

CITY OF LOS ANGELES
DEPARTMENT OF PUBLIC WORKS
BUREAU OF ENGINEERING
1149 S. BROADWAY, 7th FLOOR
LOS ANGELES, CALIFORNIA 90015
CALIFORNIA ENVIRONMENTAL QUALITY ACT
NOTICE OF EXEMPTION
(Articles II and III - City CEQA Guidelines)

Submission of this form is optional. The form shall be filed with the County Clerk, 12400 E. Imperial Highway, Norwalk, California, 90650, pursuant to Public Resources Code Section 21152(b). Pursuant to Public Resources Code Section 21167(d), the filing of this notice starts a 35-day statute of limitations on court challenges to the approval of the project.

LEAD CITY AGENCY AND ADDRESS: City of Los Angeles c/o Bureau of Engineering (BOE) 1149 S. Broadway, MS 939 Los Angeles, CA 90015	COUNCIL DISTRICT 13
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PROJECT TITLE: Bridge Housing at 1215 N. Lodi Place Lease	LOG REFERENCE C.F. 20-0841
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PROJECT LOCATION: 1215 Lodi Place, in the Hollywood Community Plan Area of the City of Los Angeles (City), Los Angeles County (see Figure 1: Project Location, T.G. 593 – F5)

DESCRIPTION OF NATURE, PURPOSE, AND BENEFICIARIES OF PROJECT: The Bridge Housing at 1215 Lodi Place Lease (Project) consists of an extended, or new lease, for approximately three years with continued use/operation, for approximately six years total use of the temporary bridge housing facility. A third-party service provider will operate the Project for the City and it is anticipated that a lease or similar operating and/or funding agreement may be executed. The purpose of the Project is to provide approximately three additional years, to the previously approved three years, of emergency shelter and case management for people experiencing homelessness to help bridge their transition from living on the streets to finding services and, ultimately, living in transitional and/or permanent housing. Project beneficiaries include the homeless community, the public, and local businesses. (Please see the attached narrative for more details.)

On _____, 2023, the City Council determined the Project was exempt under the California Environmental Quality Act (CEQA) and approved the Project.

CONTACT PERSON Maria Martin (maria.martin@lacity.org)	TELEPHONE NUMBER (213) 485-5753
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EXEMPT STATUS:	<u>CITY CEQA GUIDELINES</u>	<u>STATE CEQA GUIDELINES</u>	<u>CA PUBLIC RESOURCE CODE</u>
<input checked="" type="checkbox"/> STATUTORY		15269(c)	21080(b)(4) & 21080.27

JUSTIFICATION FOR PROJECT EXEMPTION: This Project is statutorily exempt from CEQA under Public Resources Code, Section 21080(b)(4), as a specific action necessary to prevent or mitigate an emergency, and as reflected in Article 18 of the State CEQA Guidelines, Section 15269(c); and Public Resources Code, Section 21080.27 (AB 1197), applicable to City of Los Angeles emergency homeless shelters. This determination is consistent with the NOE supporting documents in Council File (CF) No. 19-0877, and consistent with, and supported by, the City Council's prior action and resolution approving the development and use of this shelter (see attached narrative).

IF FILED BY APPLICANT, ATTACH CERTIFIED DOCUMENT OF EXEMPTION FINDING

SIGNATURE: Maria Martin		TITLE: Environmental Affairs Officer Environmental Management Group	DATE:
FEE: 75.00 _____	RECEIPT NO.	REC'D BY	DATE

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Figure 1: Project Site Location



EXEMPTION NARRATIVE

I. PROJECT DESCRIPTION, CONTINUED

The Project consists of an approximately three-year lease extension or new lease, and operation of the Bridge Housing for approximately three additional years in furtherance of providing an emergency homeless shelter in the City of Los Angeles at the bridge housing facility located on a YWCA of Greater LA-owned property at 1215 Lodi Place that was found to be statutorily exempt and approved by City Council on December 11, 2019 (CF No. 19-0877). The documents supporting those determinations (CF No. 19-0877) are incorporated herein by reference as support for this CEQA determination. This Project continues the existing use of the facility that was built, and is currently operating, without substantial change.

The shelter, which opened in February 26, 2020, will continue to be operated consistent with the Los Angeles Homeless Services Authority's (LAHSA) program requirements for bridge shelters including, but not limited to *Crisis Housing Program for All Populations Scope of Required Services* (LAHSA, 2020-2021). A third-party service provider, e.g., People Assisting the Homeless (PATH), will operate the project for the City, as it has been for the past several years, and it is anticipated that a lease, lease extension, or similar operating and/or funding agreements may be executed with the service provider, County, and/or LAHSA.

Project operation continues per a security plan consistent with the LAHSA's standards. By creating a stable environment and providing access to basic needs, clients can maintain a consistent connection to outreach workers and case managers to create a path to interim or permanent housing. The shelter will continue to be operated consistent with LAHSA program requirements for crisis and bridge shelters including, but not limited to, LAHSA's Scope of Required Services and Program Standards, as noted in the references section.

The Project site is zoned RD1.5-1XL with a Low Medium Residential land use designation and is located northwest of the intersection of Lodi Place and Lexington Avenue. Surrounding parcels to the north, south, and east and west are zoned for Low Medium II Residential land uses.

II. PROJECT HISTORY

A. Homelessness Imposes a Loss of, or Damage to, Life, Health, Property, and to Essential Public Services in the City

Homelessness presents a danger of loss or damage to the health and property of the people of the City and an undue burden on essential public services. Based on information from the Census and the Los Angeles Homeless Services Authority (LAHSA), in 2020, homeless persons constituted approximately 1.07 percent of the City's population. (U.S Census Bureau, 2021 & LAHSA, 2020)

In 2018, homeless persons constituted 13.5 percent of LAFD's total patient transports to a hospital, meaning a homeless person is 17 percent more likely to require emergency hospital transportation than the general population (LAFD Battalion Chief and Paramedic Douglas Zabilski, 2019). Studies have shown that individuals identified as homeless utilize health care services more frequently than comparable non-homeless individuals of the same age, gender, and low-income status, particularly high-cost services such as Emergency Room (ER) visits and psychiatric hospitalizations (Hunter, 2017) (Hwang SW, 2013).

Los Angeles County's Chief Executive Officer reported the County spent \$965 million on health, law enforcement, and social services toward individuals experiencing homelessness in fiscal year 2014–2015 (Wu, 2016). Consistent with that report, a 1998 study in the *New England Journal of Medicine* found that homelessness was associated with substantial excess costs per hospital stay in New York City, with homeless patient staying in the hospital 36 percent longer per admission on average than other patients (Salit, *Hospitalization Costs Associated with Homelessness in New York City*, 1988).

Homelessness also causes significant danger to the health and lives of persons who are homeless. Homeless individuals living in the City are frequent crime victims. In 2018, LAPD reported 2,965 instances where a homeless individual was a victim of a serious crime, including homicide, rape, aggravated assault, theft, and arson (also known as "Part 1 Crimes.") (Commander Dominic H. Choi, 2019). This compares to 1,762 such crimes in 2017, a 68 percent increase (*Id.*). This dramatic increase in Part 1 Crime statistics may be due to more rigorous LAPD data collection methodologies, however it is consistent with the increasing incidence of homelessness documented in June of 2019 detailed below (*Id.*). During the first six months of 2020, LAPD reported 1,738 instances where a homeless individual was a victim of a serious crime including homicide, rape, aggravated assault, burglary, and larceny (LAPD, 2020).

Overall, in 2018, the LAPD reported 6,671 instances in total where a homeless individual was a Part 1 Crime victim and/or suspect, among the 31,285 estimated homeless individuals throughout the City (Commander Dominic H. Choi, 2019). This means that in 2018 there was approximately one Part 1 Crime per every 4.68 homeless individuals in the City. By comparison, for the same year LAPD reported 129,549 total Part 1 Crimes Citywide among an estimated population of 4,054,400 City residents, or approximately one Part 1 crime per every 31.29 City residents. Accordingly, the rate of Part 1 crimes among homeless individuals in 2018 was approximately seven times higher than the rate among the City population as a whole (*Id.*). According to the LAPD Use of Force Year-End Report in 2020, among the 41,290 estimated homeless individuals throughout the City, 7,872 persons were reported to be victims of a violent or property crime. In the same year, 5,722 persons experiencing homelessness were reported as suspects of a violent or property crime. (LAPD, 2020). On October 4, 2018 and again on February 6, 2019, the Los Angeles County Department of Public Health identified an outbreak of endemic flea-borne typhus in downtown Los Angeles among persons experiencing homelessness. On September 19, 2017, the Los Angeles County Department of Public Health declared a Hepatitis A virus outbreak among persons who are homeless and/or use illicit drugs in the County. Likewise, a January 2018 report from the Los Angeles County Department of Mental Health reported that data from the Los Angeles County Medical Examiner-

Corner's showed that a significant number of deaths in the homeless population were caused by treatable conditions such as arteriosclerotic cardiovascular disease, pneumonia, diabetes, cancer, cirrhosis, severe bacterial infections and other conditions (Choi, 2019). As noted more recently by the Board of Supervisors for the County of Los Angeles on October 29, 2019:

Mortality rates for people experiencing homelessness are much higher than those for the general population, have risen in the County over the past five years, and are expected to increase again for 2019. A recent analysis by the County's Department of Public Health on mortality rates and causes of death among people experiencing homelessness shed critical light on this issue and provided sobering data on recent trends. The overall mortality rate, which accounts for increases in the total homeless population over the 6-year period from 2013 to 2018, increased each year from 1,382 per 100,000 to 1,875 deaths per 100,000, with the total number of deaths among people experiencing homelessness increasing each year from 536 in 2013 to 1,047 in 2018. The leading causes of death included coronary heart disease (22%) and unintentional drug and alcohol overdose (21%), indicating that there are opportunities for interventions to prevent premature deaths (Supervisor Ridley-Thomas, Supervisor Solis, 2019) (Department of Public Health, 2019).

These significant adverse health impacts suffered by the homeless in the City and County of Los Angeles are consistent with the impacts identified by a well-established body of expert social science studies that document the significant adverse health and welfare impacts experienced by homeless persons in the United States and in other countries, which the homeless in the City and County experience as well. Some of that research has documented the following impacts upon homeless persons:

Mortality Rates. A study of the mortality rates of sheltered homeless people in New York City between 1987 and 1994 documented that homeless men died at a rate more than twice that of other residents of New York, and that homeless women died at a rate more than 3.7 times greater than other New York residents (Barrow, Susan M., PhD, Daniel B. Herman, DSW, Pilar Cordova, BA, and Elmer L. Struening, PhD, 1999). A study conducted between 1985 and 1988 in Philadelphia found that the mortality rate among homeless persons in Philadelphia was nearly four times greater than for the general population (Hibbs, Jonathan R., MD, et. al., 1994). A review of five years of data between 2000 and 2005 in Glasgow, Scotland found that homelessness is, itself, is an independent risk factor for death, distinct from other specific causes (Morrison, 2009).

Access to Healthcare. A 2003 nationwide survey of homeless persons documented that homeless adults reported substantial unmet needs for multiple types of health care (Baggett, Travis P., MD, MPH, James J. O'Connell, MD, Daniel E. Singer, MD, and Nancy A. Rigotti, MD, 2010). The report found 73 percent of the respondents reported at least one unmet health need, including an inability to obtain needed medical or surgical care (32%), prescription medications (36%), mental health care (21%), eyeglasses (41%), and dental care (41%) (*Id.*).

AIDs Impacts. A study of San Francisco residents diagnosed with AIDS from 1996 through 2006 and reported to the San Francisco Department of Public Health demonstrated that homeless persons with HIV/AIDS have greater morbidity and mortality, more hospitalizations, less use of antiretroviral therapy, and worse medication adherence than HIV infected persons who are stably housed (Schwarcz, Sandra K, Ling C Hsu., Eric Vittinghoff, Annie Vu, Joshua D Bamberger and Mitchell H Katz, 2009).

Cancer Impacts. A study of 28,000 current and formerly homeless individuals in Boston documented that homeless men saw a significantly higher cancer incident rate than expected compared to the general Massachusetts general population, and that homeless women and men experienced significantly higher cancer mortality rates than the Massachusetts general population (Baggett, Travis P et al., 2015).

B. Unexpected and Unabated Dramatic Surge in Homelessness

A 2017 Rand Corporation study reported the County of Los Angeles as having the highest rate in the United States of unsheltered individuals who experience homelessness (Hunter, Sarah B., Melody Harvey, Brian Briscoe, and Matthew Cefalu, 2017). The impacts of homelessness upon the homeless and upon the community, in terms of the danger to or loss of life, property, health and burden on public services is exacerbated in the City due the very size of the City's homeless population. The homeless shelter crisis and the rise in homelessness are the type of emergency situations that led the State to adopt AB 1197, an urgency statute addressing homelessness that was deemed necessary for the immediate preservation of the public peace, health, or safety and for the critical necessity to address the shelter and homeless crisis within the City of Los Angeles.

The City Council declared a homeless shelter crisis pursuant to Government Code Section 8698, et seq. on April 17, 2018 (The Honorable M. Bonin & M. O'Farrell, 2019), which is currently in effect (The Honorable M. Bonin & M. Harris-Dawson, 2019). Following significant investment of resources by both the County and City, the 2018 Homeless Count showed progress in reducing homelessness, documenting a 5.5 percent overall decrease in the number of persons experiencing homelessness in LA County (LAHSA, 2020).

Table 1 - 2018 Homeless Count Data Summary presents the data revealed by the 2018 Homeless Count concerning the City of Los Angeles, as documented in the 2018 Data Summary in Table 1 (LAHSA, 2020).

Table 1		
2018 Homeless Count Data Summary		
	Number of Individuals	Change from 2017
Sheltered Homeless	8,398	6% Decrease

Table 1		
2018 Homeless Count Data Summary		
Unsheltered Homeless	22,887	5.3% Decrease
Total Homeless Persons	31,285	5.5% Decrease

Despite these efforts and the initial progress shown in 2018, the revised 2019 Homeless Count, released in July 22, 2020, unexpectedly documented a dramatic increase in the number of individuals experiencing both sheltered and unsheltered homelessness in (LAHSA, 2020) *Table 2 - 2019 Homeless Count Data Summary* presents the data revealed by the 2019 Homeless Count concerning the City of Los Angeles, as documented in the 2019 Data Summary as shown in Table 2 (LAHSA, 2020).

Table 2		
2019 Homeless Count Data Summary (Revised 07/20/2020)		
	Number of Individuals	Change from 2018
Sheltered Homeless	8,944	6.5% Increase
Unsheltered Homeless	26,606	16.2% Increase
Total Homeless Persons	35,550	13.7% Increase

LAHSA published its 2020 Homeless Count, released in July 20, 2020, which shows that the homelessness emergency in the City of Los Angeles continues unabated. The documented number of individuals experiencing both sheltered and unsheltered homelessness dramatically increased yet again, as shown in *Table 3 - 2020 Homeless Count Data Summary* (LAHSA, 2020).

Table 3		
2020 Homeless Count Data Summary		
	Number of Individuals	Change from 2019
Sheltered Homeless	12,438	39% Increase
Unsheltered Homeless	28,852	8.4% Increase
Total Homeless Persons	41,290	16.1 % increase

LAHSA prepared a 2021 shelter point-in-time count for the City of Los Angeles that estimated the number and demographic characteristics of the sheltered homeless population on a single night in January 2021. Released in July 20, 2021, it shows that the

homelessness emergency in the City of Los Angeles continues unabated and uncertain. The documented number of individuals experiencing sheltered homelessness increased yet again, as shown in *Table 4 - 2021 Housing Inventory Count and Shelter Count Data Summary* (LAHSA, 2021). The 2021 unsheltered street count could not be conducted due to the COVID-19 pandemic. However, the availability of vaccinations enabled the resumption of the Homeless Count for February 2022 with appropriate precautions (LAHSA, 2022).

Table 4 2021 Housing Inventory Count and Shelter Count Data Summary		
	Number of Individuals	Change from 2020
Sheltered Homeless	12,503	1% Increase

C. Emergency Related to COVID-19 Pandemic Impacting Homeless Community

In addition to the crisis of growing homelessness, the COVID-19 pandemic is impacting homeless persons. On March 4, 2020, the Governor proclaimed a State of Emergency for the State of California (Governor Gavin Newsom, 2020), and the Mayor of the City of Los Angeles declared a local emergency related to the threat of the COVID-19 pandemic affecting the local population (Mayor Eric Garcetti, 2020). The City is facing an unprecedented emergency at the current time due to the sudden occurrence of the COVID-19 pandemic, and this emergency is particularly concerning for the imminent threat it poses to the City's homeless population.

On March 11, 2020, the State Department of Health issued guidance for protecting homeless Californians from COVID-19, which noted the following:

“We know that individuals experiencing homelessness are at greater risk of having an untreated and often serious health condition. This vulnerable population also has a higher risk of developing severe illness due to COVID-19,” said Dr. Mark Ghaly, Secretary of the California Health and Human Services Agency. “It is important that we act now to protect this population and the compassionate people who serve them.” (Corey Egel, 2020.)

The homeless often live unsheltered, unprotected from the elements and in close contact and proximity to other individuals in the homeless community. As noted above, the homeless population is substantially more prone to underlying health conditions. The State Department of Public Health additionally states that populations “with compromised immune systems, and people with certain underlying health conditions like heart disease, lung disease and diabetes, for example, seem to be at greater risk of serious illness.” (California Dept. of Public Health, 2020). Thus, exposure to COVID-19 in the homeless population is an imminent concern for the damage it will cause on these susceptible individuals.

On March 12, 2020, the Governor's Executive Order No. N-25-20 noted the "need to secure numerous facilities to accommodate quarantine, isolation, or medical treatment of individuals testing positive for or exposed to COVID-19." (Governor Gavin Newsom, 2020). On March 18, 2020, the Governor issued Executive Order No. N-32-20 (Governor Gavin Newsom, 2020), which further noted imminent impacts to the homeless, as follows:

[T]he emergency of COVID-19 necessitates a more focused approach, including emergency protective measures to bring unsheltered Californians safely indoors, expand shelter capacity, maintain health and sanitation standards and institute medically indicated interventions, and add new isolation and quarantine capacity to California's shelter and housing inventory to slow the spread of the pandemic....

The Governor stated that "[p]eople experiencing homelessness are among the most vulnerable to the spread of COVID-19," and "California is deploying massive resources to get these vulnerable residents safely into shelter, removing regulatory barriers and securing trailers and hotels to provide immediate housing options for those most at risk. Helping these residents is critical to protecting public health, flattening the curve and slowing the spread of COVID-19." (California Governor, Press Release (Governor Gavin Newsom, 2020).

On March 19, 2020, the Governor issued a stay-at-home order directing residents to stay home or at their place of residence (Governor Gavin Newsom, 2020). It noted "in a short period of time, COVID-19 has rapidly spread throughout California, necessitating updated and more stringent guidance from federal, state, and local public health officials." (Governor Gavin Newsom, 2020). Similar local Safer-at-Home orders followed (County of Los Angeles Public Health Department, 2020) (Mayor Eric Garcetti, 2020). The City's Safer at Home order particularly noted the following:

City of Los Angeles officials and contracted partners responsible for homelessness outreach shall make every reasonable effort to persuade such residents to accept, if offered, temporary housing or shelter, as the Health Officer of the County of Los Angeles recommends that sheltering individuals will assist in reducing the spread of the virus and will protect the individual from potential exposure by allowing the individual access to sanitation tools (Mayor Eric Garcetti, 2020).

In the United States District Court Central District of California case of *LA Alliance for Human Rights Et Al. vs. the City of Los Angeles, Et al.* Case No. CV 20-02291 DOC (The Honorable Judge David O. Carter, 2020), concerning homelessness, the Court entered a May 2020 injunction that had ordered the City of Los Angeles in partnership with the County of Los Angeles, to protect a particular subset of persons experiencing homelessness, finding they are exposed to severely heightened public health risks as a result of where they live (The Honorable Judge David O. Carter, 2020). Although the Court vacated that order on June 18, 2020, in favor of a homeless shelter agreement between the City and County, the Court retained its right to re-impose the May 2020 injunction. The Court's May 2020 findings concerning the emergency situation faced by homeless persons, therefore, is relevant to understanding the emergency situation.

The Injunction found that the combined risks of health impacts from living near freeways and the on-going Covid-19 pandemic constitute an emergency. The Court found that it is unreasonably dangerous for humans to live in areas which have deleterious health impacts and can shorten a homeless person's life expectancy by decades. These locations near freeways, for example, could be contaminated with lead or other carcinogenic substances and also increase the danger that a homeless person will be struck by a vehicle or injured in the event of an earthquake or crash. Camps in these locations can also burden the general public—for example, by posing potential hazards to passing motorists, or by making sidewalks and other rights-of-way inaccessible to individuals with disabilities.

The Court further found that providing housing for persons experiencing homelessness will help stop the spread of COVID-19 persons experiencing homelessness and will also help reduce the likelihood that the disease will spread throughout the greater Los Angeles community.

Taken together, the unexpected and dramatic increase in homelessness in the City and County of Los Angeles identified first in 2019, continues unabated in 2022 and was exacerbated by the COVID-19 pandemic posing a critical emergency situation in the City of Los Angeles. This situation presents documented dangers to health, life, property and a burden on public resources which presents an emergency as defined by CEQA as explained below. Furthermore, the State has created additional CEQA exemptions applicable in the City of Los Angeles concerning homelessness and homeless shelters.

III. THE PROJECT IS EXEMPT FROM FURTHER CEQA REVIEW

A. The Project is Exempt Pursuant to the Emergency CEQA Statutory Exemption (PRC Section 21080(b)(4))

Public Resources Code Section 21080(b)(4) provides that CEQA does not apply, to "specific actions necessary to prevent or mitigate an emergency." Public Resources Code section 21060.3 defines Emergency as, "a sudden, unexpected occurrence, involving a clear and imminent danger, demanding immediate action to prevent or mitigate loss of, or damage to, life, health, property, or essential public services." Section 21060.3 further provides that Emergency, "includes such occurrences as fire, flood, earthquake, or other soil or geologic movements, as well as such occurrences as riot, accident, or sabotage."

Finally, 14 California Code of Regulations (Governor's Office of Planning and Research, 2018) Section 15269, "Emergency Projects," provides examples of emergency projects exempt from the requirements of CEQA, including the following:

- (c) Specific actions necessary to prevent or mitigate an emergency. This does not include long-term projects undertaken for the purpose of preventing or mitigating a situation that has a low probability of occurrence in the short-term, but this exclusion does not apply

- (i) if the anticipated period of time to conduct an environmental review of such a long-term project would create a risk to public health, safety or welfare, or

- (ii) if activities (such as fire or catastrophic risk mitigation or modifications to improve facility integrity) are proposed for existing facilities in response to an emergency at a similar existing facility.

The Project is a specific action necessary to prevent or mitigate an emergency – the conditions arising from a sudden and unexpected dramatic rise in the City’s already dangerously large homeless population, now adversely impacted by the COVID-19 pandemic for all of the reasons set forth above in Part II (Project History). The Project, therefore is exempt from CEQA environmental review pursuant to Section 21080(b)(4).

B. The Project is Exempt Pursuant to AB 1197 Codified at PRC Section 21080.27

Assembly Bill 1197 (Santiago, 2019) was signed into law on September 26, 2019, which adopted Section 21080.27 of the California Public Resources Code (PRC) and created a statutory exemption for compliance with CEQA for emergency shelter projects located within the City of Los Angeles. The intent of AB 1197 is to help the City of Los Angeles address its homeless crisis and is an urgency statute that is deemed necessary for the immediate preservation of the public peace, health, or safety and for the critical necessity to address the shelter and homeless crisis. AB 1197 took immediate effect on September 26, 2019 in order to address the unique circumstances faced by the City of Los Angeles and to expedite the development of emergency homeless shelters. As noted in the following sections, this shelter project complies with the requirements in AB 1197, and thus the Project is exempt from CEQA pursuant to AB 1197 (PRC § 21080.27).

1. City of Los Angeles Declaration of a Shelter Crisis

Public Resources Code, section 21080.27(a)(2) requires that emergency shelters be approved during a shelter crisis under Government Code, section 8698.2. The City of Los Angeles City Council declared a homeless shelter crisis pursuant to Government Code Section 8698, et seq. on April 17, 2018 (The Honorable M. Bonin & M. O’Farrell, 2019), which is currently in effect (The Honorable M. Bonin & M. Harris-Dawson, 2019).

2. The Project Meets the Definition of a Low Barrier Navigational Center in Government Code Section 65660

Under AB1197, emergency shelters must meet the definition of “Low Barrier Navigational Center” in Government Code Section 65660, which defines Low Barrier Navigation Center as a “Housing First, low-barrier, service-enriched shelter focused on moving people into permanent housing that provides temporary living facilities, while case managers connect individuals experiencing homelessness to income, public benefits, health services, shelter and housing. The City builds and operates emergency shelters, such as this Project, to be operated as low barrier navigation centers consistent with Government Code Section 65660.

Service-Enriched Shelter with Case Managers Connecting to Services. The requirements are met by this Project for a “service-enriched shelter focused on moving people into permanent housing that provides temporary living facilities, while case managers connect families experiencing homelessness to income, public benefits, health

services, shelter and housing.” This Project provides temporary housing, with case managers staffing the facility that provide connections to homeless family services and assistance for the occupants. This is one of the fundamental purposes of this shelter project. For example, the Project’s programs include Trauma Informed Care policies and procedures that involve understanding, recognizing, and responding to the effects of all types of trauma. Trauma Informed Care also emphasizes physical, psychological and emotional safety for both families and providers, and helps families rebuild a sense of control and empowerment. Trauma Informed services take into account an understanding of trauma in all aspects of service delivery and place priority on the trauma survivor’s safety, choice, and control. Trauma Informed Care services create a culture of nonviolence, learning, and collaboration.

The Project will be operated by service providers coordinated with the Los Angeles Homeless Services Authority (LAHSA). The intention of this emergency shelter is to provide persons experiencing homelessness with some stability, so that they can more easily maintain contact with housing navigation and/or case management services to facilitate safe and supportive housing placement.

Per LAHSA’s Crisis and Bridge Housing Scope of Required Services, which will be followed for operating the shelter in this Project, service providers that oversee an emergency shelter must provide case management services and develop a Housing Stability Plan with each person. The shelter will program implement a case management and service plan known as Housing-Focused Case Management and Support Services (HFCMSS). HFCMSS includes but is not limited to: support with completing housing applications, accompanying the individual to housing appointments and/or leasing appointments, and other support associated with the housing placement process. The primary objective of HFCMSS is to extend support to individuals through an individualized case management relationship that will ultimately translate to increased housing stability. The HFCMSS offers services to connect individuals to permanent housing. Case Managers present at the shelter make rapid connections to a broad continuum of resources and permanent housing, emphasizing a short-term stay.

HFCMSS connects families to a Housing Navigator who assists individuals to gain access to permanent housing through referrals to housing programs (such as RRH, Permanent Supportive Housing, affordable housing, etc.). A case manager is assigned to an individual when the person enters the program and then helps the participant establish a connection to a Housing Navigator. A Housing Navigator assists individuals with Housing Navigation services. Housing Navigation services are available to individuals to support their housing placement goals and must be focused on assisting the participant in identifying and accessing permanent housing within the general ninety (90) days. Housing Navigation services may be provided onsite or offsite, and may also require participants’ to be accompanied to off-site appointments.

Case management must be conducted on a regular and routine basis and must be routinely documented. The content and outcome of case management meetings with individuals are entered into a housing management information system with case notes that are tracked in the system. Housing-focused case management sessions are

dedicated to assessing and reassessing needs, educating individuals on community resource opportunities, developing Housing Stability Plans, scheduling appointments, and providing necessary follow up to ensure housing stability plans are progressing on schedule and needs are adequately being addressed.

As noted in LAHSA's Program Standards, supportive services for the shelters focus on the income, resources, skills and tools needed to pay rent, comply with a lease, take reasonable care of a housing unit, and avoid serious conflict with other tenants, the landlord, and/or the police. The Program Standards also require service providers to utilize and maintain referral networks with specific lists of health services and public benefit services for connecting occupants to those benefits. Thus, the project is a service-enriched shelter focused on moving individuals into permanent housing that provides temporary living facilities, while case managers connect individuals experiencing homelessness to income, public benefits, health services, shelter and housing.

Housing First. The Project is a "Housing First" shelter pursuant to Government Code Section 65660. Also, in being such a Housing First shelter, the project complies with Chapter 6.5 of Division 8 of the Welfare and Institutions Code (commonly referred to as the Housing First Law) as required by Government Code Section 65662 (discussed further below). "Housing First" means the evidence-based model that uses housing as a tool, rather than a reward, for recovery from homelessness, and that centers on providing or connecting people experiencing homelessness to permanent housing as quickly as possible. Housing First providers offer services as needed and requested on a voluntary basis and that do not make housing contingent on participation in services.

Housing First also includes time-limited rental or services assistance, so long as the housing and service provider assists the recipient in accessing permanent housing and in securing longer-term rental assistance, income assistance, or employment. In the event of an eviction, programs shall make every effort, which shall be documented, to link tenants to other stable, safe, decent housing options. Exit to homelessness should be extremely rare, and only after a tenant refuses assistance with housing search, location, and move-in assistance. If resources are needed to successfully divert an individual from entry into the homelessness system, a referral must immediately be made to a CES Diversion/Prevention program. In order to identify other permanent housing options, service providers continue to have such problem solving conversations with the individual while residing in Crisis and Bridge Housing. More broadly, the project includes a housing and services plan and housing-focused case management, both with an orientation towards supporting individuals to exit to safe and stable housing. This Project meets the above-noted Housing First requirements.

The emergency shelters are operated by service providers coordinated through LAHSA. All service providers must comply with LAHSA's Scope of Required Services, Program Standards, and Facility Standards. Per LAHSA's Program Standards, all eligible participants are to be served with a Housing First approach. LAHSA's CES for Families' Principles and Practices that were approved by the CES Policy Council on August 23, 2017 shall be used to guide the development of systems-level policy and to ensure transparent and accountable decision-making with privately owned Service Providers who enter into a partnership with LAHSA. The basic underlying principle of LAHSA's

System Components is that access to housing is the primary need for its program participants. Services are voluntary and not required to enter into a shelter. Individuals will not be rejected or exited from participation in the emergency shelter due to any unnecessary barriers.

The City's shelters are intended to be a Housing First program focused on quickly moving individuals experiencing homelessness into permanent housing and then providing the additional supports and services each person needs and wants to stabilize in that housing. The basic underlying Housing First principle is that individuals are better able to move forward with their lives once the crisis of homelessness is over and they have control of their housing. The City's emergency shelter will, provide a safe, low barrier, housing-focused, and homeless services support in a twenty-four (24) hour residence to help individuals who experience homelessness that meet the above-noted requirements for Housing First. One of the core components of the Housing First model is that longer-term housing accepts referrals directly from shelters. The City's shelters, including this Project, are primarily focused on connecting, transitioning, and referring homeless individuals into such permanent housing as quickly as possible in the Housing First model, and accepting occupants through the crisis response system. The intention of this emergency shelter project is to provide participants with some stability, so that they can more easily maintain contact with housing navigation and case management services and facilitate safe and supportive housing placement. Services in the City's shelters, including this Project, are never mandatory and cannot be a condition of obtaining the housing intervention. This Project will provide temporary housing, case managers and Housing Navigators staffed at the facility or offsite who provide connections to homeless services for the occupants. Based on the above-noted information, the project's emergency shelter meets the Housing First requirements relative to AB 1197.

Low Barrier. "Low Barrier" means the shelters use best practices to reduce barriers to entry, including but not limited to, the presence of partners (if it is not a population-specific site, such as for survivors of domestic violence or sexual assault, women, or youth); pets; storage for possessions; and privacy (such as partitions around beds in a dormitory setting or in larger rooms containing more than two beds, or private rooms). The City's shelters, including this Project, meet these requirements.

The Project provides approximately 94 beds 64 for women and 30 for Transitional Age Youth (TAY). This Project is population-specific, serving women and TAY. This Project is pet friendly and includes a pet area. Participants are allowed to bring their pets to the shelter. The Project has storage within each sleeping area for personal possessions or storage bins. The Project is designed to provide privacy to participants by providing each family or individual with their own sleeping space. There are separated sleeping spaces with communal bathrooms. Therefore, the project is managed and designed to allow the privacy of participants and is a pet friendly facility for participants who choose to be accompanied by their pets.

The Project uses low barrier best practices that reduce barriers to entry. They include pet friendly facilities, storage areas for some possessions, and management and design for individuals' privacy. All of the City's emergency shelters, including this project, meet

these requirements. Therefore, none of the noted conditions would preclude access to the project, and the project is considered crisis and bridge housing that is “low barrier” within the meaning of Government Code Section 65660 and AB 1197.

In sum, based on the above-noted information, which is additionally explained and provided with additional details in the documents from LAHSA cited in the Reference section to this document, the Project meets the definition of Low Barrier Navigation Center set forth in Government Code Section 65660.

3. The Project Complies with Government Code Section 65662

Under AB1197, emergency shelters must meet the four requirements identified in Government Code Section 65662(a) through (d), which are each discussed in turn in this section.

Connecting to Permanent Housing through a Services Plan. Government Code Section 65662(a) requires that Low Barrier Navigation Centers offer services to connect families and individuals to permanent housing through a services plan that identifies services staffing. This Project meets that requirement. As noted above, the Project includes housing-focused case management sessions that involve developing Housing Stability Plans/Housing and Services Plans, scheduling appointments, and providing necessary follow up to ensure housing stability plans are progressing on schedule and needs are adequately being addressed. This is required in LAHSA’s Scope of Required Services.

The Housing Stability Plan is the family or individual’s service plan that summarizes the participant’s housing goals, services needed, what will be provided, actions that need to be taken (by staff and the participant), and referrals that need to be made. Case managers develop the services plan in coordination with the family or individual right after intake and assessment, track the plan in a homeless management information system, and revise the plan as the family or person’s situation changes and steps are completed or revised accordingly.

Families and individuals are assisted with a range of activities that address the stated goals of the family or individual in the Housing Stability Plan, including but not limited to:

- Accessing personal identification (For quick referral to permanent housing)
- Accessing certification of the current income (For quick referral to permanent housing)
- Mainstream Benefits
- Substance Abuse services
- Mental Health Services
- Health Services
- Vocational Services
- Employment Services
- Educational Support
- Legal Services

- Life Skills Development
- Independent Living Program for Youth
- Transitional Housing Program for Youth
- CES and CoC Rapid Re-Housing Program
- Housing Navigation Assistance
- CoC Permanent Supportive Housing
- LA County Department of Health Services, Housing for Health or Housing and Jobs Collaborative
- LA County Department of Health Services, Countywide Benefits Entitlement Services Team
- LA County Department of Mental Health, Countywide Housing Assistance Program
- Veterans Administration Housing Programs
- Housing Opportunities for Persons with Aids (HOPWA) Housing
- Crisis Housing for Unaccompanied Youth
- Youth Family Reconnection Program

Progress and problems implementing the plan are reviewed and updated frequently.

Coordinated Entry System. Government Code Section 65662(b) requires Low Barrier Navigation Centers to be linked to a coordinated entry system allowing staff and co-locating staff to conduct assessments and provide services to connect families and individuals to permanent housing. This is required by LAHSA's Scope of Required Services and Program Standards. Thus, all City of Los Angeles homeless shelters, including this project, are linked to the Los Angeles County Coordinated Entry System, a centralized or coordinated assessment system designed to coordinate program participant intake, assessment, and referrals. The residents are prioritized through the coordinated entry system in the Los Angeles County Coordinated Entry System for safe and supportive housing resources. The City's collaborates with Los Angeles County Case Entry System and provides case management services to program participants through a Housing Stability Plan. Case managers must develop a Housing Stability Plan in coordination with the participant right after intake and assessment. The Housing Stability Plan must be tracked in a Homeless Management Information System (HMIS) along with the date of completion.

The shelter will collaborate with Los Angeles County Case Entry System Housing Navigators and case managers from other outside agencies to provide case management services to program participants. Los Angeles County Coordinated Entry System case managers work with participants and assist by facilitating services appointments; and then eventually help them find permanent housing.

Compliance with Welfare and Institutions Code. Government Code Section 65662(c) requires Low Barrier Navigation Centers comply with Chapter 6.5 of Division 8 of the Welfare and Institutions Code, which specifies the Housing First requirements. As noted above, the City's emergency shelters, including this project, are Housing First shelters, and thus they comply with this requirement.

Homeless Management Information System. Government Code Section 65662(d) requires Low Barrier Navigation Centers to have a system for entering stays, demographics, income, and exit destination through a local Homeless Management Information System designed to coordinate program participant intake, assessment, and referrals. These are required by LAHSA's Scope of Required Services and Program Standards. The City's emergency shelters use such a system in the Los Angeles Continuum of Care Homeless Management Information System (HMIS). In 2001, Congress directed the U.S. Department of Housing and Urban Development (HUD) to ensure the collection of more reliable data regarding the use of homeless programs. HUD required all Continuum of Care applicants to demonstrate progress in implementing a Homeless Management System (HMIS). LAHSA led a regional planning process, encompassing three Continuums of Care - Los Angeles, Glendale, and Pasadena. This process resulted in the selection of a system that would not only satisfy the HUD mandate, but would also provide the Los Angeles Continuum with a means to measure the effectiveness of programs serving homeless families. Presently, the Los Angeles Continuum of Care (LACoC) is part of a collaborative called the Los Angeles HMIS Collaborative. The LA HMIS Collaborative consists of three Continuums of Care (CoC): Los Angeles, Glendale, and Pasadena.

HMIS is a web-based application that is designed to collect information on the characteristics and service needs of homeless persons. The system allows agency users and the Los Angeles Homeless Services Authority (LAHSA) to use collected information for informed programmatic decision-making. Participating agencies collect and input standardized client-level and demographic data into the system, including client/household demographic details; relationships within a family and household; client/household income; client/household documents; case management and services; housing placements; and progress for housing retention. The HMIS includes a focus on Outcomes Management that sets and measures milestones and target achievements of clients and program performance.

Housing Stability Plans are tracked in a Homeless Management Information System (HMIS) along with the date of completion. Case managers complete a Monthly Update with the family to assess progress towards achieving the goals defined in the Housing Stability Plan. All services must be tracked, and information is provided to families in HMIS with the goal of the individuals achieving housing stability and sustainability upon exit from the program. Exit destination information is also collected. Accordingly, the Project meets the HMIS requirements.

In sum, based on the above-noted information, which is additionally explained in more detail in the documents from LAHSA cited in the Reference section to this document, the Project meets the requirements set forth in Government Code Section 65662.

4. The Project is in a Qualified Location Under AB 1197

AB 1197 requires that the site be located in "either a mixed-use or nonresidential zone permitting multifamily uses or infill site...." (PRC § 21080.27(a)(2).) The project is

considered an infill site because the site has been developed with, and its perimeter is surrounded by, qualified urban uses.

The lot is zoned RD1.5-1XL with a Low Medium Residential land use designation, which allows the use by right. The site is currently developed with a homeless shelter use, which is a residential use since it provides a temporary emergency residence for people experiencing homelessness, as an interim home until they can find more a permanent home. In addition, at least 75% of the perimeter of the site is surrounded by qualified urban uses. Residential uses are located to the north, east, south, and west of the Project site. Therefore, the site meets the definition of infill site. (City of L.A., Bureau of Engineering, Letter, 2023). Therefore, the Project site is surrounded by qualified urban uses and is considered a qualified location under AB 1197.

5. The Project Involves Qualified Funding Under AB 1197

AB 1197 (Public Resources Code Section 21080.27(a)(2)(A)-(D)) exempts emergency shelter projects from CEQA which have at least a portion of the funding from qualified sources. The City has determined that the Project is a homeless shelter project that would qualify for the other homeless shelter funding sources identified in AB 1197, and that those funds may be applied to this Project if such funding becomes available, which further qualifies this Project for the exemption under AB 1197. Because these funding sources are qualified funding sources under Public Resources Code Section 21080.27(a)(2)(A), the funding requirement may also be met. However, the Project meets other requirements as described elsewhere in this document.

Moreover, on December 11, 2019, the City Council approved Homeless Housing, Assistance, and Prevention (HHAP) Program Funding to operate the project (CF No. 19-0877), City Council action (12/11/2018)). HHAP is qualified funding under AB 1197, and therefore at least a portion of the funding of the project related to its establishment used qualified funding that qualifies the project for exemption under AB 1197. This is sufficient since it shows that the project is a qualified homeless shelter project.

6. The City's Actions Qualify under AB 1197 as Actions in Furtherance of Providing Emergency Shelters in the City of Los Angeles

AB 1197 (Public Resources Code Section 21080.27(b)(1)), exempts from CEQA "any activity approved by or carried out by the City of Los Angeles in furtherance of providing emergency shelters or supportive housing in the City of Los Angeles." This Project involves the continued lease and operation of an existing homeless shelter that the City constructed and operated for several years, as described above, which is located in the City of Los Angeles. The City will provide funding and enter into contracts with a qualified service provider and/or LAHSA, to lease and operate the emergency shelter. Therefore, the City's actions are in furtherance of providing emergency shelters in the City of Los Angeles and qualify for exemption from CEQA under AB 1197.

The Project Involves an Eligible Public Agency taking a Qualified Action under AB 1197

7. AB 1197 Conclusion

Based on the above-noted information, the Project is exempt from CEQA pursuant to Public Resources Code Section 21080.27.

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CITY OF LOS ANGELES
DEPARTMENT OF PUBLIC WORKS
BUREAU OF ENGINEERING
1149 S. BROADWAY, 7th FLOOR
LOS ANGELES, CALIFORNIA 90015
CALIFORNIA ENVIRONMENTAL QUALITY ACT
NOTICE OF EXEMPTION
(Articles II and III - City CEQA Guidelines)

Submission of this form is optional. The form shall be filed with the County Clerk, 12400 E. Imperial Highway, Norwalk, California, 90650, pursuant to Public Resources Code Section 21152(b). Pursuant to Public Resources Code Section 21167(d), the filing of this notice starts a 35-day statute of limitations on court challenges to the approval of the project.

LEAD CITY AGENCY AND ADDRESS: City of Los Angeles c/o Bureau of Engineering (BOE) 1149 S. Broadway, MS 939 Los Angeles, CA 90015	COUNCIL DISTRICT 14
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PROJECT TITLE: Bridge Housing at 711 N. Alameda Street (El Puente) Lease	LOG REFERENCE C.F. 20-0841
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PROJECT LOCATION: Parking Lot 5, 711 North Alameda Street, Central City Community Plan Area of the City of Los Angeles (City), Los Angeles County (see Figure 1, Project Location, T.G. 634 G3)

DESCRIPTION OF NATURE, PURPOSE, AND BENEFICIARIES OF PROJECT: The Bridge Housing at 711 N. Alameda Street (El Puente) (Project) consists of an extended, or new lease, for approximately three years with continued use/operation, for approximately six years total use of the temporary bridge housing facility. A third-party service provider will operate the Project for the City and it is anticipated that a lease or similar operating and/or funding agreement may be executed. The purpose of the Project is to provide approximately three additional years, to the previously approved three years, of emergency shelter and case management for people experiencing homelessness to help bridge their transition from living on the streets to finding services and, ultimately, living in transitional and/or permanent housing. Project beneficiaries include the homeless community, the public, and local businesses. (Please see the attached narrative for more details.)

On _____, 2023, the City Council determined the Project was exempt under the California Environmental Quality Act (CEQA) and approved the Project.

CONTACT PERSON Maria Martin (maria.martin@lacity.org)	TELEPHONE NUMBER (213) 485-5753
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EXEMPT STATUS:	<u>CITY CEQA GUIDELINES</u>	<u>STATE CEQA GUIDELINES</u>	<u>CA PUBLIC RESOURCE CODE</u>
<input checked="" type="checkbox"/> STATUTORY		15269(c)	21080(b)(4) & 21080.27

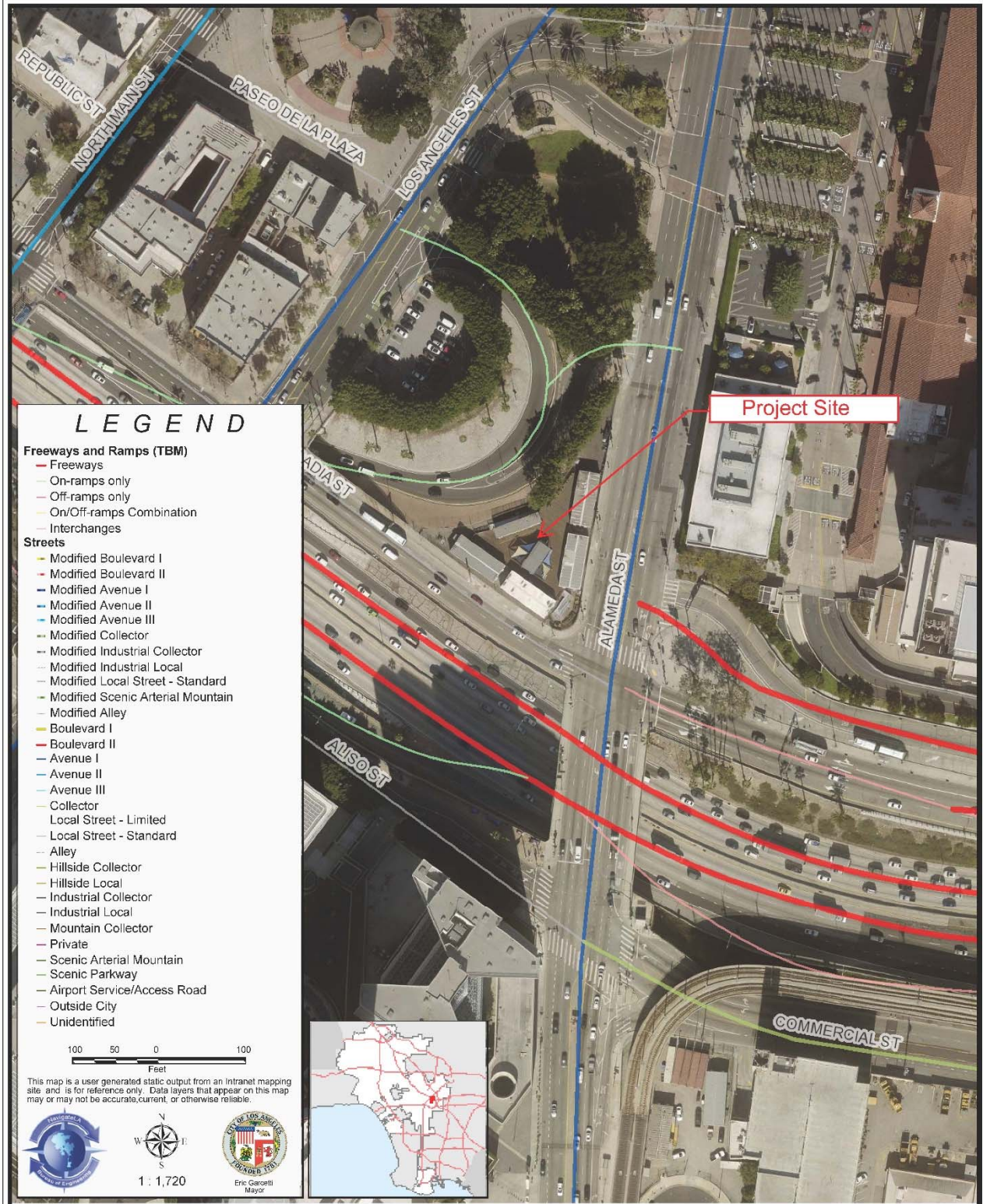
JUSTIFICATION FOR PROJECT EXEMPTION: This Project is statutorily exempt from CEQA under Public Resources Code, Section 21080(b)(4), as a specific action necessary to prevent or mitigate an emergency, and as reflected in Article 18 of the State CEQA Guidelines, Section 15269(c); and Public Resources Code, Section 21080.27 (AB 1197), applicable to City of Los Angeles emergency homeless shelters. This determination is consistent with the NOE supporting documents in Council File (CF) No. 18-0044, and consistent with, and supported by, the City Council's prior action and resolution approving the development and use of this shelter (see attached narrative).

IF FILED BY APPLICANT, ATTACH CERTIFIED DOCUMENT OF EXEMPTION FINDING

SIGNATURE: Maria Martin		TITLE: Environmental Affairs Officer Environmental Management Group	DATE:
FEE: 75.00 _____	RECEIPT NO.	REC'D BY	DATE

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FIGURE 1: PROJECT LOCATION



EXEMPTION NARRATIVE

I. PROJECT DESCRIPTION, CONTINUED

The Project consists of an approximately three-year lease extension or new lease, and operation of the Bridge Housing for approximately three additional years in furtherance of providing an emergency homeless shelter in the City of Los Angeles at the bridge housing facility located on a City-owned property at 711 N. Alameda Street that was found to be categorically exempt and approved by City Council on March 9, 2018 (CF No. 18-0044). The documents supporting those determinations (CF No. 18-0044) are incorporated herein by reference as support for this CEQA determination. This Project continues the existing use of the facility that was built, and is currently operating, without substantial change.

The shelter, which opened in August 2018, provides 45 beds and will continue to be operated consistent with the Los Angeles Homeless Services Authority's (LAHSA) program requirements for bridge shelters including, but not limited to *Crisis Housing Program for All Populations Scope of Required Services* (LAHSA, 2020-2021). A third-party service provider, e.g., People Assisting the Homeless (PATH), will operate the project for the City, as it has been for the past several years, and it is anticipated that a lease, lease extension, or similar operating and/or funding agreements may be executed with the service provider, County, and/or LAHSA.

Project operation continues per a security plan consistent with the LAHSA's standards. By creating a stable environment and providing access to basic needs, clients can maintain a consistent connection to outreach workers and case managers to create a path to interim or permanent housing. The shelter will continue to be operated consistent with LAHSA program requirements for crisis and bridge shelters including, but not limited to, LAHSA's Scope of Required Services and Program Standards, as noted in the references section.

The Project site is zoned PF-1VL and C4-1VL which are non-residential and mixed-use zones that allow for multi-family uses under certain circumstances. In addition, at least 75% of the perimeter of the site is surrounded by qualified urban uses. There are commercial uses to west and transportation facilities to the east and south of the site.

II. PROJECT HISTORY

A. Homelessness Imposes a Loss of, or Damage to, Life, Health, Property, and to Essential Public Services in the City

Homelessness presents a danger of loss or damage to the health and property of the people of the City and an undue burden on essential public services. Based on information from the Census and the Los Angeles Homeless Services Authority (LAHSA), in 2020, homeless persons constituted approximately 1.07 percent of the City's population. (U.S Census Bureau, 2021 & LAHSA, 2020)

In 2018, homeless persons constituted 13.5 percent of LAFD's total patient transports to a hospital, meaning a homeless person is 17 percent more likely to require emergency hospital transportation than the general population (LAFD Battalion Chief and Paramedic Douglas Zabilski, 2019). Studies have shown that individuals identified as homeless utilize health care services more frequently than comparable non-homeless individuals of the same age, gender, and low-income status, particularly high-cost services such as Emergency Room (ER) visits and psychiatric hospitalizations (Hunter, 2017) (Hwang SW, 2013).

Los Angeles County's Chief Executive Officer reported the County spent \$965 million on health, law enforcement, and social services toward individuals experiencing homelessness in fiscal year 2014–2015 (Wu, 2016). Consistent with that report, a 1998 study in the *New England Journal of Medicine* found that homelessness was associated with substantial excess costs per hospital stay in New York City, with homeless patient staying in the hospital 36 percent longer per admission on average than other patients (Salit, *Hospitalization Costs Associated with Homelessness in New York City*, 1988).

Homelessness also causes significant danger to the health and lives of persons who are homeless. Homeless individuals living in the City are frequent crime victims. In 2018, LAPD reported 2,965 instances where a homeless individual was a victim of a serious crime, including homicide, rape, aggravated assault, theft, and arson (also known as "Part 1 Crimes.") (Commander Dominic H. Choi, 2019). This compares to 1,762 such crimes in 2017, a 68 percent increase (*Id.*). This dramatic increase in Part 1 Crime statistics may be due to more rigorous LAPD data collection methodologies, however it is consistent with the increasing incidence of homelessness documented in June of 2019 detailed below (*Id.*). During the first six months of 2020, LAPD reported 1,738 instances where a homeless individual was a victim of a serious crime including homicide, rape, aggravated assault, burglary, and larceny (LAPD, 2020).

Overall, in 2018, the LAPD reported 6,671 instances in total where a homeless individual was a Part 1 Crime victim and/or suspect, among the 31,285 estimated homeless individuals throughout the City (Commander Dominic H. Choi, 2019). This means that in 2018 there was approximately one Part 1 Crime per every 4.68 homeless individuals in the City. By comparison, for the same year LAPD reported 129,549 total Part 1 Crimes Citywide among an estimated population of 4,054,400 City residents, or approximately one Part 1 crime per every 31.29 City residents. Accordingly, the rate of Part 1 crimes among homeless individuals in 2018 was approximately seven times higher than the rate among the City population as a whole (*Id.*). According to the LAPD Use of Force Year-End Report in 2020, among the 41,290 estimated homeless individuals throughout the City, 7,872 persons were reported to be victims of a violent or property crime. In the same year, 5,722 persons experiencing homelessness were reported as suspects of a violent or property crime. (LAPD, 2020). On October 4, 2018 and again on February 6, 2019, the Los Angeles County Department of Public Health identified an outbreak of endemic flea-borne typhus in downtown Los Angeles among persons experiencing homelessness. On September 19, 2017, the Los Angeles County Department of Public Health declared a Hepatitis A virus outbreak among persons who are homeless and/or use illicit drugs in the County. Likewise, a January 2018 report from the Los Angeles County Department of Mental Health reported that data from the Los Angeles County Medical Examiner-

Corner's showed that a significant number of deaths in the homeless population were caused by treatable conditions such as arteriosclerotic cardiovascular disease, pneumonia, diabetes, cancer, cirrhosis, severe bacterial infections and other conditions (Choi, 2019). As noted more recently by the Board of Supervisors for the County of Los Angeles on October 29, 2019:

Mortality rates for people experiencing homelessness are much higher than those for the general population, have risen in the County over the past five years, and are expected to increase again for 2019. A recent analysis by the County's Department of Public Health on mortality rates and causes of death among people experiencing homelessness shed critical light on this issue and provided sobering data on recent trends. The overall mortality rate, which accounts for increases in the total homeless population over the 6-year period from 2013 to 2018, increased each year from 1,382 per 100,000 to 1,875 deaths per 100,000, with the total number of deaths among people experiencing homelessness increasing each year from 536 in 2013 to 1,047 in 2018. The leading causes of death included coronary heart disease (22%) and unintentional drug and alcohol overdose (21%), indicating that there are opportunities for interventions to prevent premature deaths (Supervisor Ridley-Thomas, Supervisor Solis, 2019) (Department of Public Health, 2019).

These significant adverse health impacts suffered by the homeless in the City and County of Los Angeles are consistent with the impacts identified by a well-established body of expert social science studies that document the significant adverse health and welfare impacts experienced by homeless persons in the United States and in other countries, which the homeless in the City and County experience as well. Some of that research has documented the following impacts upon homeless persons:

Mortality Rates. A study of the mortality rates of sheltered homeless people in New York City between 1987 and 1994 documented that homeless men died at a rate more than twice that of other residents of New York, and that homeless women died at a rate more than 3.7 times greater than other New York residents (Barrow, Susan M., PhD, Daniel B. Herman, DSW, Pilar Cordova, BA, and Elmer L. Struening, PhD, 1999). A study conducted between 1985 and 1988 in Philadelphia found that the mortality rate among homeless persons in Philadelphia was nearly four times greater than for the general population (Hibbs, Jonathan R., MD, et. al., 1994). A review of five years of data between 2000 and 2005 in Glasgow, Scotland found that homelessness is, itself, is an independent risk factor for death, distinct from other specific causes (Morrison, 2009).

Access to Healthcare. A 2003 nationwide survey of homeless persons documented that homeless adults reported substantial unmet needs for multiple types of health care (Baggett, Travis P., MD, MPH, James J. O'Connell, MD, Daniel E. Singer, MD, and Nancy A. Rigotti, MD, 2010). The report found 73 percent of the respondents reported at least one unmet health need, including an inability to obtain needed medical or surgical care (32%), prescription medications (36%), mental health care (21%), eyeglasses (41%), and dental care (41%) (*Id.*).

AIDs Impacts. A study of San Francisco residents diagnosed with AIDS from 1996 through 2006 and reported to the San Francisco Department of Public Health demonstrated that homeless persons with HIV/AIDS have greater morbidity and mortality, more hospitalizations, less use of antiretroviral therapy, and worse medication adherence than HIV infected persons who are stably housed (Schwarcz, Sandra K, Ling C Hsu., Eric Vittinghoff, Annie Vu, Joshua D Bamberger and Mitchell H Katz, 2009).

Cancer Impacts. A study of 28,000 current and formerly homeless individuals in Boston documented that homeless men saw a significantly higher cancer incident rate than expected compared to the general Massachusetts general population, and that homeless women and men experienced significantly higher cancer mortality rates than the Massachusetts general population (Baggett, Travis P et al., 2015).

B. Unexpected and Unabated Dramatic Surge in Homelessness

A 2017 Rand Corporation study reported the County of Los Angeles as having the highest rate in the United States of unsheltered individuals who experience homelessness (Hunter, Sarah B., Melody Harvey, Brian Briscoe, and Matthew Cefalu, 2017). The impacts of homelessness upon the homeless and upon the community, in terms of the danger to or loss of life, property, health and burden on public services is exacerbated in the City due the very size of the City's homeless population. The homeless shelter crisis and the rise in homelessness are the type of emergency situations that led the State to adopt AB 1197, an urgency statute addressing homelessness that was deemed necessary for the immediate preservation of the public peace, health, or safety and for the critical necessity to address the shelter and homeless crisis within the City of Los Angeles.

The City Council declared a homeless shelter crisis pursuant to Government Code Section 8698, et seq. on April 17, 2018 (The Honorable M. Bonin & M. O'Farrell, 2019), which is currently in effect (The Honorable M. Bonin & M. Harris-Dawson, 2019). Following significant investment of resources by both the County and City, the 2018 Homeless Count showed progress in reducing homelessness, documenting a 5.5 percent overall decrease in the number of persons experiencing homelessness in LA County (LAHSA, 2020).

Table 1 - 2018 Homeless Count Data Summary presents the data revealed by the 2018 Homeless Count concerning the City of Los Angeles, as documented in the 2018 Data Summary in Table 1 (LAHSA, 2020).

Table 1		
2018 Homeless Count Data Summary		
	Number of Individuals	Change from 2017
Sheltered Homeless	8,398	6% Decrease

Table 1 2018 Homeless Count Data Summary		
Unsheltered Homeless	22,887	5.3% Decrease
Total Homeless Persons	31,285	5.5% Decrease

Despite these efforts and the initial progress shown in 2018, the revised 2019 Homeless Count, released in July 22, 2020, unexpectedly documented a dramatic increase in the number of individuals experiencing both sheltered and unsheltered homelessness in (LAHSA, 2020) *Table 2 - 2019 Homeless Count Data Summary* presents the data revealed by the 2019 Homeless Count concerning the City of Los Angeles, as documented in the 2019 Data Summary as shown in Table 2 (LAHSA, 2020).

Table 2 2019 Homeless Count Data Summary (Revised 07/20/2020)		
	Number of Individuals	Change from 2018
Sheltered Homeless	8,944	6.5% Increase
Unsheltered Homeless	26,606	16.2% Increase
Total Homeless Persons	35,550	13.7% Increase

LAHSA published its 2020 Homeless Count, released in July 20, 2020, which shows that the homelessness emergency in the City of Los Angeles continues unabated. The documented number of individuals experiencing both sheltered and unsheltered homelessness dramatically increased yet again, as shown in *Table 3 - 2020 Homeless Count Data Summary* (LAHSA, 2020).

Table 3 2020 Homeless Count Data Summary		
	Number of Individuals	Change from 2019
Sheltered Homeless	12,438	39% Increase
Unsheltered Homeless	28,852	8.4% Increase
Total Homeless Persons	41,290	16.1 % increase

LAHSA prepared a 2021 shelter point-in-time count for the City of Los Angeles that estimated the number and demographic characteristics of the sheltered homeless population on a single night in January 2021. Released in July 20, 2021, it shows that the

homelessness emergency in the City of Los Angeles continues unabated and uncertain. The documented number of individuals experiencing sheltered homelessness increased yet again, as shown in *Table 4 - 2021 Housing Inventory Count and Shelter Count Data Summary* (LAHSA, 2021). The 2021 unsheltered street count could not be conducted due to the COVID-19 pandemic. However, the availability of vaccinations enabled the resumption of the Homeless Count for February 2022 with appropriate precautions (LAHSA, 2022).

Table 4 2021 Housing Inventory Count and Shelter Count Data Summary		
	Number of Individuals	Change from 2020
Sheltered Homeless	12,503	1% Increase

C. Emergency Related to COVID-19 Pandemic Impacting Homeless Community

In addition to the crisis of growing homelessness, the COVID-19 pandemic is impacting homeless persons. On March 4, 2020, the Governor proclaimed a State of Emergency for the State of California (Governor Gavin Newsom, 2020), and the Mayor of the City of Los Angeles declared a local emergency related to the threat of the COVID-19 pandemic affecting the local population (Mayor Eric Garcetti, 2020). The City is facing an unprecedented emergency at the current time due to the sudden occurrence of the COVID-19 pandemic, and this emergency is particularly concerning for the imminent threat it poses to the City's homeless population.

On March 11, 2020, the State Department of Health issued guidance for protecting homeless Californians from COVID-19, which noted the following:

“We know that individuals experiencing homelessness are at greater risk of having an untreated and often serious health condition. This vulnerable population also has a higher risk of developing severe illness due to COVID-19,” said Dr. Mark Ghaly, Secretary of the California Health and Human Services Agency. “It is important that we act now to protect this population and the compassionate people who serve them.” (Corey Egel, 2020.)

The homeless often live unsheltered, unprotected from the elements and in close contact and proximity to other individuals in the homeless community. As noted above, the homeless population is substantially more prone to underlying health conditions. The State Department of Public Health additionally states that populations “with compromised immune systems, and people with certain underlying health conditions like heart disease, lung disease and diabetes, for example, seem to be at greater risk of serious illness.” (California Dept. of Public Health, 2020). Thus, exposure to COVID-19 in the homeless population is an imminent concern for the damage it will cause on these susceptible individuals.

On March 12, 2020, the Governor's Executive Order No. N-25-20 noted the "need to secure numerous facilities to accommodate quarantine, isolation, or medical treatment of individuals testing positive for or exposed to COVID-19." (Governor Gavin Newsom, 2020). On March 18, 2020, the Governor issued Executive Order No. N-32-20 (Governor Gavin Newsom, 2020), which further noted imminent impacts to the homeless, as follows:

[T]he emergency of COVID-19 necessitates a more focused approach, including emergency protective measures to bring unsheltered Californians safely indoors, expand shelter capacity, maintain health and sanitation standards and institute medically indicated interventions, and add new isolation and quarantine capacity to California's shelter and housing inventory to slow the spread of the pandemic....

The Governor stated that "[p]eople experiencing homelessness are among the most vulnerable to the spread of COVID-19," and "California is deploying massive resources to get these vulnerable residents safely into shelter, removing regulatory barriers and securing trailers and hotels to provide immediate housing options for those most at risk. Helping these residents is critical to protecting public health, flattening the curve and slowing the spread of COVID-19." (California Governor, Press Release (Governor Gavin Newsom, 2020).

On March 19, 2020, the Governor issued a stay-at-home order directing residents to stay home or at their place of residence (Governor Gavin Newsom, 2020). It noted "in a short period of time, COVID-19 has rapidly spread throughout California, necessitating updated and more stringent guidance from federal, state, and local public health officials." (Governor Gavin Newsom, 2020). Similar local Safer-at-Home orders followed (County of Los Angeles Public Health Department, 2020) (Mayor Eric Garcetti, 2020). The City's Safer at Home order particularly noted the following:

City of Los Angeles officials and contracted partners responsible for homelessness outreach shall make every reasonable effort to persuade such residents to accept, if offered, temporary housing or shelter, as the Health Officer of the County of Los Angeles recommends that sheltering individuals will assist in reducing the spread of the virus and will protect the individual from potential exposure by allowing the individual access to sanitation tools (Mayor Eric Garcetti, 2020).

In the United States District Court Central District of California case of *LA Alliance for Human Rights Et Al. vs. the City of Los Angeles, Et al.* Case No. CV 20-02291 DOC (The Honorable Judge David O. Carter, 2020), concerning homelessness, the Court entered a May 2020 injunction that had ordered the City of Los Angeles in partnership with the County of Los Angeles, to protect a particular subset of persons experiencing homelessness, finding they are exposed to severely heightened public health risks as a result of where they live (The Honorable Judge David O. Carter, 2020). Although the Court vacated that order on June 18, 2020, in favor of a homeless shelter agreement between the City and County, the Court retained its right to re-impose the May 2020 injunction. The Court's May 2020 findings concerning the emergency situation faced by homeless persons, therefore, is relevant to understanding the emergency situation.

The Injunction found that the combined risks of health impacts from living near freeways and the on-going Covid-19 pandemic constitute an emergency. The Court found that it is unreasonably dangerous for humans to live in areas which have deleterious health impacts and can shorten a homeless person's life expectancy by decades. These locations near freeways, for example, could be contaminated with lead or other carcinogenic substances and also increase the danger that a homeless person will be struck by a vehicle or injured in the event of an earthquake or crash. Camps in these locations can also burden the general public—for example, by posing potential hazards to passing motorists, or by making sidewalks and other rights-of-way inaccessible to individuals with disabilities.

The Court further found that providing housing for persons experiencing homelessness will help stop the spread of COVID-19 persons experiencing homelessness and will also help reduce the likelihood that the disease will spread throughout the greater Los Angeles community.

Taken together, the unexpected and dramatic increase in homelessness in the City and County of Los Angeles identified first in 2019, continues unabated in 2022 and was exacerbated by the COVID-19 pandemic posing a critical emergency situation in the City of Los Angeles. This situation presents documented dangers to health, life, property and a burden on public resources which presents an emergency as defined by CEQA as explained below. Furthermore, the State has created additional CEQA exemptions applicable in the City of Los Angeles concerning homelessness and homeless shelters.

III. THE PROJECT IS EXEMPT FROM FURTHER CEQA REVIEW

A. The Project is Exempt Pursuant to the Emergency CEQA Statutory Exemption (PRC Section 21080(b)(4))

Public Resources Code Section 21080(b)(4) provides that CEQA does not apply, to "specific actions necessary to prevent or mitigate an emergency." Public Resources Code section 21060.3 defines Emergency as, "a sudden, unexpected occurrence, involving a clear and imminent danger, demanding immediate action to prevent or mitigate loss of, or damage to, life, health, property, or essential public services." Section 21060.3 further provides that Emergency, "includes such occurrences as fire, flood, earthquake, or other soil or geologic movements, as well as such occurrences as riot, accident, or sabotage."

Finally, 14 California Code of Regulations (Governor's Office of Planning and Research, 2018) Section 15269, "Emergency Projects," provides examples of emergency projects exempt from the requirements of CEQA, including the following:

- (c) Specific actions necessary to prevent or mitigate an emergency. This does not include long-term projects undertaken for the purpose of preventing or mitigating a situation that has a low probability of occurrence in the short-term, but this exclusion does not apply

- (i) if the anticipated period of time to conduct an environmental review of such a long-term project would create a risk to public health, safety or welfare, or

- (ii) if activities (such as fire or catastrophic risk mitigation or modifications to improve facility integrity) are proposed for existing facilities in response to an emergency at a similar existing facility.

The Project is a specific action necessary to prevent or mitigate an emergency – the conditions arising from a sudden and unexpected dramatic rise in the City’s already dangerously large homeless population, now adversely impacted by the COVID-19 pandemic for all of the reasons set forth above in Part II (Project History). The Project, therefore is exempt from CEQA environmental review pursuant to Section 21080(b)(4).

B. The Project is Exempt Pursuant to AB 1197 Codified at PRC Section 21080.27

Assembly Bill 1197 (Santiago, 2019) was signed into law on September 26, 2019, which adopted Section 21080.27 of the California Public Resources Code (PRC) and created a statutory exemption for compliance with CEQA for emergency shelter projects located within the City of Los Angeles. The intent of AB 1197 is to help the City of Los Angeles address its homeless crisis and is an urgency statute that is deemed necessary for the immediate preservation of the public peace, health, or safety and for the critical necessity to address the shelter and homeless crisis. AB 1197 took immediate effect on September 26, 2019 in order to address the unique circumstances faced by the City of Los Angeles and to expedite the development of emergency homeless shelters. As noted in the following sections, this shelter project complies with the requirements in AB 1197, and thus the Project is exempt from CEQA pursuant to AB 1197 (PRC § 21080.27).

1. City of Los Angeles Declaration of a Shelter Crisis

Public Resources Code, section 21080.27(a)(2) requires that emergency shelters be approved during a shelter crisis under Government Code, section 8698.2. The City of Los Angeles City Council declared a homeless shelter crisis pursuant to Government Code Section 8698, et seq. on April 17, 2018 (The Honorable M. Bonin & M. O’Farrell, 2019), which is currently in effect (The Honorable M. Bonin & M. Harris-Dawson, 2019).

2. The Project Meets the Definition of a Low Barrier Navigational Center in Government Code Section 65660

Under AB1197, emergency shelters must meet the definition of “Low Barrier Navigational Center” in Government Code Section 65660, which defines Low Barrier Navigation Center as a “Housing First, low-barrier, service-enriched shelter focused on moving people into permanent housing that provides temporary living facilities, while case managers connect individuals experiencing homelessness to income, public benefits, health services, shelter and housing. The City builds and operates emergency shelters, such as this Project, to be operated as low barrier navigation centers consistent with Government Code Section 65660.

Service-Enriched Shelter with Case Managers Connecting to Services. The requirements are met by this Project for a “service-enriched shelter focused on moving people into permanent housing that provides temporary living facilities, while case

managers connect families experiencing homelessness to income, public benefits, health services, shelter and housing.” This Project provides temporary housing, with case managers staffing the facility that provide connections to homeless family services and assistance for the occupants. This is one of the fundamental purposes of this shelter project. For example, the Project’s programs include Trauma Informed Care policies and procedures that involve understanding, recognizing, and responding to the effects of all types of trauma. Trauma Informed Care also emphasizes physical, psychological and emotional safety for both families and providers, and helps families rebuild a sense of control and empowerment. Trauma Informed services take into account an understanding of trauma in all aspects of service delivery and place priority on the trauma survivor’s safety, choice, and control. Trauma Informed Care services create a culture of nonviolence, learning, and collaboration.

The Project will be operated by service providers coordinated with the Los Angeles Homeless Services Authority (LAHSA). The intention of this emergency shelter is to provide persons experiencing homelessness with some stability, so that they can more easily maintain contact with housing navigation and/or case management services to facilitate safe and supportive housing placement.

Per LAHSA’s Crisis and Bridge Housing Scope of Required Services, which will be followed for operating the shelter in this Project, service providers that oversee an emergency shelter must provide case management services and develop a Housing Stability Plan with each person. The shelter will program implement a case management and service plan known as Housing-Focused Case Management and Support Services (HFCMSS). HFCMSS includes but is not limited to: support with completing housing applications, accompanying the individual to housing appointments and/or leasing appointments, and other support associated with the housing placement process. The primary objective of HFCMSS is to extend support to individuals through an individualized case management relationship that will ultimately translate to increased housing stability. The HFCMSS offers services to connect individuals to permanent housing. Case Managers present at the shelter make rapid connections to a broad continuum of resources and permanent housing, emphasizing a short-term stay.

HFCMSS connects families to a Housing Navigator who assists individuals to gain access to permanent housing through referrals to housing programs (such as RRH, Permanent Supportive Housing, affordable housing, etc.). A case manager is assigned to an individual when the person enters the program and then helps the participant establish a connection to a Housing Navigator. A Housing Navigator assists individuals with Housing Navigation services. Housing Navigation services are available to individuals to support their housing placement goals and must be focused on assisting the participant in identifying and accessing permanent housing within the general ninety (90) days. Housing Navigation services may be provided onsite or offsite, and may also require participants’ to be accompanied to off-site appointments.

Case management must be conducted on a regular and routine basis and must be routinely documented. The content and outcome of case management meetings with individuals are entered into a housing management information system with case notes

that are tracked in the system. Housing-focused case management sessions are dedicated to assessing and reassessing needs, educating individuals on community resource opportunities, developing Housing Stability Plans, scheduling appointments, and providing necessary follow up to ensure housing stability plans are progressing on schedule and needs are adequately being addressed.

As noted in LAHSA's Program Standards, supportive services for the shelters focus on the income, resources, skills and tools needed to pay rent, comply with a lease, take reasonable care of a housing unit, and avoid serious conflict with other tenants, the landlord, and/or the police. The Program Standards also require service providers to utilize and maintain referral networks with specific lists of health services and public benefit services for connecting occupants to those benefits. Thus, the project is a service-enriched shelter focused on moving individuals into permanent housing that provides temporary living facilities, while case managers connect individuals experiencing homelessness to income, public benefits, health services, shelter and housing.

Housing First. The Project is a "Housing First" shelter pursuant to Government Code Section 65660. Also, in being such a Housing First shelter, the project complies with Chapter 6.5 of Division 8 of the Welfare and Institutions Code (commonly referred to as the Housing First Law) as required by Government Code Section 65662 (discussed further below). "Housing First" means the evidence-based model that uses housing as a tool, rather than a reward, for recovery from homelessness, and that centers on providing or connecting people experiencing homelessness to permanent housing as quickly as possible. Housing First providers offer services as needed and requested on a voluntary basis and that do not make housing contingent on participation in services.

Housing First also includes time-limited rental or services assistance, so long as the housing and service provider assists the recipient in accessing permanent housing and in securing longer-term rental assistance, income assistance, or employment. In the event of an eviction, programs shall make every effort, which shall be documented, to link tenants to other stable, safe, decent housing options. Exit to homelessness should be extremely rare, and only after a tenant refuses assistance with housing search, location, and move-in assistance. If resources are needed to successfully divert an individual from entry into the homelessness system, a referral must immediately be made to a CES Diversion/Prevention program. In order to identify other permanent housing options, service providers continue to have such problem solving conversations with the individual while residing in Crisis and Bridge Housing. More broadly, the project includes a housing and services plan and housing-focused case management, both with an orientation towards supporting individuals to exit to safe and stable housing. This Project meets the above-noted Housing First requirements.

The emergency shelters are operated by service providers coordinated through LAHSA. All service providers must comply with LAHSA's Scope of Required Services, Program Standards, and Facility Standards. Per LAHSA's Program Standards, all eligible participants are to be served with a Housing First approach. LAHSA's CES for Families' Principles and Practices that were approved by the CES Policy Council on August 23, 2017 shall be used to guide the development of systems-level policy and to ensure transparent and accountable decision-making with privately owned Service Providers

who enter into a partnership with LAHSA. The basic underlying principle of LAHSA's System Components is that access to housing is the primary need for its program participants. Services are voluntary and not required to enter into a shelter. Individuals will not be rejected or exited from participation in the emergency shelter due to any unnecessary barriers.

The City's shelters are intended to be a Housing First program focused on quickly moving individuals experiencing homelessness into permanent housing and then providing the additional supports and services each person needs and wants to stabilize in that housing. The basic underlying Housing First principle is that individuals are better able to move forward with their lives once the crisis of homelessness is over and they have control of their housing. The City's emergency shelter will, provide a safe, low barrier, housing-focused, and homeless services support in a twenty-four (24) hour residence to help individuals who experience homelessness that meet the above-noted requirements for Housing First. One of the core components of the Housing First model is that longer-term housing accepts referrals directly from shelters. The City's shelters, including this Project, are primarily focused on connecting, transitioning, and referring homeless individuals into such permanent housing as quickly as possible in the Housing First model, and accepting occupants through the crisis response system. The intention of this emergency shelter project is to provide participants with some stability, so that they can more easily maintain contact with housing navigation and case management services and facilitate safe and supportive housing placement. Services in the City's shelters, including this Project, are never mandatory and cannot be a condition of obtaining the housing intervention. This Project will provide temporary housing, case managers and Housing Navigators staffed at the facility or offsite who provide connections to homeless services for the occupants. Based on the above-noted information, the project's emergency shelter meets the Housing First requirements relative to AB 1197.

Low Barrier. "Low Barrier" means the shelters use best practices to reduce barriers to entry, including but not limited to, the presence of partners (if it is not a population-specific site, such as for survivors of domestic violence or sexual assault, women, or youth); pets; storage for possessions; and privacy (such as partitions around beds in a dormitory setting or in larger rooms containing more than two beds, or private rooms). The City's shelters, including this Project, meet these requirements.

The Project provides approximately 45 beds which allow for presence of partners. This Project is pet friendly and includes a pet area. Participants are allowed to bring their pets to the shelter. The Project has storage within each sleeping area for personal possessions or storage bins. The Project is designed to provide privacy to participants by providing each family or individual with their own sleeping space. There are separated sleeping spaces with communal bathrooms. Therefore, the project is managed and designed to allow the privacy of participants and is a pet friendly facility for participants who choose to be accompanied by their pets.

The Project uses low barrier best practices that reduce barriers to entry. They include the allowance for presence of partners, pet friendly facilities, storage areas for some possessions, and management and design for individuals' privacy. All of the City's

emergency shelters, including this project, meet these requirements. Therefore, none of the noted conditions would preclude access to the project, and the project is considered crisis and bridge housing that is “low barrier” within the meaning of Government Code Section 65660 and AB 1197.

In sum, based on the above-noted information, which is additionally explained and provided with additional details in the documents from LAHSA cited in the Reference section to this document, the Project meets the definition of Low Barrier Navigation Center set forth in Government Code Section 65660.

3. The Project Complies with Government Code Section 65662

Under AB1197, emergency shelters must meet the four requirements identified in Government Code Section 65662(a) through (d), which are each discussed in turn in this section.

Connecting to Permanent Housing through a Services Plan. Government Code Section 65662(a) requires that Low Barrier Navigation Centers offer services to connect families and individuals to permanent housing through a services plan that identifies services staffing. This Project meets that requirement. As noted above, the Project includes housing-focused case management sessions that involve developing Housing Stability Plans/Housing and Services Plans, scheduling appointments, and providing necessary follow up to ensure housing stability plans are progressing on schedule and needs are adequately being addressed. This is required in LAHSA’s Scope of Required Services.

The Housing Stability Plan is the family or individual’s service plan that summarizes the participant’s housing goals, services needed, what will be provided, actions that need to be taken (by staff and the participant), and referrals that need to be made. Case managers develop the services plan in coordination with the family or individual right after intake and assessment, track the plan in a homeless management information system, and revise the plan as the family or person’s situation changes and steps are completed or revised accordingly.

Families and individuals are assisted with a range of activities that address the stated goals of the family or individual in the Housing Stability Plan, including but not limited to:

- Accessing personal identification (For quick referral to permanent housing)
- Accessing certification of the current income (For quick referral to permanent housing)
- Mainstream Benefits
- Substance Abuse services
- Mental Health Services
- Health Services
- Vocational Services
- Employment Services
- Educational Support

- Legal Services
- Life Skills Development
- Independent Living Program for Youth
- Transitional Housing Program for Youth
- CES and CoC Rapid Re-Housing Program
- Housing Navigation Assistance
- CoC Permanent Supportive Housing
- LA County Department of Health Services, Housing for Health or Housing and Jobs Collaborative
- LA County Department of Health Services, Countywide Benefits Entitlement Services Team
- LA County Department of Mental Health, Countywide Housing Assistance Program
- Veterans Administration Housing Programs
- Housing Opportunities for Persons with Aids (HOPWA) Housing
- Crisis Housing for Unaccompanied Youth
- Youth Family Reconnection Program

Progress and problems implementing the plan are reviewed and updated frequently.

Coordinated Entry System. Government Code Section 65662(b) requires Low Barrier Navigation Centers to be linked to a coordinated entry system allowing staff and co-locating staff to conduct assessments and provide services to connect families and individuals to permanent housing. This is required by LAHSA's Scope of Required Services and Program Standards. Thus, all City of Los Angeles homeless shelters, including this project, are linked to the Los Angeles County Coordinated Entry System, a centralized or coordinated assessment system designed to coordinate program participant intake, assessment, and referrals. The residents are prioritized through the coordinated entry system in the Los Angeles County Coordinated Entry System for safe and supportive housing resources. The City's collaborates with Los Angeles County Case Entry System and provides case management services to program participants through a Housing Stability Plan. Case managers must develop a Housing Stability Plan in coordination with the participant right after intake and assessment. The Housing Stability Plan must be tracked in a Homeless Management Information System (HMIS) along with the date of completion.

The shelter will collaborate with Los Angeles County Case Entry System Housing Navigators and case managers from other outside agencies to provide case management services to program participants. Los Angeles County Coordinated Entry System case managers work with participants and assist by facilitating services appointments; and then eventually help them find permanent housing.

Compliance with Welfare and Institutions Code. Government Code Section 65662(c) requires Low Barrier Navigation Centers comply with Chapter 6.5 of Division 8 of the Welfare and Institutions Code, which specifies the Housing First requirements. As noted

above, the City's emergency shelters, including this project, are Housing First shelters, and thus they comply with this requirement.

Homeless Management Information System. Government Code Section 65662(d) requires Low Barrier Navigation Centers to have a system for entering stays, demographics, income, and exit destination through a local Homeless Management Information System designed to coordinate program participant intake, assessment, and referrals. These are required by LAHSA's Scope of Required Services and Program Standards. The City's emergency shelters use such a system in the Los Angeles Continuum of Care Homeless Management Information System (HMIS). In 2001, Congress directed the U.S. Department of Housing and Urban Development (HUD) to ensure the collection of more reliable data regarding the use of homeless programs. HUD required all Continuum of Care applicants to demonstrate progress in implementing a Homeless Management System (HMIS). LAHSA led a regional planning process, encompassing three Continuums of Care - Los Angeles, Glendale, and Pasadena. This process resulted in the selection of a system that would not only satisfy the HUD mandate, but would also provide the Los Angeles Continuum with a means to measure the effectiveness of programs serving homeless families. Presently, the Los Angeles Continuum of Care (LACoC) is part of a collaborative called the Los Angeles HMIS Collaborative. The LA HMIS Collaborative consists of three Continuums of Care (CoC): Los Angeles, Glendale, and Pasadena.

HMIS is a web-based application that is designed to collect information on the characteristics and service needs of homeless persons. The system allows agency users and the Los Angeles Homeless Services Authority (LAHSA) to use collected information for informed programmatic decision-making. Participating agencies collect and input standardized client-level and demographic data into the system, including client/household demographic details; relationships within a family and household; client/household income; client/household documents; case management and services; housing placements; and progress for housing retention. The HMIS includes a focus on Outcomes Management that sets and measures milestones and target achievements of clients and program performance.

Housing Stability Plans are tracked in a Homeless Management Information System (HMIS) along with the date of completion. Case managers complete a Monthly Update with the family to assess progress towards achieving the goals defined in the Housing Stability Plan. All services must be tracked, and information is provided to families in HMIS with the goal of the individuals achieving housing stability and sustainability upon exit from the program. Exit destination information is also collected. Accordingly, the Project meets the HMIS requirements.

In sum, based on the above-noted information, which is additionally explained in more detail in the documents from LAHSA cited in the Reference section to this document, the Project meets the requirements set forth in Government Code Section 65662.

4. The Project is in a Qualified Location Under AB 1197

AB 1197 requires that the site be located in "either a mixed-use or nonresidential zone permitting multifamily uses or infill site...." (PRC § 21080.27(a)(2).) The project is considered an infill site because the site has been developed with, and its perimeter is surrounded by, qualified urban uses.

The Project site is zoned PF-1VL and C4-1VL which are nonresidential and mixed-use zones that allow for multifamily uses under certain circumstances. The site is currently developed with a homeless shelter use, which is a residential use since it provides a temporary emergency residence for people experiencing homeless, as an interim home until they can find more a permanent home. In addition, at least 75% of the perimeter of the site is surrounded by qualified urban uses. There are commercial uses to west and transportation facilities to the east and south of the site. Therefore, the site meets the definition of infill site. (City of L.A., Bureau of Engineering, Letter, 2023). Therefore, the Project site is surrounded by qualified urban uses and is considered a qualified location under AB 1197.

5. The Project Involves Qualified Funding Under AB 1197

AB 1197 (Public Resources Code Section 21080.27(a)(2)(A)-(D) exempt emergency shelter projects from CEQA which have at least a portion of the funding from qualified sources. The City has determined that the Project is a homeless shelter project that would qualify for the other homeless shelter funding sources identified in AB 1197, and that those funds may be applied to this Project if such funding becomes available, which further qualifies this Project for the exemption under AB 1197. Because these funding sources are qualified funding sources under Public Resources Code Section 21080.27(a)(2)(A), the funding requirement may also be met. However, the Project meets other requirements as described elsewhere in this document.

Moreover, on December 11, 2019, the City Council approved California Homeless Emergency Aid Program (HEAP) Funding to operate the project (CF No. 18-0044), City Council action (12/11/2018)). HEAP is qualified funding under AB 1197, and therefore at least a portion of the funding of the project related to its establishment used qualified funding that qualifies the project for exemption under AB 1197. This is sufficient since it shows that the project is a qualified homeless shelter project.

6. The City's Actions Qualify under AB 1197 as Actions in Furtherance of Providing Emergency Shelters in the City of Los Angeles

AB 1197 (Public Resources Code Section 21080.27(b)(1)), exempts from CEQA "any activity approved by or carried out by the City of Los Angeles in furtherance of providing emergency shelters or supportive housing in the City of Los Angeles." This Project involves the continued lease and operation of an existing homeless shelter that the City constructed and operated for several years, as described above, which is located in the City of Los Angeles. The City will provide funding and enter into contracts with a qualified

service provider and/or LAHSA, to lease and operate the emergency shelter. Therefore, the City's actions are in furtherance of providing emergency shelters in the City of Los Angeles and qualify for exemption from CEQA under AB 1197.

The Project Involves an Eligible Public Agency taking a Qualified Action under AB 1197

7. AB 1197 Conclusion

Based on the above-noted information, the Project is exempt from CEQA pursuant to Public Resources Code Section 21080.27.

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CITY OF LOS ANGELES
DEPARTMENT OF PUBLIC WORKS
BUREAU OF ENGINEERING
1149 S. BROADWAY, 7th FLOOR
LOS ANGELES, CALIFORNIA 90015
CALIFORNIA ENVIRONMENTAL QUALITY ACT
NOTICE OF EXEMPTION
(Articles II and III - City CEQA Guidelines)

Submission of this form is optional. The form shall be filed with the County Clerk, 12400 E. Imperial Highway, Norwalk, California, 90650, pursuant to Public Resources Code Section 21152(b). Pursuant to Public Resources Code Section 21167(d), the filing of this notice starts a 35-day statute of limitations on court challenges to the approval of the project.

LEAD CITY AGENCY AND ADDRESS: City of Los Angeles c/o Bureau of Engineering (BOE) 1149 S. Broadway, MS 939 Los Angeles, CA 90015	COUNCIL DISTRICT
PROJECT TITLE: Bridge Housing at 11303 Pershing Ave (WLA VA Campus) Lease	LOG REFERENCE C.F. 20-0841

PROJECT LOCATION: 11303 Pershing Avenue, Los Angeles, Los Angeles County, on the United States Department of Veteran Affairs (VA) Greater Los Angeles Medical Center campus, federally-owned land surrounded by City of Los Angeles Community Plan areas; located east and south of Brentwood, north of West Los Angeles and west of Westwood. See Figure 1: Project Location. T.G. 593 - E4

DESCRIPTION OF NATURE, PURPOSE, AND BENEFICIARIES OF PROJECT: The Bridge Housing at 11303 Pershing Ave (WLA VA Campus) Lease (Project) consists of an extended, or new lease, for approximately five years with continued use/operation, for approximately eight years total use of the temporary bridge housing facility. A third-party service provider will operate the Project for the City and it is anticipated that a lease or similar operating and/or funding agreement may be executed. The purpose of the Project is to provide approximately five additional years, to the previously approved three years, of emergency shelter and case management for people experiencing homelessness to help bridge their transition from living on the streets to finding services and, ultimately, living in transitional and/or permanent housing. Project beneficiaries include the homeless community, the public, and local businesses. (Please see the attached narrative for more details.)

On _____, 2023, the City Council determined the Project was exempt under the California Environmental Quality Act (CEQA) and approved the Project.

CONTACT PERSON Maria Martin (maria.martin@lacity.org)	TELEPHONE NUMBER (213) 485-5753
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EXEMPT STATUS:	<u>CITY CEQA GUIDELINES</u>	<u>STATE CEQA GUIDELINES</u>	<u>CA PUBLIC RESOURCE CODE</u>
<input checked="" type="checkbox"/> STATUTORY		15269(c)	21080(b)(4) & 21080.27

JUSTIFICATION FOR PROJECT EXEMPTION: This Project is statutorily exempt from CEQA under Public Resources Code, Section 21080(b)(4), as a specific action necessary to prevent or mitigate an emergency, and as reflected in Article 18 of the State CEQA Guidelines, Section 15269(c); and Public Resources Code, Section 21080.27 (AB 1197), applicable to City of Los Angeles emergency homeless shelters. This determination is consistent with the NOE supporting documents in Council File (CF) No. 18-050-S1, and consistent with, and supported by, the City Council's prior action and resolution approving the development and use of this shelter (see attached narrative).

IF FILED BY APPLICANT, ATTACH CERTIFIED DOCUMENT OF EXEMPTION FINDING

SIGNATURE: Maria Martin	TITLE: Environmental Affairs Officer Environmental Management Group	DATE:
FEE: 75.00 _____	RECEIPT NO.	REC'D BY
		DATE

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Figure 1: Project Location



EXEMPTION NARRATIVE

I. PROJECT DESCRIPTION, CONTINUED

The Project consists of an approximately five-year lease extension or new lease, and operation of the Bridge Housing for approximately five additional years in furtherance of providing an emergency homeless shelter in the City of Los Angeles at the bridge housing facility that operates 100 beds located on a federally-owned property at 11303 Pershing Avenue that was found to be categorically exempt and approved by City Council on October 5, 2018 (CF No. 18-0510-S1). The documents supporting those determinations (CF No. 18-0510-S1) are incorporated herein by reference as support for this CEQA determination. This Project continues the existing use of the facility that was built, and is currently operating, without substantial change.

The shelter will continue to be operated consistent with the Los Angeles Homeless Services Authority's (LAHSA) program requirements for bridge shelters including, but not limited to *Crisis Housing Program for All Populations Scope of Required Services* (LAHSA, 2020-2021). A third-party service provider, e.g., People Assisting the Homeless (PATH), will operate the project for the City, as it has been for the past several years, and it is anticipated that a lease, lease extension, or similar operating and/or funding agreements may be executed with the service provider, County, and/or LAHSA.

Project operation continues per a security plan consistent with the LAHSA's standards. By creating a stable environment and providing access to basic needs, clients can maintain a consistent connection to outreach workers and case managers to create a path to interim or permanent housing. The shelter will continue to be operated consistent with LAHSA program requirements for crisis and bridge shelters including, but not limited to, LAHSA's Scope of Required Services and Program Standards, as noted in the references section.

As indicated on the 2018 NOE, VA Greater Los Angeles Medical Center campus Draft MasterPlan provides for significant supportive housing on the campus. This includes existing short-term or limited stay housing that includes Bridge Housing. The Project has been operating at the VA campus in an area identified in the VA GLA Draft Master Plan as Existing Green Space/Open Space which allows for veteran housing.

II. PROJECT HISTORY

A. Homelessness Imposes a Loss of, or Damage to, Life, Health, Property, and to Essential Public Services in the City

Homelessness presents a danger of loss or damage to the health and property of the people of the City and an undue burden on essential public services. Based on information from the Census and the Los Angeles Homeless Services Authority (LAHSA), in 2020, homeless persons constituted approximately 1.07 percent of the City's population. (U.S Census Bureau, 2021 & LAHSA, 2020)

In 2018, homeless persons constituted 13.5 percent of LAFD's total patient transports to a hospital, meaning a homeless person is 17 percent more likely to require emergency hospital transportation than the general population (LAFD Battalion Chief and Paramedic Douglas Zabilski, 2019). Studies have shown that individuals identified as homeless utilize health care services more frequently than comparable non-homeless individuals of the same age, gender, and low-income status, particularly high-cost services such as Emergency Room (ER) visits and psychiatric hospitalizations (Hunter, 2017) (Hwang SW, 2013).

Los Angeles County's Chief Executive Officer reported the County spent \$965 million on health, law enforcement, and social services toward individuals experiencing homelessness in fiscal year 2014–2015 (Wu, 2016). Consistent with that report, a 1998 study in the *New England Journal of Medicine* found that homelessness was associated with substantial excess costs per hospital stay in New York City, with homeless patient staying in the hospital 36 percent longer per admission on average than other patients (Salit, *Hospitalization Costs Associated with Homelessness in New York City*, 1988).

Homelessness also causes significant danger to the health and lives of persons who are homeless. Homeless individuals living in the City are frequent crime victims. In 2018, LAPD reported 2,965 instances where a homeless individual was a victim of a serious crime, including homicide, rape, aggravated assault, theft, and arson (also known as "Part 1 Crimes.") (Commander Dominic H. Choi, 2019). This compares to 1,762 such crimes in 2017, a 68 percent increase (*Id.*). This dramatic increase in Part 1 Crime statistics may be due to more rigorous LAPD data collection methodologies, however it is consistent with the increasing incidence of homelessness documented in June of 2019 detailed below (*Id.*). During the first six months of 2020, LAPD reported 1,738 instances where a homeless individual was a victim of a serious crime including homicide, rape, aggravated assault, burglary, and larceny (LAPD, 2020).

Overall, in 2018, the LAPD reported 6,671 instances in total where a homeless individual was a Part 1 Crime victim and/or suspect, among the 31,285 estimated homeless individuals throughout the City (Commander Dominic H. Choi, 2019). This means that in 2018 there was approximately one Part 1 Crime per every 4.68 homeless individuals in the City. By comparison, for the same year LAPD reported 129,549 total Part 1 Crimes Citywide among an estimated population of 4,054,400 City residents, or approximately one Part 1 crime per every 31.29 City residents. Accordingly, the rate of Part 1 crimes among homeless individuals in 2018 was approximately seven times higher than the rate among the City population as a whole (*Id.*). According to the LAPD Use of Force Year-End Report in 2020, among the 41,290 estimated homeless individuals throughout the City, 7,872 persons were reported to be victims of a violent or property crime. In the same year, 5,722 persons experiencing homelessness were reported as suspects of a violent or property crime. (LAPD, 2020). On October 4, 2018 and again on February 6, 2019, the Los Angeles County Department of Public Health identified an outbreak of endemic flea-borne typhus in downtown Los Angeles among persons experiencing homelessness. On September 19, 2017, the Los Angeles County Department of Public Health declared a Hepatitis A virus outbreak among persons who are homeless and/or use illicit drugs in the County. Likewise, a January 2018 report from the Los Angeles County Department of Mental Health reported that data from the Los Angeles County Medical Examiner-

Corner's showed that a significant number of deaths in the homeless population were caused by treatable conditions such as arteriosclerotic cardiovascular disease, pneumonia, diabetes, cancer, cirrhosis, severe bacterial infections and other conditions (Choi, 2019). As noted more recently by the Board of Supervisors for the County of Los Angeles on October 29, 2019:

Mortality rates for people experiencing homelessness are much higher than those for the general population, have risen in the County over the past five years, and are expected to increase again for 2019. A recent analysis by the County's Department of Public Health on mortality rates and causes of death among people experiencing homelessness shed critical light on this issue and provided sobering data on recent trends. The overall mortality rate, which accounts for increases in the total homeless population over the 6-year period from 2013 to 2018, increased each year from 1,382 per 100,000 to 1,875 deaths per 100,000, with the total number of deaths among people experiencing homelessness increasing each year from 536 in 2013 to 1,047 in 2018. The leading causes of death included coronary heart disease (22%) and unintentional drug and alcohol overdose (21%), indicating that there are opportunities for interventions to prevent premature deaths (Supervisor Ridley-Thomas, Supervisor Solis, 2019) (Department of Public Health, 2019).

These significant adverse health impacts suffered by the homeless in the City and County of Los Angeles are consistent with the impacts identified by a well-established body of expert social science studies that document the significant adverse health and welfare impacts experienced by homeless persons in the United States and in other countries, which the homeless in the City and County experience as well. Some of that research has documented the following impacts upon homeless persons:

Mortality Rates. A study of the mortality rates of sheltered homeless people in New York City between 1987 and 1994 documented that homeless men died at a rate more than twice that of other residents of New York, and that homeless women died at a rate more than 3.7 times greater than other New York residents (Barrow, Susan M., PhD, Daniel B. Herman, DSW, Pilar Cordova, BA, and Elmer L. Struening, PhD, 1999). A study conducted between 1985 and 1988 in Philadelphia found that the mortality rate among homeless persons in Philadelphia was nearly four times greater than for the general population (Hibbs, Jonathan R., MD, et. al., 1994). A review of five years of data between 2000 and 2005 in Glasgow, Scotland found that homelessness is, itself, is an independent risk factor for death, distinct from other specific causes (Morrison, 2009).

Access to Healthcare. A 2003 nationwide survey of homeless persons documented that homeless adults reported substantial unmet needs for multiple types of health care (Baggett, Travis P., MD, MPH, James J. O'Connell, MD, Daniel E. Singer, MD, and Nancy A. Rigotti, MD, 2010). The report found 73 percent of the respondents reported at least one unmet health need, including an inability to obtain needed medical or surgical care (32%), prescription medications (36%), mental health care (21%), eyeglasses (41%), and dental care (41%) (*Id.*).

AIDs Impacts. A study of San Francisco residents diagnosed with AIDS from 1996 through 2006 and reported to the San Francisco Department of Public Health demonstrated that homeless persons with HIV/AIDS have greater morbidity and mortality, more hospitalizations, less use of antiretroviral therapy, and worse medication adherence than HIV infected persons who are stably housed (Schwarcz, Sandra K, Ling C Hsu, Eric Vittinghoff, Annie Vu, Joshua D Bamberger and Mitchell H Katz, 2009).

Cancer Impacts. A study of 28,000 current and formerly homeless individuals in Boston documented that homeless men saw a significantly higher cancer incident rate than expected compared to the general Massachusetts general population, and that homeless women and men experienced significantly higher cancer mortality rates than the Massachusetts general population (Baggett, Travis P et al., 2015).

B. Unexpected and Unabated Dramatic Surge in Homelessness

A 2017 Rand Corporation study reported the County of Los Angeles as having the highest rate in the United States of unsheltered individuals who experience homelessness (Hunter, Sarah B., Melody Harvey, Brian Briscoe, and Matthew Cefalu, 2017). The impacts of homelessness upon the homeless and upon the community, in terms of the danger to or loss of life, property, health and burden on public services is exacerbated in the City due the very size of the City's homeless population. The homeless shelter crisis and the rise in homelessness are the type of emergency situations that led the State to adopt AB 1197, an urgency statute addressing homelessness that was deemed necessary for the immediate preservation of the public peace, health, or safety and for the critical necessity to address the shelter and homeless crisis within the City of Los Angeles.

The City Council declared a homeless shelter crisis pursuant to Government Code Section 8698, et seq. on April 17, 2018 (The Honorable M. Bonin & M. O'Farrell, 2019), which is currently in effect (The Honorable M. Bonin & M. Harris-Dawson, 2019). Following significant investment of resources by both the County and City, the 2018 Homeless Count showed progress in reducing homelessness, documenting a 5.5 percent overall decrease in the number of persons experiencing homelessness in LA County (LAHSA, 2020).

Table 1 - 2018 Homeless Count Data Summary presents the data revealed by the 2018 Homeless Count concerning the City of Los Angeles, as documented in the 2018 Data Summary in Table 1 (LAHSA, 2020).

Table 1		
2018 Homeless Count Data Summary		
	Number of Individuals	Change from 2017
Sheltered Homeless	8,398	6% Decrease

Table 1		
2018 Homeless Count Data Summary		
Unsheltered Homeless	22,887	5.3% Decrease
Total Homeless Persons	31,285	5.5% Decrease

Despite these efforts and the initial progress shown in 2018, the revised 2019 Homeless Count, released in July 22, 2020, unexpectedly documented a dramatic increase in the number of individuals experiencing both sheltered and unsheltered homelessness in (LAHSA, 2020) *Table 2 - 2019 Homeless Count Data Summary* presents the data revealed by the 2019 Homeless Count concerning the City of Los Angeles, as documented in the 2019 Data Summary as shown in Table 2 (LAHSA, 2020).

Table 2		
2019 Homeless Count Data Summary (Revised 07/20/2020)		
	Number of Individuals	Change from 2018
Sheltered Homeless	8,944	6.5% Increase
Unsheltered Homeless	26,606	16.2% Increase
Total Homeless Persons	35,550	13.7% Increase

LAHSA published its 2020 Homeless Count, released in July 20, 2020, which shows that the homelessness emergency in the City of Los Angeles continues unabated. The documented number of individuals experiencing both sheltered and unsheltered homelessness dramatically increased yet again, as shown in *Table 3 - 2020 Homeless Count Data Summary* (LAHSA, 2020).

Table 3		
2020 Homeless Count Data Summary		
	Number of Individuals	Change from 2019
Sheltered Homeless	12,438	39% Increase
Unsheltered Homeless	28,852	8.4% Increase
Total Homeless Persons	41,290	16.1 % increase

LAHSA prepared a 2021 shelter point-in-time count for the City of Los Angeles that estimated the number and demographic characteristics of the sheltered homeless population on a single night in January 2021. Released in July 20, 2021, it shows that the

homelessness emergency in the City of Los Angeles continues unabated and uncertain. The documented number of individuals experiencing sheltered homelessness increased yet again, as shown in *Table 4 - 2021 Housing Inventory Count and Shelter Count Data Summary* (LAHSA, 2021). The 2021 unsheltered street count could not be conducted due to the COVID-19 pandemic. However, the availability of vaccinations enabled the resumption of the Homeless Count for February 2022 with appropriate precautions (LAHSA, 2022).

Table 4 2021 Housing Inventory Count and Shelter Count Data Summary		
	Number of Individuals	Change from 2020
Sheltered Homeless	12,503	1% Increase

C. Emergency Related to COVID-19 Pandemic Impacting Homeless Community

In addition to the crisis of growing homelessness, the COVID-19 pandemic is impacting homeless persons. On March 4, 2020, the Governor proclaimed a State of Emergency for the State of California (Governor Gavin Newsom, 2020), and the Mayor of the City of Los Angeles declared a local emergency related to the threat of the COVID-19 pandemic affecting the local population (Mayor Eric Garcetti, 2020). The City is facing an unprecedented emergency at the current time due to the sudden occurrence of the COVID-19 pandemic, and this emergency is particularly concerning for the imminent threat it poses to the City's homeless population.

On March 11, 2020, the State Department of Health issued guidance for protecting homeless Californians from COVID-19, which noted the following:

“We know that individuals experiencing homelessness are at greater risk of having an untreated and often serious health condition. This vulnerable population also has a higher risk of developing severe illness due to COVID-19,” said Dr. Mark Ghaly, Secretary of the California Health and Human Services Agency. “It is important that we act now to protect this population and the compassionate people who serve them.” (Corey Egel, 2020.)

The homeless often live unsheltered, unprotected from the elements and in close contact and proximity to other individuals in the homeless community. As noted above, the homeless population is substantially more prone to underlying health conditions. The State Department of Public Health additionally states that populations “with compromised immune systems, and people with certain underlying health conditions like heart disease, lung disease and diabetes, for example, seem to be at greater risk of serious illness.” (California Dept. of Public Health, 2020). Thus, exposure to COVID-19 in the homeless population is an imminent concern for the damage it will cause on these susceptible individuals.

On March 12, 2020, the Governor's Executive Order No. N-25-20 noted the "need to secure numerous facilities to accommodate quarantine, isolation, or medical treatment of individuals testing positive for or exposed to COVID-19." (Governor Gavin Newsom, 2020). On March 18, 2020, the Governor issued Executive Order No. N-32-20 (Governor Gavin Newsom, 2020), which further noted imminent impacts to the homeless, as follows:

[T]he emergency of COVID-19 necessitates a more focused approach, including emergency protective measures to bring unsheltered Californians safely indoors, expand shelter capacity, maintain health and sanitation standards and institute medically indicated interventions, and add new isolation and quarantine capacity to California's shelter and housing inventory to slow the spread of the pandemic....

The Governor stated that "[p]eople experiencing homelessness are among the most vulnerable to the spread of COVID-19," and "California is deploying massive resources to get these vulnerable residents safely into shelter, removing regulatory barriers and securing trailers and hotels to provide immediate housing options for those most at risk. Helping these residents is critical to protecting public health, flattening the curve and slowing the spread of COVID-19." (California Governor, Press Release (Governor Gavin Newsom, 2020).

On March 19, 2020, the Governor issued a stay-at-home order directing residents to stay home or at their place of residence (Governor Gavin Newsom, 2020). It noted "in a short period of time, COVID-19 has rapidly spread throughout California, necessitating updated and more stringent guidance from federal, state, and local public health officials." (Governor Gavin Newsom, 2020). Similar local Safer-at-Home orders followed (County of Los Angeles Public Health Department, 2020) (Mayor Eric Garcetti, 2020). The City's Safer at Home order particularly noted the following:

City of Los Angeles officials and contracted partners responsible for homelessness outreach shall make every reasonable effort to persuade such residents to accept, if offered, temporary housing or shelter, as the Health Officer of the County of Los Angeles recommends that sheltering individuals will assist in reducing the spread of the virus and will protect the individual from potential exposure by allowing the individual access to sanitation tools (Mayor Eric Garcetti, 2020).

In the United States District Court Central District of California case of *LA Alliance for Human Rights Et Al. vs. the City of Los Angeles, Et al.* Case No. CV 20-02291 DOC (The Honorable Judge David O. Carter, 2020), concerning homelessness, the Court entered a May 2020 injunction that had ordered the City of Los Angeles in partnership with the County of Los Angeles, to protect a particular subset of persons experiencing homelessness, finding they are exposed to severely heightened public health risks as a result of where they live (The Honorable Judge David O. Carter, 2020). Although the Court vacated that order on June 18, 2020, in favor of a homeless shelter agreement between the City and County, the Court retained its right to re-impose the May 2020 injunction. The Court's May 2020 findings concerning the emergency situation faced by homeless persons, therefore, is relevant to understanding the emergency situation.

The Injunction found that the combined risks of health impacts from living near freeways and the on-going Covid-19 pandemic constitute an emergency. The Court found that it is unreasonably dangerous for humans to live in areas which have deleterious health impacts and can shorten a homeless person's life expectancy by decades. These locations near freeways, for example, could be contaminated with lead or other carcinogenic substances and also increase the danger that a homeless person will be struck by a vehicle or injured in the event of an earthquake or crash. Camps in these locations can also burden the general public—for example, by posing potential hazards to passing motorists, or by making sidewalks and other rights-of-way inaccessible to individuals with disabilities.

The Court further found that providing housing for persons experiencing homelessness will help stop the spread of COVID-19 persons experiencing homelessness and will also help reduce the likelihood that the disease will spread throughout the greater Los Angeles community.

Taken together, the unexpected and dramatic increase in homelessness in the City and County of Los Angeles identified first in 2019, continues unabated in 2022 and was exacerbated by the COVID-19 pandemic posing a critical emergency situation in the City of Los Angeles. This situation presents documented dangers to health, life, property and a burden on public resources which presents an emergency as defined by CEQA as explained below. Furthermore, the State has created additional CEQA exemptions applicable in the City of Los Angeles concerning homelessness and homeless shelters.

III. THE PROJECT IS EXEMPT FROM FURTHER CEQA REVIEW

A. The Project is Exempt Pursuant to the Emergency CEQA Statutory Exemption (PRC Section 21080(b)(4))

Public Resources Code Section 21080(b)(4) provides that CEQA does not apply, to “specific actions necessary to prevent or mitigate an emergency.” Public Resources Code section 21060.3 defines Emergency as, “a sudden, unexpected occurrence, involving a clear and imminent danger, demanding immediate action to prevent or mitigate loss of, or damage to, life, health, property, or essential public services.” Section 21060.3 further provides that Emergency, “includes such occurrences as fire, flood, earthquake, or other soil or geologic movements, as well as such occurrences as riot, accident, or sabotage.”

Finally, 14 California Code of Regulations (Governor's Office of Planning and Research, 2018) Section 15269, “Emergency Projects,” provides examples of emergency projects exempt from the requirements of CEQA, including the following:

- (c) Specific actions necessary to prevent or mitigate an emergency. This does not include long-term projects undertaken for the purpose of preventing or mitigating a situation that has a low probability of occurrence in the short-term, but this exclusion does not apply

- (i) if the anticipated period of time to conduct an environmental review of such a long-term project would create a risk to public health, safety or welfare, or

- (ii) if activities (such as fire or catastrophic risk mitigation or modifications to improve facility integrity) are proposed for existing facilities in response to an emergency at a similar existing facility.

The Project is a specific action necessary to prevent or mitigate an emergency – the conditions arising from a sudden and unexpected dramatic rise in the City’s already dangerously large homeless population, now adversely impacted by the COVID-19 pandemic for all of the reasons set forth above in Part II (Project History). The Project, therefore is exempt from CEQA environmental review pursuant to Section 21080(b)(4).

B. The Project is Exempt Pursuant to AB 1197 Codified at PRC Section 21080.27

Assembly Bill 1197 (Santiago, 2019) was signed into law on September 26, 2019, which adopted Section 21080.27 of the California Public Resources Code (PRC) and created a statutory exemption for compliance with CEQA for emergency shelter projects located within the City of Los Angeles. The intent of AB 1197 is to help the City of Los Angeles address its homeless crisis and is an urgency statute that is deemed necessary for the immediate preservation of the public peace, health, or safety and for the critical necessity to address the shelter and homeless crisis. AB 1197 took immediate effect on September 26, 2019 in order to address the unique circumstances faced by the City of Los Angeles and to expedite the development of emergency homeless shelters. As noted in the following sections, this shelter project complies with the requirements in AB 1197, and thus the Project is exempt from CEQA pursuant to AB 1197 (PRC § 21080.27).

1. City of Los Angeles Declaration of a Shelter Crisis

Public Resources Code, section 21080.27(a)(2) requires that emergency shelters be approved during a shelter crisis under Government Code, section 8698.2. The City of Los Angeles City Council declared a homeless shelter crisis pursuant to Government Code Section 8698, et seq. on April 17, 2018 (The Honorable M. Bonin & M. O’Farrell, 2019), which is currently in effect (The Honorable M. Bonin & M. Harris-Dawson, 2019).

2. The Project Meets the Definition of a Low Barrier Navigational Center in Government Code Section 65660

Under AB1197, emergency shelters must meet the definition of “Low Barrier Navigational Center” in Government Code Section 65660, which defines Low Barrier Navigation Center as a “Housing First, low-barrier, service-enriched shelter focused on moving people into permanent housing that provides temporary living facilities, while case managers connect individuals experiencing homelessness to income, public benefits, health services, shelter and housing. The City builds and operates emergency shelters, such as this Project, to be operated as low barrier navigation centers consistent with Government Code Section 65660.

Service-Enriched Shelter with Case Managers Connecting to Services. The requirements are met by this Project for a “service-enriched shelter focused on moving people into permanent housing that provides temporary living facilities, while case

managers connect families experiencing homelessness to income, public benefits, health services, shelter and housing.” This Project provides temporary housing, with case managers staffing the facility that provide connections to homeless family services and assistance for the occupants. This is one of the fundamental purposes of this shelter project. For example, the Project’s programs include Trauma Informed Care policies and procedures that involve understanding, recognizing, and responding to the effects of all types of trauma. Trauma Informed Care also emphasizes physical, psychological and emotional safety for both families and providers, and helps families rebuild a sense of control and empowerment. Trauma Informed services take into account an understanding of trauma in all aspects of service delivery and place priority on the trauma survivor’s safety, choice, and control. Trauma Informed Care services create a culture of nonviolence, learning, and collaboration.

The Project will be operated by service providers coordinated with the Los Angeles Homeless Services Authority (LAHSA). The intention of this emergency shelter is to provide persons experiencing homelessness with some stability, so that they can more easily maintain contact with housing navigation and/or case management services to facilitate safe and supportive housing placement.

Per LAHSA’s Crisis and Bridge Housing Scope of Required Services, which will be followed for operating the shelter in this Project, service providers that oversee an emergency shelter must provide case management services and develop a Housing Stability Plan with each person. The shelter will program implement a case management and service plan known as Housing-Focused Case Management and Support Services (HFCMSS). HFCMSS includes but is not limited to: support with completing housing applications, accompanying the individual to housing appointments and/or leasing appointments, and other support associated with the housing placement process. The primary objective of HFCMSS is to extend support to individuals through an individualized case management relationship that will ultimately translate to increased housing stability. The HFCMSS offers services to connect individuals to permanent housing. Case Managers present at the shelter make rapid connections to a broad continuum of resources and permanent housing, emphasizing a short-term stay.

HFCMSS connects families to a Housing Navigator who assists individuals to gain access to permanent housing through referrals to housing programs (such as RRH, Permanent Supportive Housing, affordable housing, etc.). A case manager is assigned to an individual when the person enters the program and then helps the participant establish a connection to a Housing Navigator. A Housing Navigator assists individuals with Housing Navigation services. Housing Navigation services are available to individuals to support their housing placement goals and must be focused on assisting the participant in identifying and accessing permanent housing within the general ninety (90) days. Housing Navigation services may be provided onsite or offsite, and may also require participants’ to be accompanied to off-site appointments.

Case management must be conducted on a regular and routine basis and must be routinely documented. The content and outcome of case management meetings with individuals are entered into a housing management information system with case notes

that are tracked in the system. Housing-focused case management sessions are dedicated to assessing and reassessing needs, educating individuals on community resource opportunities, developing Housing Stability Plans, scheduling appointments, and providing necessary follow up to ensure housing stability plans are progressing on schedule and needs are adequately being addressed.

As noted in LAHSA's Program Standards, supportive services for the shelters focus on the income, resources, skills and tools needed to pay rent, comply with a lease, take reasonable care of a housing unit, and avoid serious conflict with other tenants, the landlord, and/or the police. The Program Standards also require service providers to utilize and maintain referral networks with specific lists of health services and public benefit services for connecting occupants to those benefits. Thus, the project is a service-enriched shelter focused on moving individuals into permanent housing that provides temporary living facilities, while case managers connect individuals experiencing homelessness to income, public benefits, health services, shelter and housing.

Housing First. The Project is a "Housing First" shelter pursuant to Government Code Section 65660. Also, in being such a Housing First shelter, the project complies with Chapter 6.5 of Division 8 of the Welfare and Institutions Code (commonly referred to as the Housing First Law) as required by Government Code Section 65662 (discussed further below). "Housing First" means the evidence-based model that uses housing as a tool, rather than a reward, for recovery from homelessness, and that centers on providing or connecting people experiencing homelessness to permanent housing as quickly as possible. Housing First providers offer services as needed and requested on a voluntary basis and that do not make housing contingent on participation in services.

Housing First also includes time-limited rental or services assistance, so long as the housing and service provider assists the recipient in accessing permanent housing and in securing longer-term rental assistance, income assistance, or employment. In the event of an eviction, programs shall make every effort, which shall be documented, to link tenants to other stable, safe, decent housing options. Exit to homelessness should be extremely rare, and only after a tenant refuses assistance with housing search, location, and move-in assistance. If resources are needed to successfully divert an individual from entry into the homelessness system, a referral must immediately be made to a CES Diversion/Prevention program. In order to identify other permanent housing options, service providers continue to have such problem solving conversations with the individual while residing in Crisis and Bridge Housing. More broadly, the project includes a housing and services plan and housing-focused case management, both with an orientation towards supporting individuals to exit to safe and stable housing. This Project meets the above-noted Housing First requirements.

The emergency shelters are operated by service providers coordinated through LAHSA. All service providers must comply with LAHSA's Scope of Required Services, Program Standards, and Facility Standards. Per LAHSA's Program Standards, all eligible participants are to be served with a Housing First approach. LAHSA's CES for Families' Principles and Practices that were approved by the CES Policy Council on August 23, 2017 shall be used to guide the development of systems-level policy and to ensure transparent and accountable decision-making with privately owned Service Providers

who enter into a partnership with LAHSA. The basic underlying principle of LAHSA's System Components is that access to housing is the primary need for its program participants. Services are voluntary and not required to enter into a shelter. Individuals will not be rejected or exited from participation in the emergency shelter due to any unnecessary barriers.

The City's shelters are intended to be a Housing First program focused on quickly moving individuals experiencing homelessness into permanent housing and then providing the additional supports and services each person needs and wants to stabilize in that housing. The basic underlying Housing First principle is that individuals are better able to move forward with their lives once the crisis of homelessness is over and they have control of their housing. The City's emergency shelter will, provide a safe, low barrier, housing-focused, and homeless services support in a twenty-four (24) hour residence to help individuals who experience homelessness that meet the above-noted requirements for Housing First. One of the core components of the Housing First model is that longer-term housing accepts referrals directly from shelters. The City's shelters, including this Project, are primarily focused on connecting, transitioning, and referring homeless individuals into such permanent housing as quickly as possible in the Housing First model, and accepting occupants through the crisis response system. The intention of this emergency shelter project is to provide participants with some stability, so that they can more easily maintain contact with housing navigation and case management services and facilitate safe and supportive housing placement. Services in the City's shelters, including this Project, are never mandatory and cannot be a condition of obtaining the housing intervention. This Project will provide temporary housing, case managers and Housing Navigators staffed at the facility or offsite who provide connections to homeless services for the occupants. Based on the above-noted information, the project's emergency shelter meets the Housing First requirements relative to AB 1197.

Low Barrier. "Low Barrier" means the shelters use best practices to reduce barriers to entry, including but not limited to, the presence of partners (if it is not a population-specific site, such as for survivors of domestic violence or sexual assault, women, or youth); pets; storage for possessions; and privacy (such as partitions around beds in a dormitory setting or in larger rooms containing more than two beds, or private rooms). The City's shelters, including this Project, meet these requirements.

The Project provides approximately 100 beds for adult veterans. This Project is population-specific, serving adult veterans. This Project is pet friendly and includes a pet area. Participants are allowed to bring their pets to the shelter. The Project has storage within each sleeping area for personal possessions or storage bins. The Project is designed to provide privacy to participants by providing each family or individual with their own sleeping space. There are separated sleeping spaces with communal bathrooms. Therefore, the project is managed and designed to allow the privacy of participants and is a pet friendly facility for participants who choose to be accompanied by their pets.

The Project uses low barrier best practices that reduce barriers to entry. They include pet friendly facilities, storage areas for some possessions, and management and design for individuals' privacy. All of the City's emergency shelters, including this project, meet

these requirements. Therefore, none of the noted conditions would preclude access to the project, and the project is considered crisis and bridge housing that is “low barrier” within the meaning of Government Code Section 65660 and AB 1197.

In sum, based on the above-noted information, which is additionally explained and provided with additional details in the documents from LAHSA cited in the Reference section to this document, the Project meets the definition of Low Barrier Navigation Center set forth in Government Code Section 65660.

3. The Project Complies with Government Code Section 65662

Under AB1197, emergency shelters must meet the four requirements identified in Government Code Section 65662(a) through (d), which are each discussed in turn in this section.

Connecting to Permanent Housing through a Services Plan. Government Code Section 65662(a) requires that Low Barrier Navigation Centers offer services to connect families and individuals to permanent housing through a services plan that identifies services staffing. This Project meets that requirement. As noted above, the Project includes housing-focused case management sessions that involve developing Housing Stability Plans/Housing and Services Plans, scheduling appointments, and providing necessary follow up to ensure housing stability plans are progressing on schedule and needs are adequately being addressed. This is required in LAHSA’s Scope of Required Services.

The Housing Stability Plan is the family or individual’s service plan that summarizes the participant’s housing goals, services needed, what will be provided, actions that need to be taken (by staff and the participant), and referrals that need to be made. Case managers develop the services plan in coordination with the family or individual right after intake and assessment, track the plan in a homeless management information system, and revise the plan as the family or person’s situation changes and steps are completed or revised accordingly.

Families and individuals are assisted with a range of activities that address the stated goals of the family or individual in the Housing Stability Plan, including but not limited to:

- Accessing personal identification (For quick referral to permanent housing)
- Accessing certification of the current income (For quick referral to permanent housing)
- Mainstream Benefits
- Substance Abuse services
- Mental Health Services
- Health Services
- Vocational Services
- Employment Services
- Educational Support
- Legal Services

- Life Skills Development
- Independent Living Program for Youth
- Transitional Housing Program for Youth
- CES and CoC Rapid Re-Housing Program
- Housing Navigation Assistance
- CoC Permanent Supportive Housing
- LA County Department of Health Services, Housing for Health or Housing and Jobs Collaborative
- LA County Department of Health Services, Countywide Benefits Entitlement Services Team
- LA County Department of Mental Health, Countywide Housing Assistance Program
- Veterans Administration Housing Programs
- Housing Opportunities for Persons with Aids (HOPWA) Housing
- Crisis Housing for Unaccompanied Youth
- Youth Family Reconnection Program

Progress and problems implementing the plan are reviewed and updated frequently.

Coordinated Entry System. Government Code Section 65662(b) requires Low Barrier Navigation Centers to be linked to a coordinated entry system allowing staff and co-locating staff to conduct assessments and provide services to connect families and individuals to permanent housing. This is required by LAHSA's Scope of Required Services and Program Standards. Thus, all City of Los Angeles homeless shelters, including this project, are linked to the Los Angeles County Coordinated Entry System, a centralized or coordinated assessment system designed to coordinate program participant intake, assessment, and referrals. The residents are prioritized through the coordinated entry system in the Los Angeles County Coordinated Entry System for safe and supportive housing resources. The City's collaborates with Los Angeles County Case Entry System and provides case management services to program participants through a Housing Stability Plan. Case managers must develop a Housing Stability Plan in coordination with the participant right after intake and assessment. The Housing Stability Plan must be tracked in a Homeless Management Information System (HMIS) along with the date of completion.

The shelter will collaborate with Los Angeles County Case Entry System Housing Navigators and case managers from other outside agencies to provide case management services to program participants. Los Angeles County Coordinated Entry System case managers work with participants and assist by facilitating services appointments; and then eventually help them find permanent housing.

Compliance with Welfare and Institutions Code. Government Code Section 65662(c) requires Low Barrier Navigation Centers comply with Chapter 6.5 of Division 8 of the Welfare and Institutions Code, which specifies the Housing First requirements. As noted above, the City's emergency shelters, including this project, are Housing First shelters, and thus they comply with this requirement.

Homeless Management Information System. Government Code Section 65662(d) requires Low Barrier Navigation Centers to have a system for entering stays, demographics, income, and exit destination through a local Homeless Management Information System designed to coordinate program participant intake, assessment, and referrals. These are required by LAHSA's Scope of Required Services and Program Standards. The City's emergency shelters use such a system in the Los Angeles Continuum of Care Homeless Management Information System (HMIS). In 2001, Congress directed the U.S. Department of Housing and Urban Development (HUD) to ensure the collection of more reliable data regarding the use of homeless programs. HUD required all Continuum of Care applicants to demonstrate progress in implementing a Homeless Management System (HMIS). LAHSA led a regional planning process, encompassing three Continuums of Care - Los Angeles, Glendale, and Pasadena. This process resulted in the selection of a system that would not only satisfy the HUD mandate, but would also provide the Los Angeles Continuum with a means to measure the effectiveness of programs serving homeless families. Presently, the Los Angeles Continuum of Care (LACoC) is part of a collaborative called the Los Angeles HMIS Collaborative. The LA HMIS Collaborative consists of three Continuums of Care (CoC): Los Angeles, Glendale, and Pasadena.

HMIS is a web-based application that is designed to collect information on the characteristics and service needs of homeless persons. The system allows agency users and the Los Angeles Homeless Services Authority (LAHSA) to use collected information for informed programmatic decision-making. Participating agencies collect and input standardized client-level and demographic data into the system, including client/household demographic details; relationships within a family and household; client/household income; client/household documents; case management and services; housing placements; and progress for housing retention. The HMIS includes a focus on Outcomes Management that sets and measures milestones and target achievements of clients and program performance.

Housing Stability Plans are tracked in a Homeless Management Information System (HMIS) along with the date of completion. Case managers complete a Monthly Update with the family to assess progress towards achieving the goals defined in the Housing Stability Plan. All services must be tracked, and information is provided to families in HMIS with the goal of the individuals achieving housing stability and sustainability upon exit from the program. Exit destination information is also collected. Accordingly, the Project meets the HMIS requirements.

In sum, based on the above-noted information, which is additionally explained in more detail in the documents from LAHSA cited in the Reference section to this document, the Project meets the requirements set forth in Government Code Section 65662.

4. The Project is in a Qualified Location Under AB 1197

AB 1197 requires that the site be located in "either a mixed-use or nonresidential zone permitting multifamily uses or infill site...." (PRC § 21080.27(a)(2).) The project is

considered an infill site because the site has been developed with, and its perimeter is surrounded by, qualified urban uses.

As indicated above, the Project site is on federally-owned land that allows for Veteran Housing. Therefore, the Project meets the AB 1197 requirement.

5. The Project Involves Qualified Funding Under AB 1197

AB 1197 (Public Resources Code Section 21080.27(a)(2)(A)-(D) exempt emergency shelter projects from CEQA which have at least a portion of the funding from qualified sources. The City has determined that the Project is a homeless shelter project that would qualify for the other homeless shelter funding sources identified in AB 1197, and that those funds may be applied to this Project if such funding becomes available, which further qualifies this Project for the exemption under AB 1197. Because these funding sources are qualified funding sources under Public Resources Code Section 21080.27(a)(2)(A), the funding requirement may also be met. However, the Project meets other requirements as described elsewhere in this document.

Moreover, on October 5, 2018, the City Council approved Homeless Housing, Assistance, and Prevention (HHAP) Program and Homeless Emergency Aid Program (HAEP) Funding to construct the project (CF No. 19-0877), City Council action (11/5/18). HHAP and HAEP are qualified funding under AB 1197, and therefore at least a portion of the funding of the project related to its establishment and operation used qualified funding that qualifies the project for exemption under AB 1197. This is sufficient since it shows that the project is a qualified homeless shelter project.

6. The City's Actions Qualify under AB 1197 as Actions in Furtherance of Providing Emergency Shelters in the City of Los Angeles

AB 1197 (Public Resources Code Section 21080.27(b)(1)), exempts from CEQA "any activity approved by or carried out by the City of Los Angeles in furtherance of providing emergency shelters or supportive housing in the City of Los Angeles." This Project involves the continued lease and operation of an existing homeless shelter that the City constructed and operated for several years, as described above, which is located in the City of Los Angeles. The City will provide funding and enter into contracts with a qualified service provider and/or LAHSA, to lease and operate the emergency shelter. Therefore, the City's actions are in furtherance of providing emergency shelters in the City of Los Angeles and qualify for exemption from CEQA under AB 1197.

The Project Involves an Eligible Public Agency taking a Qualified Action under AB 1197

7. AB 1197 Conclusion

Based on the above-noted information, the Project is exempt from CEQA pursuant to Public Resources Code Section 21080.27.

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