

Prop 47 Grant Program

Local Evaluation Plan

Submitted By:

City of Pasadena Public Health Department

Prepared By:

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Cohort Number:

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Project Period:

September 1, 2022- June 1, 2026



Project Background

Overview of the Pasadena Outreach Response Team Expansion (PORT-E)

Homelessness is a longstanding problem in California, as it is in much of the U.S. While homelessness has many root causes, including an overall lack of affordable housing and lack of coordination between social service systems, criminal justice involvement is a major risk factor. Recognizing the need to address the homeless population, the Pasadena Public Health Department (PPHD) in partnership with the Pasadena Fire Department (PFD) launched the Pasadena Outreach Response Team (PORT) in 2019. Like many cities in Los Angeles County, Pasadena is faced with a complex situation when dealing with the homeless population. The Pasadena homeless population are considered high acuity: 41% have chronic health conditions; they struggle with multiple co-occurring mental health and substance use disorders and thus are considered difficult to engage and at high risk of recidivism. PORT provides field-based support and advocacy for people who are experiencing homelessness, living with chronic health conditions, diagnosed with mental health and/or substance use disorders. PORT has a unique cross-sector approach that includes a case manager, social worker, registered nurse, firefighter, and peer navigator that work in a proactive manner to address issues before they reach the crisis stage.

A large portion (approximately 60%) of individuals experiencing homelessness identified during PORT's street outreach have been involved in the criminal justice system, if not currently, in the past. The PORT found that after their release, many people lacked stable housing and had no access to employment, education, and life skills services, resulting in an increased chance of recidivism and homelessness. Some people who experience chronic homelessness seem to be caught in a revolving door of incarceration, crisis services, and life on the streets or in emergency shelters (Bronson, 2017); in Pasadena, these "frequent flyers" are a drain on resources. Data from the Pasadena Police Department (PPD) revealed that just 20 individuals made up 17% (n=137) of arrests among the homeless population in 2021, with the top 4 arrest charges being miscellaneous offenses (25%), drug violations (15%), trespassing (15%), and alcohol violations (7%). The PPHD will use resources from the Proposition 47 grant program to expand the efforts of PORT to better serve this population through the Pasadena Outreach Response Team Expansion (PORT-E) Program.

Project Scope:

PORT-E will expand the services of the existing PORT. The PORT is a collaboration between the City's Public Health Department, Fire Department, Union Station Homeless Services (USHS), and Huntington Hospital (HH). PORT provides proactive, holistic, field-based outreach, support, and advocacy for people who are experiencing homelessness, living with chronic health conditions, and/or diagnosed with mental health and/or substance use disorders. The PORT-E will serve 60

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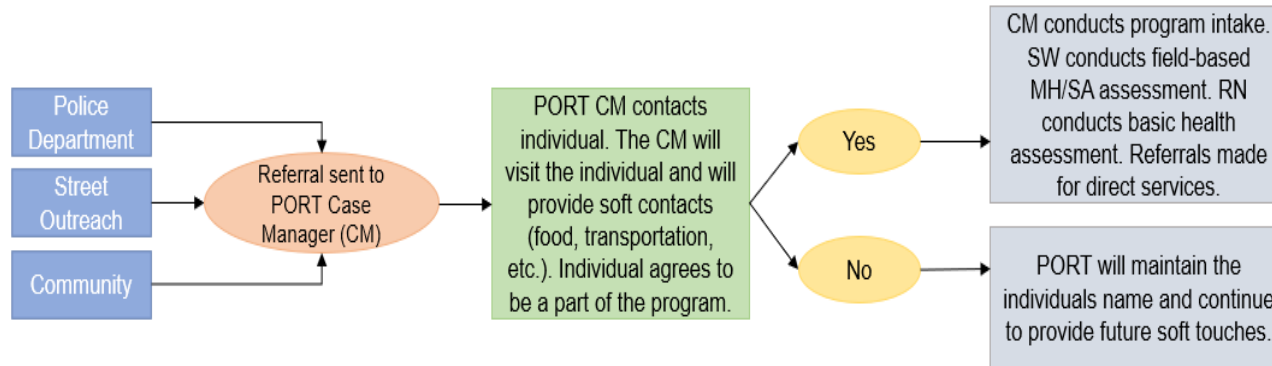
justice-involved homeless individuals per year during the grant cycle for a total of 180 individuals over the program period.

Once a potential PORT client is identified, the PORT Case Manager (CM) will begin making “soft contacts” with the individual including providing food, hygiene kits, clothing, and providing transportation to appointments (e.g., doctor’s or probation appointments). During these soft contacts, the CM will determine if the individual has a history of mental health and/or substance abuse issues (clinically diagnosed or self-reported). Once the individual makes the commitment to participate in the PORT program, a formal Program Intake will be conducted as well as a thorough trauma-informed mental health and substance use risk and needs assessment completed by a Licensed Clinical Social Worker (LCSW). Once a client is enrolled in PORT, the Case Manager (CM) will link the individual to the assigned HH Registered Nurse who will complete a basic health screening and to the Social Worker who will conduct the trauma-informed risk and needs assessment, with a focus on mental health and substance abuse issues.

These new PORT clients will be quickly linked to necessary support services to promote stability, and thus reduce recidivism and provide the best chance possible to reduce homelessness. The risk and needs assessment will identify current mental health and/or substance abuse needs, in addition to other needs that are preventing an individual from being successful.

The majority of PORT clients are identified from street outreach, referral from police, via dispatch calls for PORT assistance, and referrals from other community organizations and stakeholders. The early identification of individuals in need is crucial to stop the revolving door between incarceration and homelessness.

PORT-E Referral and Assessment Process



Target Population:

The PORT Expansion Program (PORT-E) will target PORT clients with a history of criminal justice system involvement (estimated at 60% of PORT clients). PORT clients are:

- Predominantly men (67%)
- Aged 18-59
- Struggle with mental health and/or substance use issues
- Experiencing homelessness in the City of Pasadena
- Predominantly, Black and/or Hispanic (68%)

The PORT team currently serves chronically homeless individuals, defined as people who have experienced homelessness for at least a year - or repeatedly - while struggling with a serious mental health illness, substance use disorder, or physical disability. The program seeks to serve a subset of PORT clients whose criminal justice system status makes them even more difficult to serve due to stigma affecting the ability to acquire housing, a job, services, etc.

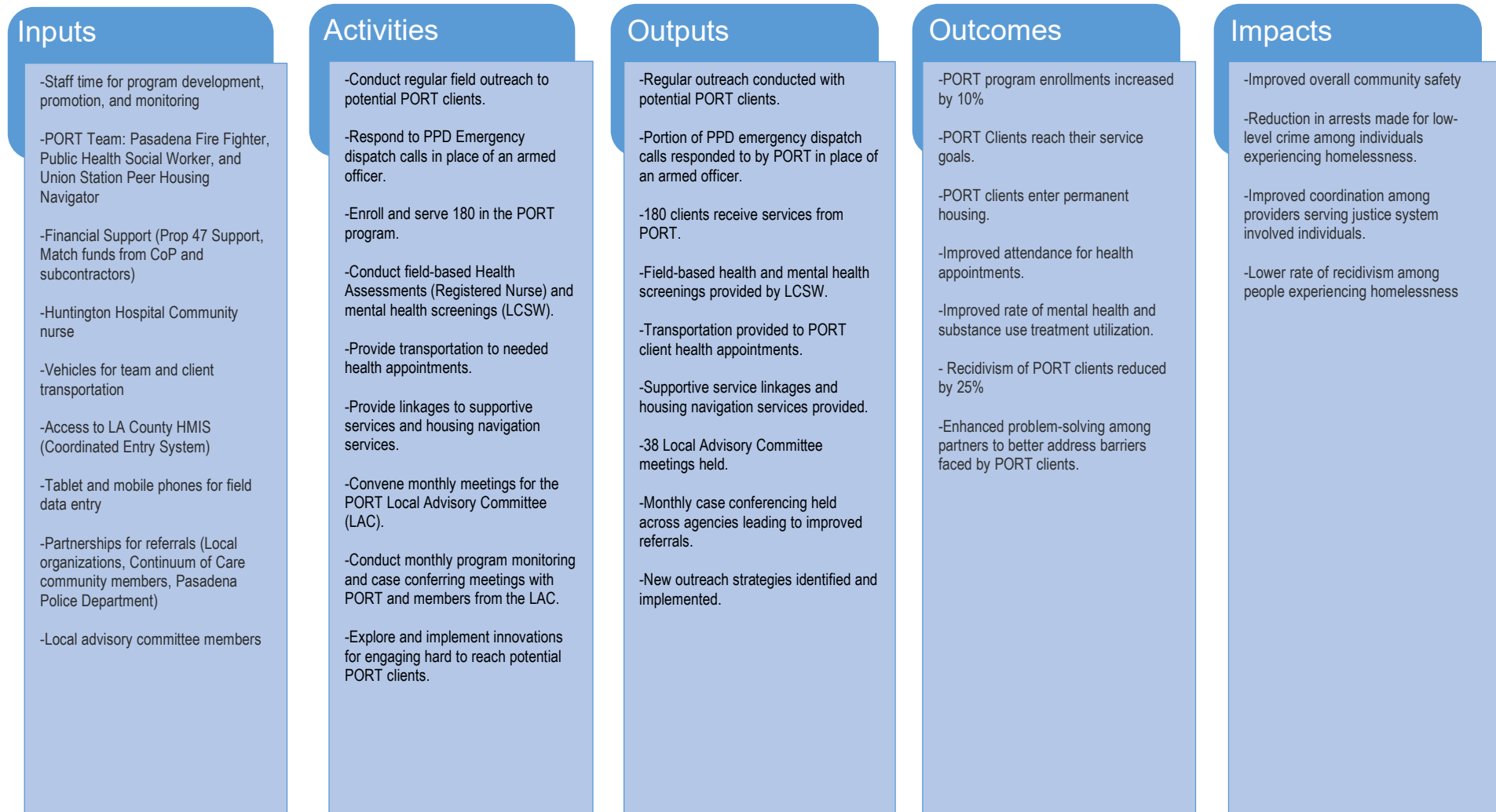
Goals & Objectives

- Goal #1: Improve the lives of the homeless criminal justice-involved PORT clients in Pasadena
 - Improve early identification of clients who fit the target population
 - Serve 60 clients per year in the PORT program
 - Support client engagement in MH and/or SA services
 - Assist client in obtaining permanent housing
 - Reduce recidivism of PORT clients by 25%

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- Goal #2: Improve and align services for homeless criminal justice-involved PORT clients in Pasadena
 - PORT Local Advisory Committee meets monthly (38 meetings total) to guide the program
 - Increase data and resource sharing among partners
 - Enhance problem-solving among partners to better address barriers faced by PORT clients
- Goal #3: Explore PORT implementation innovations to enhance PORT services
 - Explore how to make a warm handoff work
 - Explore Case Conferencing
 - Explore other innovations suggested by the PORT Local Advisory Committee

PORT-E Logic Model:



Evaluation Design:

To assess the implementation and impact of the PORT-E Prop 47 grant program, PPHD will conduct a mixed-method process and outcome evaluation. The mixed-method approach incorporates quantitative and qualitative data collection and analysis to provide a comprehensive assessment of grant funded efforts. The quantitative data analysis will include individual measures to examine service utilization as well as outcomes of service delivery. Qualitative data analysis will explore experiences with implementation with our target population, service providers, and staff to identify successes, challenges, and areas for improvement. The descriptive study will comprise two key components, a process evaluation and an outcome evaluation, to measure program implementation and effectiveness.

As of January 2023, PPHD continues the process to execute a contract with an external evaluator. Once that evaluator is on board, it is possible that components of the Local Evaluation Plan and/or the research design will be revised.

Process Evaluation:

Since 2019, the PORT has been an established presence in Pasadena and is serving the target population today. Therefore, many of the resources required for the PORT-E Project are already in place including staffing, vehicles, mobile phones and other supplies. Additional components requiring implementation, including the contracted LCSW, will be monitored by the project director on a weekly basis.

All project staff and subcontracted service providers will maintain records of participants, including start dates, program attendance or encounters, progress milestones, and completion status. Members of the PORT conduct nearly all their business in the field and enter case notes into the LA County's Coordinated Entry System (HMIS) and into the PPHD's HIPAA compliant client data base system Welligent.

When a new PORT client enrolls in the program, the Case Manager completes an intake document that includes the client's service plan goals, which are determined by the client. PORT provides ongoing case management for up to 12 months, at which point they are typically discharged from the program. PORT determines their intervention successful when at least 80% of the client's service goals have been met. At the time of discharge, a PORT member will complete the program discharge form. The PPHD evaluator will create the program discharge form. This form will ask the PORT member to quantify the goals achieved and describe qualitative details that contributed to the client's success or lack thereof.

The Project Director will convene monthly program monitoring meetings to assess progress on the program's work plan, ensure the program is operating within the budget and schedule, and to make implementation adjustments, as needed. The meetings will

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be led by the Project Director and will include all PORT members and the evaluator. PPHD's leadership team (Director/Health Officer and Deputy Director) will be invited. The Project Director will report major implementation successes, barriers, and associated adjustments to the PORT Local Advisory Committee for further input and feedback. Additionally, PPHD understands the importance of program transparency with the community and will therefore provide at least annual program updates to the Pasadena City Council's Public Safety Committee.

The following table provides specific details for process evaluation indicators, data sources and collection frequency:

Process Evaluation		
Indicators	Data Sources	Data Collection Methods/Frequency
# Outreach Encounters Made & # of New Enrollments Completed	<ul style="list-style-type: none"> ○ PORT Field Entry into HMIS & Welligent (PPHD HIPAA compliant system) 	Reported to project director monthly and LAC quarterly
# Pasadena Police Department (PPD) dispatch calls responded to by PORT	PPD call log system	Reported to project director monthly by PPD Crime Analyst
# Field Based Health & Mental Health Assessments completed	<ul style="list-style-type: none"> ○ Health Assessment provided by HH nurse. ○ Mental Health Screening provided by LCSW 	Completion rates reported to project director monthly and LAC quarterly. Subcontractors to submit progress metrics with monthly invoice.
# Transportation services provided	PORT Field Entry into Welligent	Reported to project director monthly
# Supportive and housing navigation services provided	PORT Field Entry into Welligent	Reported to Project Director monthly
# LAC meeting held	Attendance sign-in sheets for each meeting	Project Director to collect Sign-in sheets monthly
# Case conference meetings	Attendance sign-in sheets and client roster notes	Reported to Project Director monthly
# and type of outreach innovations identified and implemented	PORT and the LAC will create a work plan to track progress	Reported to LAC monthly

Outcome Evaluation:

PORT outcome measures will be collected by PORT members and tracked in PPHD's HIPAA compliant client database Welligent as well as the LA county coordinated entry system (HMIS) when necessary.

PORT program outcomes and definitions:

- PORT Program Enrollments increased by 10%- Program enrollments occur when a client agrees to participate in case management and completes the PORT intake.
- PORT clients reach 80% of their service goals- As a part of the PORT intake clients establish service goals. These can include obtaining permanent housing, accessing substance use treatment, obtaining employment etc.
- PORT clients with permanent housing- Due to the nature of the housing market and lack of affordable housing it is difficult for the program to anticipate the plausible number of clients who will have permanent housing through the grant.
- Increased health appointment attendance- PORT regularly assists clients with scheduling medical, dental, mental health and substance use treatment appointments. Due to the many challenges of homelessness, many clients miss their needed appointments. We anticipate that through the expanded resources of PORT-E, client's health appointment attendance rate at the end of the grant will improve compared with the first 6 months of the program.
- Improved rate of mental health and substance use treatment utilization- Similarly to the health appointment attendance rate, PORT clients face substantial barriers to accessing mental health and substance use treatments. Mental Health and Substance Use Treatment Utilization is the number of clients in need of services who are enrolled in treatment. Field assessments completed by the Registered Nurse and Licensed Clinical Social worker will screen for needed treatment.

Recidivism:

To assess local recidivism data in Pasadena, we will coordinate with the Pasadena Police Department's Crime Analyst to collect data semiannually. PPHD will measure recidivism for each individual served from the target population. Recidivism rates will be calculated for each individual from the time they enter the Prop 47 program until the time that the grant ends. Participant recidivism rates will be compared to recidivism rates for the entire city. PPHD and the evaluator to be determined will analyze data to identify trends and impact of the Prop 47 grant program. This analysis will include identifying correlating factors that affect recidivism rates.

Local Advisory Committee:

The Local Advisory Committee (LAC) will be working to improve PORT's capacity to address barriers faced by their clients. During the project period, LAC members will be asked to complete a survey measuring their perceptions of PORT's ability to address barriers faced by their clients. LAC Members will complete this survey at the start of the program and annually thereafter.

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The following table provides specific details for outcome evaluation indicators, data sources and collection frequency:

Outcome Evaluation		
Outcome Indicators	Data Sources	Data Collection Methods/Frequency
# Clients enrolled in PORT	Welligent enrollment reports	Reviewed monthly
# Months the PORT clients remain arrest free	<ul style="list-style-type: none"> • PORT client roster • PPD arrest records 	Recidivism rates of PORT participants to be reviewed with PPD semiannually
# PORT clients with permanent housing	HMIS & Welligent	Reported to project director monthly
# Unduplicated clients utilizing mental health and/or substance use treatment	Appointment and program enrollment reports in Welligent.	Reported to project director monthly
Attendance rate of health appointments: <ul style="list-style-type: none"> • # Appointments scheduled for PORT clients • # Appointments attended by PORT clients 	HMIS & Welligent	Reported to project director monthly
Problem solving among partners to better address barriers faced by PORT clients.	Pre & Posttests completed by LAC members to measure their perceptions of PORT's ability to address barriers faced by PORT clients.	Collected at start of program and to be repeated each program year.