulnerability. The information we submit is essential in maintaining client records and allows clients to be matched through CES to subsidized housing opportunities whenever possible.

**Security and Safety:**

Our security contractor continues to secure the Access Center and its surrounding area, together with our safety and engagement team. The program holds monthly meetings with the Santa Monica Police Department and City staff to address loitering, camping and other problematic behavior. We also hold monthly meetings with our security contractor to work collaboratively to solve problems through changes to service delivery, procedures, scheduling, training, as well as a daily morning huddle with Access Center management and the guards to address any current issues. The program’s neighbors are invited to attend these monthly meetings, including the Big Blue Bus and local businesses on 5th street.

An essential part of upholding safety is maintaining good relationships. In order to embody this, Access Center staff work to maintain a good standing with all residents and encourage them to access services. Agency training has been provided to both Access Center staff and security personnel so that there is a common understanding of incident reporting procedures and evidence-based practices including Trauma Informed Care and Harm Reduction techniques that facilitate successful intervention in incidents. Staff were also trained on basic resources that they can offer to potential clients including cold weather shelters, Project Homecoming, case management, medical care, and mental health services. To ensure a safe and pleasant environment in which to build trust with clients, maintenance staff members clean the perimeter of the Access Center twice daily.

**Trainings and Staff Development:**

This reporting period agency staff continued to receive training in a variety of essential areas.

The People Concern prioritizes training to develop skills that build trust with our clients, increasing the likelihood that they will access additional services such as interim or permanent housing. Training is designed to enable our staff to provide education around the issues faced by people experiencing homelessness (PEH) to help build understanding and compassion. The following trainings are offered to all staff on an ongoing basis, including HIPAA, Trauma Informed Care, Harm Reduction, mandated reporting, boundaries, mental health first aid, client charts and files, cultural diversity, HMIS, responding to an opioid overdose, crisis intervention, methamphetamine use, occupational resiliency, substance use disorders 101, LGBT+ awareness and education, emotional resilience, countertransference, verbal de-escalation, trauma stewardship, how to establish a good reputation, how to be proactive, request for tenant approval packet training, organization and time management, the importance of support systems and creating safe spaces and Sojourn’s domestic violence training. Most of the listed trainings are offered multiple times throughout the year, with staff being encouraged to refresh periodically. Whenever possible, the Access Center hosts guest speakers from partners or internal staff, such as Chrysalis, Aegis Treatment Center, The People Concern’s Senior Director of Housing Administrations, and the Housing Central Command (HCC) Support Team.

Other trainings directly focused on Project Homecoming applications, LAHSA/DHS/DMH, Countywide Benefits Entitlement Services Team and their referral process, CES Flex Funds Request application, In-Home Supportive Services (IHSS) Program and their referral process, and the Skid Row Move-In Assistance Program application. The Access Center conducted extensive training on the CES Survey and Score Revision Worksheet to help accurately reflect the CES scores of clients and aid their eligibility for an SMHA voucher.

The People Concern also trained case managers on how to identify alternative housing resources, such as market rate, transitional, shared, and subsidized housing in order to increase clients’ access to housing resources. This training included strategies related to working with landlords and barriers that may present themselves during the housing process. Case managers were also trained on how to navigate conversations with clients about their willingness to consider shared and interim housing options, which many clients would often refuse at baseline.

The agency provides a 26-hour management training program for all supervisory staff. New staff attend a two-day “PeopleCo University” training, designed to equip all staff, including case managers, to serve clients from a holistic, culturally competent perspective. To further train staff in crucial skills, the Access Center recently developed a new four-week onboarding training plan that includes two weeks of job shadowing and foundational trainings (i.e. what it means to be a case manager, self-care and wellness, effective teams, conflict resolution, hostile culture and the importance of taking breaks, professional email communication, time management, boundary setting, etc.) and then two weeks of case management intensive trainings (i.e. ServicePoint supplemental training, intake process, housing plans, etc.).

This fiscal year, Access Center leadership implemented additional training to further support staff who are the first to encounter new clients but do not traditionally have mental health training. Program Managers and case managers now attend a bi-weekly case file meeting with a clinician to discuss topics such as bipolar disorder and schizophrenia.

Managers continued to cross-train staff in order to address behavioral issues in a trauma informed way, as well as hold regular team meetings which serve as informal case conferencing sessions.

**CHALLENGES:**

The greatest challenge to the Access Center has been managing the impact of the COVID-19 pandemic. The Access Center is intended to serve as the entry point for clients to engage in services that eventually lead to permanent housing, however the Department of Public Health has decreased the number of individuals allowed in our facilities and the number of beds in interim housing due to social distancing. These capacity restrictions have reduced the number of clients we can serve at any given time and is exacerbated when the site is under quarantine, negatively impacts outcomes.

In addition to the COVID-related capacity restrictions that are affecting case management and interim housing availability, aiding our clients in securing permanent housing remains a key challenge. COVID-19 has slowed down apartment viewings as fewer landlords were showing apartments and fewer clients were willing to view apartments out of fears related to the pandemic.

The COVID-19 pandemic has also restricted the Access Center’s ability to support our clients in getting “document ready,” meaning they have all necessary supporting documents (i.e. ID card, Social Security card, proof of income, etc.) required for housing eligibility. The main reason for this has been the closure of public offices due to the pandemic. These delays and restrictions now lengthen the amount of time it takes to house clients.

Additionally, the COVID-19 pandemic has created industry-wide staffing shortages. As a program comprised of front line workers, the Access Center has had a difficult time recruiting workers who must risk infection by showing up to work. Staff shortages were exacerbated when staff were forced to quarantine due to COVID symptoms. To overcome this challenge, the Access Center has been working closely with the Human Resources team to address recruitment efforts. Program staff meet regularly with the recruitment team to ensure qualified candidates are being sought for all open positions.

Although the Access Center has been able to connect many clients to Emergency Housing Vouchers (EHV), we have experienced issues utilizing them due to the above-mentioned systemic barriers. In addition, as people experiencing homelessness, our clients are rarely able to provide the credit reports and proof of income (which must amount to three times the rent amount), required by many landlords. Moreover, because of the nature of the Los Angeles housing market, many units are priced outside of the voucher amount. For these reasons, although many clients express enthusiasm about voucher availability, many have not been able to locate affordable housing due to the aforementioned reasons.

Over the past fiscal year, four new case managers and one new outreach case manager were hired, however, two case managers subsequently resigned due to pandemic-related hardships. In order to fill an open outreach case manager position, the positions have been posted on the company website and Human Resources Recruitment team continues to receive and review applications.

Finally, the Access Center had a shortage of usable vans over this reporting period. Fortunately, a new van was donated which enabled multiple teams to increase outreach and food services.

###### SECTION II: ASSESSMENT, EVALUATION AND PARTICIPANT INVOLVEMENT

The People Concern follows established practices related to client feedback in order to ensure the highest quality services. Evaluation and planning are specific to each project, and are also implemented on an agency-wide basis. Service models are based on evidence-based practices and are documented through policies and procedures.

The People Concern maintains a robust data collection and evaluation infrastructure overseen by the Chief Compliance Officer and the Director of Evaluation and Compliance. A four-person team collects and validates data and trains line staff to submit data accurately and in a timely manner. Compliance and Evaluation staff conduct chart reviews on a bi-weekly basis to ensure clean data collection.

Data in each program is collected and analyzed for use in program compliance, reporting, and quality improvement. Outcomes tracked include housing acquisition and retention, increase in benefits or other income, use of mental health and medical services, and engagement with outreach teams. Agency staff review outcomes and trends to inform potential changes to program design/implementation.

Prior to the pandemic, Access Center staff solicited client feedback in a variety of proactive and responsive ways: a suggestion box, monthly community advisory board (CAB) meetings for in-person feedback, Grievance forms, and a Feedback Survey. During the first half of this year, the program hosted 4 CAB meetings. During the second half of the fiscal year, due to the site being under quarantine, only one CAB meeting took place.

The Access Center solicits client feedback in a variety of proactive and responsive ways: a suggestion box inside the lobby, Grievance forms, and the Access Center Feedback Survey, which the Triage Coordinator has provided at the resource tables. After distributing surveys to all clients as they began engaging in services, 106 surveys were returned. Based on the comments and suggestions from clients via this survey, as well as feedback received by staff directly, the Access Center is currently working on implementing:

* Food and drinks: To address this need, staff had clients meet directly with the program’s Food Services staff so they can begin incorporating their requests, such as additional snacks and Gatorade, into their food program. Staff have also reevaluated the budget so we can estimate how often we can provide these extra items.
* Case Management appointments: Clients suggested that Access Center use a ticket system wherein clients receive a number to be called when their case manager is ready for them. The Access Center is currently reviewing the efficacy of such a system.

The People Concern continues to review and update all data policies, procedures, and training across all programs for consistency and improvements according to the latest best practices.

###### SECTION III: BOARD INVOLVEMENT

* 10 board meetings plus a Board retreat meeting were conducted during this fiscal year.
* Average attendance was 85%.
* **Board development:** We recruited one new Board member during the fiscal year, a partner and talent agent with the firm United Talent Agency. This newest Board member deepens the agency’s connection to the local entertainment industry and adds to the diversity of professional skill sets among Board members.

The Board also welcomed an intern from UCLA’s Anderson School of Management during this period. This intern brings the perspective of the next generation of potential Board members and has been valuable in the Board’s recruitment strategy exploration.

* **Significant policy actions:** The Board’s focus during this reporting period has been to continue spearheading more permanent supportive housing creation as part of the Vision 2028 strategic plan. The Vision 2028 plan envisions future housing success for thousands more people in Los Angeles County so that 20,000 people are supported in permanent housing by The People Concern by 2028. Permanent supportive housing must be developed faster and less expensively than the current standard practice in Los Angeles. FlyawayHomes (FAH), a nonprofit housing development organization founded by Board Members of The People Concern, was formed to develop a proof of concept that permanent supportive housing can be built at a much lower cost than the status quo, using private equity. During this reporting period, the Board of Directors of The People Concern furthered the exploration of bringing FAH under the umbrella of The People Concern in order to more directly support the research, development and fundraising necessary to achieve proof of concept. The potential new structure is currently under review with the Board and The People Concern is beginning to hire staff in anticipation of this change.
* Five board members reside and/or work in Santa Monica.
* The Board currently has no vacancies.

###### SECTION IV: STAFFING PATTERN

There were six vacancies at the Access Center at year end. While the site will normally contract additional security to provide coverage to assist with safety and promote compliance with public health guidelines, during this reporting period Global Vision Security also experienced vacancy issues as a result of the pandemic. Alongside Human Resources, staff are currently recruiting for all vacant positions.

COVID-19 resulted in several instances of staff shortages when staff members quarantined after being exposed to the virus. Overall, the Access Center has a reduced number of employees working onsite on a daily basis. To address this staff shortage, management took on additional responsibilities and redistributed duties among remaining staff members to avoid disruption in services. To further support the staff shortage, a Department of Mental Health (DMH) case manager was integrated into the program to assist with caseloads, but was removed due to budget cuts in February.

Staff shortages during this reporting period impacted case management and outreach services, specifically forcing case management orientation to be halted. As a result, the program only had the capacity to take on SMPP clients. For those SMPP clients in outreach, staff shortages left the Access Center with reduced capacity to travel to the field to engage clients in case management services.

Volunteer opportunities are severely limited by COVID restrictions and limited to administrative/non-client-facing activities. Despite these restrictions, the Access Center benefited from the services of 49 volunteers who provided 1,785 hours of service. These volunteer numbers represent a 32 percent increase in the number of volunteers from the previous fiscal year.

**SECTION V: SPECIAL FUNDING CONDITIONS**

• *Participate in the City’s efforts to develop an outcomes measurement system to better track human services program demographics and outcomes.*

The Access Center tracks all services in Service Point to provide accurate demographic and outcomes data to the City. The agency will continue to make staff available to participate in efforts to develop outcomes measurement systems.

• *Detail steps taken to provide services in adherence to the safety protocols related to the COVID-19 pandemic, including modifications to service delivery, physical infrastructure and safety equipment and protocols to protect participants and staff.*

The Access Center adheres to comprehensive safety protocols related to COVID-19. Highlights of steps take to modify service delivery, physical infrastructure, safety equipment, and new protocols include:

* A Director of Safety was hired in 2020 to assist with protocols related to COVID-19 across the agency
* All services were modified to accommodate social distancing practices and adherence to PPE guidelines.
* PPE is ordered monthly and we have two weeks’ stock onsite.
* Temperature and symptoms check stations were created. Fliers encouraging compliance with mask wearing, social distancing, and hand-washing requirements are posted all through the building.
* All staff are trained in and must follow social distancing and PPE practices.
* The agency has implemented a required vaccination policy.

*• Describe how your organization operationalizes racial equity, diversity, and cultural*

*Competency.*

The People Concern has completed the second year of its three-year Diversity, Equity, and Inclusion (DEI) Strategic Plan. The DEI Plan was developed collaboratively with agency leadership staff, the staff co-chairs of the DEI Committee and the Human Resources Department. The results from an agency-wide DEI survey were incorporated in the components of the plan as well as industry-best practices. The effort was led by a DEI consultant who completed their consultation term on June 30, 2021.

The initiatives identified in the plan are organized based on constituencies and emphasis: culture, workforce, clients and community. Launch activities were held in May and June of 2021to introduce all staff to the components of the plan and for agency leadership to share their personal commitment in this work. Ongoing communication and engagement activities are planned over the coming year to continue to build investment in this change-work by staff from across the agency. These activities are intentionally scheduled during work hours so staff can participate.

Additional DEI achievements and processes during the reporting period include:

* Hiring the first Chief Diversity, Equity, and Inclusion Officer for TPC in January 2022 to oversee the implementation of our previously developed 3-year DEI Strategic Plan.
* We are currently in year-two of implementation for a three-year DEI strategic plan, which includes four main components of focus: our clients, our staff, our culture, and our broader community.
* Currently conducting our second-annual Diversity, Equity, and Inclusion survey across the agency to better understand the needs of our staff around DEI and how we can better improve the employee experience from an equity and inclusion perspective.
* Employee resource groups, called Standing in Solidarity (SIS) groups, were created as peer support groups. Currently, we have seven SIS groups: Allies SIS group, Black Leadership SIS group, Black employees SIS group, Latinx SIS group, Asian American and Pacific Islander SIS group, LGBTQ+ SIS group, and a Jewish SIS group. Groups meeting monthly or bi-monthly and are open to all staff, and allow a space for peer support, learning, and networking.
* A Director of Recruitment was hired in March to help support our increased hiring needs, with a particular focus on ensuring diverse candidates and improving recruitment strategies to broaden our candidate pool.
* A budget for Diversity, Equity, and Inclusion was developed and approved in order to support the agency's commitment to DEI programming and initiatives.
* We successfully applied for a $200,000 grant from Cedars Sinai to address equity issues around vicarious trauma experienced by staff in providing front line work, as well as to help build capacity around training and curriculum development on DEI topics. Additionally, the grant will help support staff wellness initiatives.
* In an effort to strengthen our relationship with our clients and to create an opportunity for their experiences to inform our work and develop best practices, the agency is building out a Client Advisory Board (CAB).

Below please find our aggregate data for the agency’s Board of Directors, Executive Leadership Team, and supervisory staff of the Access Center:

|  |  |
| --- | --- |
| **RACE/ETHNICITY** **(Board of Directors)**  |  |
| 1. African American  |  2 |
| 2. Asian or Pacific Islander |  0 |
| 3. Latinx |  0 |
| 4. White |  16 |
| 5. Multiple Race/Ethnicity |  0 |
| 6. Other : Middle Eastern; Ethiopian |  0 |
| 7. Refuse to State |  0 |
| **TOTAL:**   |  18 |

|  |  |
| --- | --- |
| **GENDER****(Board of Directors)** |  |
| Male | 12 |
| Female | 6 |
| Transgender | 0 |
| Other | 0 |
| **TOTAL:** (SUM OF MALE, FEMALE, TRANSGENDER, OTHER) | 18 |

|  |  |
| --- | --- |
| **RACE/ETHNICITY** **(Executive Leadership Team)**  |  |
| 1. African American  |  1 |
| 2. Asian or Pacific Islander |  1 |
| 3. Latinx |  2 |
| 4. White |  7 |
| 5. Multiple Race/Ethnicity |  0 |
| 6. Other : Middle Eastern; Ethiopian |  0 |
| 7. Refuse to State |  0 |
| **TOTAL:**   |  11 |

|  |  |
| --- | --- |
| **GENDER****(Executive Leadership Team)** |  |
| Male | 2 |
| Female | 9 |
| Transgender | 0 |
| Other | 0 |
| **TOTAL:** (SUM OF MALE, FEMALE, TRANSGENDER, OTHER) | 11 |

|  |  |
| --- | --- |
| **RACE/ETHNICITY** **(Access Center Leadership)**  |  |
| 1. African American  |  2 |
| 2. Asian or Pacific Islander |  0 |
| 3. Latinx |  2 |
| 4. White |  1 |
| 5. Multiple Race/Ethnicity |  0 |
| 6. Other : Middle Eastern; Ethiopian |  0 |
| 7. Refuse to State |  0 |
| **TOTAL:**   |  5 |
|  |  |

|  |  |
| --- | --- |
| **GENDER****(Access Center Leadership)** |  |
| Male | 1 |
| Female | 4 |
| Transgender | 0 |
| Other | 0 |
| **TOTAL:** (SUM OF MALE, FEMALE, TRANSGENDER, OTHER) | 5 |

*• Agency will assist eligible participants in submitting applications to applicable Santa Monica Housing programs, including but not limited to: Section 8 and Below Market Housing (BMH) Waitlists, Preserving Our Diversity (POD), and Continuum of Care (CoC) programs.*

The Access Center screens all clients for eligibility for these programs and those eligible in submitting applications for the Santa Monica Housing Programs listed. During the reporting period, four individuals were housed in Santa Monica, and all four were housed through the Santa Monica Housing Authority. Staff assisted nine clients in submitting applications to the Housing Authority; three are holding vouchers and are currently searching for apartments and 12 are in the process of gathering documentation in order to submit an application.

The Access Center is in full compliance with all conditions relating to homeless programs.

* We continue to align resources with the goal of permanently housing priority populations consistent with the City’s Santa Monica Program Participant criteria (SMPP). We leverage extensive non-City funding to serve our client population.
* We begin our client service planning process by linking clients with services and resources in their community of origin or other appropriate regional services, and by offering appropriate transportation services, such as Project Homecoming.
* We provide ongoing, individualized supportive services based on individual need to Santa Monica Program Participants placed in permanent housing to promote housing retention, regardless of the type of subsidy or housing utilized.
* We use the City’s HMIS to comply with reporting requirements for participants in the City’s homeless initiatives.
* We document service match in the City’s Homeless Management Information System (HMIS) for all clients utilizing SMHA Continuum of Care vouchers.
* All SMPP individuals who receive case management services are assessed through the VI-SPDAT and are co-enrolled in the Coordinated Entry System (CES).
* SMPP clients who score high acuity (8 or higher) on the VI-SPDAT are submitted to the Santa Monica Service Registry.
* We notify Human Services Division staff when SMPP program participants are at risk of eviction.
* We adhere to the City’s Intake Policy for documenting homelessness.
* We prioritize services and outcomes for the individuals designated by the City. See Attachment A for information on specific individuals.

**SECTION VI: DEMOGRAPHICS**

|  |  |  |
| --- | --- | --- |
| **ASSESSMENT OF ADDITIONAL SERVICE NEEDS****(Santa Monica Participants)** | **FY 21-22****Number Responding “Yes”****at Mid-year** | **FY 21-22****Number Responding “Yes”****at Year-end** |
| 1. “Do you or anyone in your household have unmet employment needs?”
 | 3 | 10 |
| 1. ”Have you missed or been late on a home rental or mortgage payment within the last 12 months?”
 | 0 | 0 |
| 1. “Do you or anyone in your household have an unmet childcare/afterschool need?”
 | 0 | 0 |

|  |  |  |
| --- | --- | --- |
| **INCOMING PARTICIPANT REFERRALS** **(Santa Monica Participants)** | **FY 21-22****Number****at Mid-year** | **FY 21-22****Number****at Year-end** |
| Participants referred by another agency | 11 | 29 |
|  **Please list the top 3 referring agencies** |  |  |
| * 1. **City of Santa Monica**
 | 10 | 15 |
| * 1. **VFC**
 | 1 | 11 |
|  |  |  |

**SECTION VII: PROGRAM SERVICES AND OUTCOMES**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Service Category/ Program Goal** | **Activity Type** | **Activity Description** | **Annual Target\***  | **Documentation****Method** | **Mid-Year** **Status Report** | **Year-End** **Status Report** |
| 1 | **Obtain Interim/Permanent Housing** | Output 1 | Unhoused participants will be engaged on outreach | 35 SMPP | HMIS | 18 SMPPOne client was moved to Case Management | 49 SMPPeight clients were moved to Case Management |
| Output 2 | Unhoused participants will engage in case management | 82 SMPP | HMIS | 35 SMPP | 1. SMPP

11 clients were moved to housed Case Management  |
| Outcome 1 | Unhoused participants will be placed in interim housing | 21 SMPP | HMIS | 5 SMPP | 15 SMPP |
| Outcome 2 | Unhoused participants will be placed in permanent housing  | 12 SMPP | HMIS | 4 SMPP | 11 SMPP |
| 2 | **Maintain Permanent Housing** | Output 1 | Housed participants will engage in case management | 51 SMPP | HMIS | 41 SMPP | 41 SMPP |
| Outcome 1 | Housed participants in case management will maintain permanent housing through the program year | 47 SMPP | HMIS | 39 SMPP | 39 SMPP |
| 3 | **Increase/Maintain Income** | Output 1 | Case management participants will be screened for income development | 133 SMPP | HMIS | 76 SMPP | 87 SMPP |
| Outcome 1 | Case management participants will increase or maintain their income | 100 SMPP | HMIS | 70 SMPP | 84 SMPP |
| 4 | **Access Behavioral Health Services** | Output 1 | Unhoused participants will engage in mental health or substance use disorder services. | 59 SMPP | HMIS | 2 SMPP | 29SMPP |
| 5 | **Access Project Homecoming** | Output 1 | Participants will access Project Homecoming | 96 SMPP | HMIS | 16 SMPP | 26 SMPP |
| Outcome 1 | Participants will be permanently housed through Project Homecoming | 76 SMPP | HMIS | 14 SMPP | 25 SMPP |

###### VARIANCE REPORT:

###### Service 1, Output 1 & 2: *Unhoused Santa Monica Program Participants served*

Due to COVID-related capacity restrictions, case management service enrollments were significantly reduced which worsened during the program’s outbreak this reporting period. This limited capacity was further exacerbated by staffing shortages. As a result, at year-end, 233 of the annual target of 435 total participants (54 percent of the annual goal) were served. Still, the agency continues to prioritize case management for Santa Monica Program Participants (SMPP) and at year-end has served 95 of the annual target of 117 unhoused SMPP’s (81 percent of the annual goal).

Due to the hiring of additional outreach staff, the use of a new tracker, and redistributing clients to various case managers, outreach staff have made significant progress in engaging individuals, exceeding our annual target. While many of those engaged individuals chose not to complete the comprehensive intake and SPDAT assessments, the People Concern was able to provide outreach to foster trust and rapport. The program believes that with time and additional engagement, many of these clients will also engage in case management services, allowing for more case management numbers in the future.

Of note, eight clients in the Access Center’s Outreach program were also enrolled in case management and were screened for income. However, because the Service Point CCM report unduplicates recorded individuals, the report will show 46 when the accurate number is 54. Similarly, 24 additional clients are enrolled in the agency’s outreach provider, so although we served these clients, they are not recorded in the CMM report as we do not do an intake for the provider.

**Service 1, Outcome 1: *Interim Housing Placement***

The LA County Public Health directive to reduce bed capacity due to COVID posed barriers to reaching interim housing placement goals during this period. All interim housing sites county-wide halted new intakes when in quarantine or in outbreak status. Some clients continue to prefer waiting for permanent housing as they live on the streets, as they are wary of contracting COVID, as a main concern. Staff will place these clients on the waitlist and will continue to revisit conversations in order to build rapport and trust in interim housing, as well as to present alternative resources. SMPP clients continue to receive priority on the waitlist for interim housing referrals.

To address these challenges, The People Concern continues to contribute to LA County’s efforts to mitigate the pandemic by hosting vaccination events and increasing education about COVID-19 vaccines and other safety measures.

**Service 1, Outcome 2: *Permanent Housing Placement***

Permanent housing placement has been hindered by bureaucratic processes, largely related to the COVID-19 pandemic. For example, housing authorities are closed to the public, which creates delays in placements and documentation, as all requests must be submitted remotely or through mail. We are experiencing further delays in establishing permanent housing for clients, as the Santa Monica Housing Authority has only one staff reviewing and processing applications.

As stated in the Challenges section, the program has also encountered barriers utilizing Emergency Housing Vouchers. While clients are enthusiastic to use them, they often lack credit reports and the proof of income required by landlords. In addition, the price of rental units are often beyond the price of the vouchers.

To increase the efficiency and effectiveness of our permanent housing placement, case managers attended a training conducted by The People Concern’s Senior Director of Housing Administration. At this training, the Director addressed challenges and barriers about how to address property managers, housing outside of the CES, where to look for units, how to advocate for clients with low/no credit score, resources for rental application fees, letters of support, and other helpful items. With this additional training, staff are better equipped to overcome systemic challenges that have traditionally depressed our numbers.

Other challenges include policies regarding clients who have undocumented immigration status and are thus ineligible for permanent housing opportunities. The People Concern has contacted an immigration attorney at Bet Tzedek, to initiate a partnership to overcome this systemic obstacle. The goal of this partnership is to provide training for staff to identify whether undocumented participants can achieve housing eligibility and how to support them in that process.

**Service 2, Output 1: *Housed participants engaged in case Management***

The City case management report reflects 52 participants served in housing retention. This figure represents the 41 participants previously housed and 11 participants housed during this period who continue to receive supportive case management services through The People Concern. The agency notes that the outcomes chart above represents the un-duplication.

**Service 3, Outcome 1: *Participants screened for income***

Eight clients in the Access Center’s Outreach program were also enrolled in case management and were screened for income. However, because the ServicePoint CCM report unduplicates recorded individuals, the report will show 87 when the accurate number is 95.

**Service 4, Output 1: *Access behavioral health services***

One significant limitation to the Access Center’s mental health services is capacity. The program’s substance use and harm reduction group, which is facilitated once per week, is currently at capacity due to social distancing restrictions. In order to meet this demand, the Access Center is exploring options to provide additional substance abuse groups in order to meet clients’ needs, as this is a highly desirable group topic, based on the level of interest expressed by clients.

Capacity to serve SMPP clients was also limited by staffing vacancies. Department of Mental Health budget cuts recently reduced Access Center clinicians to zero and alternate funding had to be allocated in order to continue providing these vital services. Furthermore, the DMH funded case manager supervised by the Access Center in the beginning of the fiscal year was also released due to budget cuts. These losses have impacted our numbers in a variety of ways. For example, to serve SMPP clients, Case Management must meet them where they are by physically going out into the field. However, due to the current vacancies, staff are unable to go out in the field consistently and safely to meet clients where they are. As these clients are out on the streets, there is a need to facilitate groups out in the field, which is an environment that is more trusted by clients. To address this challenge in the future, the program has begun to utilize our Intern Training Program to train interns to evaluate SMPP clients.

Finally, the program was deeply impacted by the COVID-19 pandemic this fiscal year. The Access Center was on outbreak status for two months, directly limiting our capacity to intake clients and perform services. The outbreak status impacted the program’s ability to recruit interns, which further limited service delivery.

While many of these issues are systemic and due to the pandemic, the Access Center continues to do everything in its power to mitigate the limitations created by COVID-19 and subsequent staffing shortages. As mentioned earlier, program supervisors have continued to provide extra services and time to compensate for the staffing shortages. The Access Center has also expanded the problem-solving program so they will cover SMPP eligibility screening, allowing other staff to focus on other responsibilities. Finally, the program continues to provide education to address misconceptions regarding COVID-19 safety guidelines with the goal of increasing vaccine acceptance and creating a safer environment for all program participants and staff.

**Service 5, Output & Outcome 1: *Project Homecoming:***

Staff continue to encourage participants to utilize Project Homecoming, but few clients are willing to submit to the background check required by Project Homecoming or are able to identify a suitable host or destination. To overcome this challenge, The People Concern implemented a new policy to promote Project Homecoming during its outreach services in order to increase awareness about the program and build trust. The Access Center has assisted every individual who has come through its doors and successfully utilized Project Homecoming to secure permanent housing for 26 individuals during this reporting period.

Twenty-six individuals accessed Project Homecoming. Twenty-five participants have confirmed their arrival; however, one participant has not responded to the agency’s attempts to reach them and their phone number is now disconnected.

**SECTION VII: PROPERTY MANAGEMENT**

During this reporting period, The People Concern’s facilities team continued to maintain the cleanliness and hygiene of our site. The team painted two offices and installed screens on windows throughout the facility. The facilities team also shampooed the carpets, installed social distancing stickers, waxed and buffed flooring, performed plumbing in the men’s restroom, and power-washed the facility. Minor repairs and painting were conducted routinely during this reporting period.

**By submitting this report to the Housing and Human Services Division, I certify that this report is true, complete and accurate to the best of my knowledge and that all disbursements have been made in compliance with the conditions of the Grantee Agreement and for the purposes indicated.**