ALAMEDA COUNTY COUNCIL FOR AGE FRIENDLY COMMUNITIES

Recommendations to Address the Housing Crisis and its Impact on Older Adults in Alameda County

May 7, 2019

Contents

Preface

We are pleased to submit these recommendations that address the need for practical, effective solutions to the housing and homelessness crisis impacting older adults in Alameda County. Too often, housing related interventions fail to meet the unique needs of older adults. We appreciate the opportunity to pull together subject matter experts to provide recommendations that address these needs.

This work was carried out through the Housing Workgroup of the Alameda County Council for Age Friendly Communities. The Age Friendly Council grew out of the last four-year Countywide Plan for Older Adults, which included a priority related to housing. In February 2018, the Board's Joint Health and Social Services Committee directed the Council to prioritize housing. The Housing Workgroup met on multiple occasions starting in August 2018. In February 2019, an initial set of recommendations was submitted to the Homelessness Council, which responded with a request for prioritization and alignment with the Homelessness Action Plan.

Recommendations for Immediate Action

The following action steps belong to a broader set of recommendations developed by the Housing Workgroup of the Alameda County Council for Age Friendly Communities (see Detailed Recommendations). Though these may not represent the highest priorities in terms of unmet need, they do represent recommendations which the Council believes are most ready for action. With your agreement, the Council is prepared to further develop these ideas, and with your support, we will also continue to identify potential opportunities to implement the other recommendations, including those that will require additional analysis and resources.

1. Protections for Older Adult Renters and Homeowners
   o Legal protections for renters -- Specifically, a just cause eviction ordinance for the unincorporated County. This aligns with a recommendation of the CASA Committee to House the Bay Area and could be a model for the County's cities. Such protections already exist in Oakland and Berkeley.
   o Relief from tax liens for homeowners facing homelessness – Oregon's property tax deferral program for disabled and senior citizens may supply a useful model.

2. Older Adult Subject Matter Expertise in Newly Developed Programs
   o The Age Friendly Council is advised that AC3 has funding for subject matter experts. The recommendation is to use AC3 funds to pay for experts on older adults to advise in the development of the new facilities and services described in the Homelessness Action Plan.
   o One such program is the Alameda Point Collaborative's Medical Respite, Housing and Wellness Center. Experts on older adults can bring an age-friendly lens to architectural design and service planning.

3. Shelter and Temporary Housing Innovations and Adaptations
   o Make winter shelters year-round, investing in facility layout as needed.
   o Shelters now exclude people who need support with activities of daily living (ADLs) (e.g., setting up and taking down their own cots and personal care). Ensure that new shelters are ADA-accessible and can accommodate persons who need support with mobility and ADLs.
   o Improve temporary housing facilities to make them accessible and welcoming to couples, pets, and persons with disabilities and older adults.

4. Rapid Response Intensive Case Management
   o There is a pilot to provide intensive case management to people being discharged from a hospital. Expand this to other hospitals. Some private funding may be available.

Housing, Homelessness, and Older Adults Quick Facts

Alameda County older adults make up a large demographic, many in poverty:
- 215,418 residents age 65+ (13.1% of pop.) rising to 260,000 (22% of pop.) by 2050
- 73,000 (27%) live at 200% or below of federal poverty level ($24,280 for a single person)
- Income of 50% of residents age 65+ is < "Elder Index" basic needs minimum
- 28% of Alameda County renters 65+ are "rent-burdened" (pay > 30% of income), 48% are "severely rent-burdened" (pay > 50% of income)
- 3,278 homeless persons are 50+
- 10% of homeless persons are 60+
- 33% of street medicine patients seen by Health Care for the Homeless are 55+
- Persons 55+ make up 27% of the Home Stretch registry
- Homeless individuals experience health conditions in their 50s typically seen in 70s and 80s and typically die 25 years earlier than general population

Many older adults have special burdens in relationship to housing:
- Fixed incomes don't keep up with market housing costs
- Income loss often follows illness, disability, death of a partner/spouse, retirement
- Housing loss disrupts links with care providers and support networks

Traditional responses to homelessness often fail to meet the needs of older adults:
- Traditional service models assume clients are able-bodied
- Facilities often unwilling to accept patients with limitations in activities of daily living (ADLs), incontinence, cognitive deficits, or complex care needs

Not enough senior affordable housing is being developed:
- From 2005 to 2018, of 635 affordable senior housing units developed with subsidies from Alameda County's Housing and Community Development Department, only 70 were for persons earning < 30% of Area Median Income (AMI)
- Of 247 senior units in development, only 57 are for persons earning < 30% of AMI

Hospital to home transitions are critical points for seniors with complex needs:
- Older adults account for 30% of hospitalizations in Alameda County
- Mental health hospitalization rates rise with increasing age, with rates soaring among older adults ages 85+
- In Alameda County, most preventable hospitalizations are related to chronic disease (65%) as opposed to acute disease (35%)
- Economically insecure seniors with substantial physical or cognitive impairment or serious health problems are at high risk of repeat hospitalizations or nursing home placement

Introduction

The housing crisis in the Bay Area is having a disparate impact on older adults, whether it be losses to community as a result of gentrification-driven displacement, the stress of unstable housing, the overrepresentation of older adults among the first-time homeless, or the heightened vulnerability to disease and disability among older adults experiencing homelessness. Though the challenges are large, practical solutions are possible, and fortunately in Alameda County, leadership has stepped forward and committed themselves to action.

Our work relies on this important frame: what is needed is a suite of interventions for people who find themselves along a continuum of housing instability. In our work we identified three key categories of persons in need: frail elders, persons at risk of displacement, and persons at risk of homelessness. More than 40 recommendations (attached) were developed within four categories:

1) Homelessness and Displacement Prevention ("Prevention")
2) Services to Persons Experiencing Homelessness ("Homelessness")
3) Developing More Housing Options ("Housing")
4) Cross-Cutting Solutions (apply to one or more of the other categories or support the field) ("Cross-Cutting")

We have attempted to align our recommendations with the Homelessness Action Plan approved by the Board of Supervisors in November 2018. Because our recommendations go beyond addressing homelessness, encompassing anti-displacement work as well, we have altered the title of one category used within the Homelessness Action Plan, adding a reference to displacement.

Our criteria for selecting priorities included feasibility, impact, and whether programs exist that can be built upon.
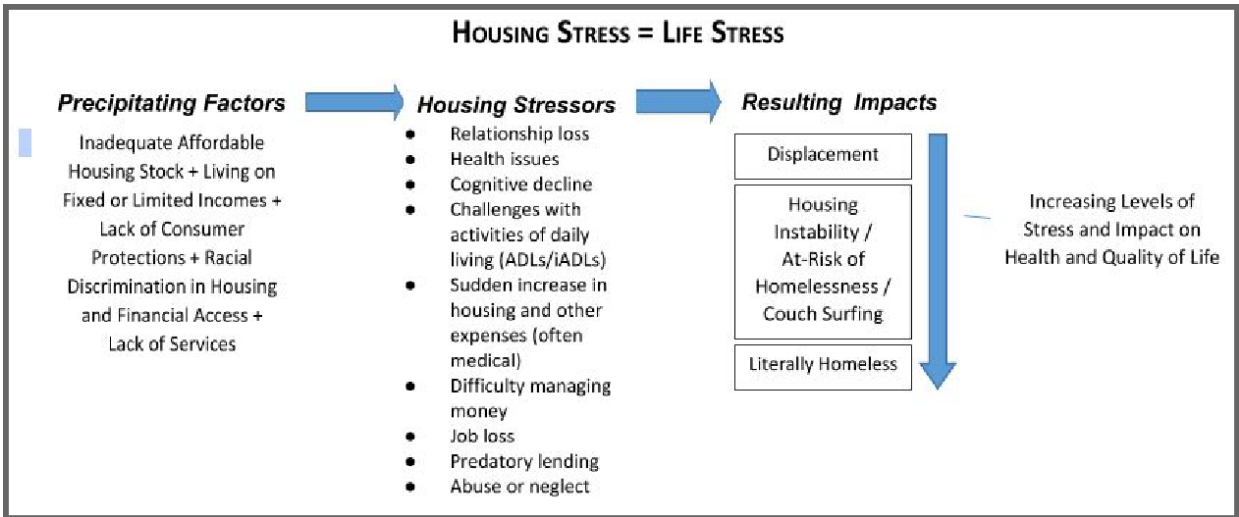
These recommendations were developed through an open and inclusive community process that began in May 2018 and involved a broad range of subject matter experts, including the Age Friendly Council and the Advisory Commission on Aging. There were six formal meetings of the Council's Housing Workgroup, with multiple smaller workgroup meetings in between.

It is important to note that the named projects are those recommended for action in the near term, but other recommendations remain important and should be moved forward as time and resources permit. The complete list of recommendations considered is contained in the Appendix.

A Framework for Understanding Housing Stress

Many factors cause housing stress, which is a precursor to housing instability. Many of these factors are structural or precipitating factors, such as an inadequate housing stock, fixed incomes, lack of legal protections, and racial discrimination. Other factors are stressors common to individuals and families, including illness, disability, relationship loss, and job loss.

People with adequate resources and luck usually can weather these stresses and remain in housing or move to a place of their choice. For everyone else, housing stress pushes people into one of three states. First, they may become displaced, which we define as being forced to move out of their homes and sometimes their communities. Second, housing itself becomes tenuous or inadequate so people are at risk of becoming homeless or, if they have already lost their housing, they are utilizing short-term solutions such as couch surfing. Finally, at the highest level of stress, people become literally homeless.

HOUSING STRESS = LIFE STRESS

Precipitating Factors

Inadequate Affordable Housing Stock + Living on Fixed or Limited Incomes + Lack of Consumer Protections + Racial Discrimination in Housing and Financial Access + Lack of Services

Housing Stressors

- Relationship loss
- Health issues
- Cognitive decline
- Challenges with activities of daily living (ADLs/iADLs)
- Sudden increase in housing and other expenses (often medical)
- Difficulty managing money
- Job loss
- Predatory lending
- Abuse or neglect

Resulting Impacts

Displacement

Housing Instability / At-Risk of Homelessness / Couch Surfing

Literally Homeless

Increasing Levels of Stress and Impact on Health and Quality of Life

Summary of Recommendations

Prevent Homelessness and Displacement
- Rapid Response Teams Serving Older Adults at Risk of Homelessness and Displacement
- Tenant and Homeowner Protection Ordinances in Unincorporated Areas

Outreach to Unsheltered People
- Rapid Response Teams Serving Older Adults Experiencing Homelessness

Provide Health and Supportive Services
- Meet the Basic Human Needs of Unhoused Vulnerable Older Adults
- Medical Respite for Older Adults

Provide Shelter and Housing
- Shelters That Better Serve Older Adults
- Provide Support to Intermediary Organization(s) that Acquire, Develop, and Manage Properties that House Older Adults
- Ongoing Housing Subsidies to Support Older Adults
- Alternative Housing, Including Family Reunification, Roommate Matching, Tiny Houses, and ADUs to Support Older Adults

Create a Coordinated System
- Training for County Staff and Housing Services Providers on How to Work Effectively with Older Adults

Detailed Recommendations

Prevent Homelessness and Displacement

Homelessness can often be prevented, but this requires professionals who can make home and hospital visits and deploy legal, case management, and flexible cash resources. Legal protections for tenants at the community level are also important to reduce vulnerability to harsh economic conditions.

Rapid Response Teams Serving Older Adults at Risk of Homelessness and Displacement

Impact: Individuals receive interventions which stabilize them and mitigate their risk for homelessness or displacement.

Description: Calls to 211 and other referring entities result in deployment of rapid response teams dedicated to providing older adult-specific housing services, including home and hospital visits, assessment, legal assistance (including tenant protections and benefits advocacy), housing navigation, case management, including linkage to services, and flexible dollars. Useful models include HCD's proposal to infuse case management into their Housing Preservation Fund program, Keep Oakland Housed, Alameda County Health Care for the Homeless, St. Mary's Homeless Senior Services, BACS homeless outreach, the Rapid Response Case Management Pilot. While some or all of these services may be available in certain circumstances (e.g., to some Behavioral Health or APS clients), this proposal fills a gap by making this set of services available to highly vulnerable clients who may not meet existing eligibility requirements. The same intervention, but with specialized teams, applies to both efforts to prevent homelessness and displacement and services to persons experiencing homelessness.

Tenant and Homeowner Protection Ordinances in Unincorporated Areas

Impact: More than 3,000 low-income older adults living in unincorporated areas of the County will benefit from increased protection and decreased risk of housing loss or displacement[1]

Description: The Board of Supervisors would pass ordinances for the unincorporated communities in Alameda County and promote similar ordinances in the cities, potentially including: requirement that landlords provide information to tenants when buildings such as senior residential buildings, assisted living facilities, and board and care homes close; protections before the County Tax Collector enters defaults against homeowners who are older adults or persons with disabilities; just cause eviction; and property tax deferral. The strengthening of legal protections also makes legal services more effective.

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[1] Sources for estimate: From CAPE unit (2010-14 American Community Survey): In Ashland and Cherryland,

40% and 44% of older adults 65+ respectively live below 200% of FPL. From AAA County Plan 2016-20 (using SCS 2010-14): total number of residents age 60+ in unincorporated areas = 7,508. 7,508 x .4 = 3,003.

Outreach to Unsheltered People

An increasing number of newly homeless people are older adults, who are often more vulnerable than others to negative health impacts of living without shelter, particularly because as currently designed, the system of services and supports for persons experiencing homelessness falls short of meeting the unique needs of older adults. In many cases, an episode of homelessness can be shortened by a quick response of a multidisciplinary team.

Rapid Response Teams Serving Older Adults Experiencing Homelessness

The same intervention, but with specialized teams, applies to both efforts to prevent homelessness and displacement and services to persons experiencing homelessness. See above for a description of this intervention.

Provide Health and Supportive Services

While the community works to create new housing opportunities, many older adults will continue to live unsheltered and require services to meet their basic needs.

Meet the Basic Human Needs of Unhoused Vulnerable Older Adults

Impact: Homeless older adults have access to basic services and amenities.

Description: Older adults currently experiencing homelessness need security, hygiene facilities, nursing care, nutrition, medication, power outlets for electric scooters and other medical equipment, etc. All homeless older adults should have access to essential services to meet their basic human needs.

Medical Respite

Impact: Homeless persons being discharged from hospitals receive appropriate temporary housing and medical care to permit them to complete their recovery.

Description: More medical respite beds for people with high medical needs but who do not require hospitalization or skilled nursing care and may need stays exceeding 30 days. Useful models: Alameda Point Collaborative (new project to establish 50 beds), BACS medical respite. Could add dollars to existing programs and permit longer stays.

Provide Shelter and Housing

Senior housing facilities continue to close at an alarming rate. A concerted effort is needed to save existing housing options. Renters and low-income homeowners also need ongoing subsidies. Because not all housing needs will be met by creating new subsidized units, we should take advantage of opportunities to house people through roommate matching, family reunification, and market approaches, such as ADUs. Tiny houses, including containers, also have a place in a diversified strategy.

Shelters That Better Serve Older Adults

Impact: There is an increase in the number of older adults making use of shelters instead of remaining unsheltered.

Description: Includes increasing accessibility, offering nursing care, allowing for medication storage, permitting service animals, policies that accommodate persons with functional limitations (e.g., not requiring residents to move their own cots), increasing permitted hours for shelter stays, etc. HCD has proposed $1 million for capital improvements for existing shelters and transitional housing. We support this and urge that it include a sharp focus on the unique needs of older adults.

Provide Support to Intermediary Organization(s) that Acquire, Develop, and Manage Properties that House Older Adults

Impact: Housing units serving older adults are preserved or created.

Description: An entity would be designated to manage many aspects of property acquisition, development, and management, braiding funding from a variety of sources. This can include rapid response when individual housing facilities are threatened, such as when board and care

facilities close or there are code violations, with options for both short-term receivership and long-term property management. Flexible funds could be used for repairs, mortgage payments, tax liens, and other purposes. Ideally, this organization could also promote alternative housing. Related models include the work of Brilliant Corners in Los Angeles, San Mateo County's CCI initiative, the City of Oakland's work with EBALDC, work by ACBH to establish a land trust focused on behavioral health clients, working with AC3; the City of Oakland's use of a state program that allows private landlords to get a tax abatement by partnering with a nonprofit; Measure A1 and other housing development funds which can be utilized for property acquisition.

Ongoing Housing Subsidies to Support Older Adults

Impact: Low-income older adults will receive or maintain housing.

Description: Ongoing rent or homeowner subsidies for low-income older adults. Potentially useful models: Section 8 and a Santa Monica subsidy program for low-income older adults. Alameda County currently contributes $8 million for ongoing subsidies.

Alternative Housing, Including Family Reunification, Roommate Matching, Tiny Housing, and ADUs to Support Older Adults

Impact: Older adults will obtain permanent housing as housing units serving older adults are added to the housing stock.

Description: This proposal encompasses a range of innovative approaches, including: the current Bridge pilot, which allows applications for IHSS services to proceed for persons who are still experiencing homelessness; container homes on public land; roommate matching (as in the City of Fremont); support for ADU development and ADU landlords experiencing problems with tenants. HCD is already working on promoting ADUs, including technical and financial assistance for homeowners, for a pilot program in the unincorporated County.

Create a Coordinated System

Older adults accessing services across the spectrum of housing needs continue to face workers unfamiliar with their unique needs and therefore unable to help them navigate systems and connect with appropriate resources. At every level, workers in the housing field need training to understand the special needs and concerns of older adults.

Training for County Staff and Housing Services Providers on How to Work Effectively with Older Adults

Impact: Organizations, including County agencies and other organizations become competent in working with older adults by designating individuals to participate in one or more training.

Description: Part of the current four-year Countywide Plan for Older Adults, an "Embracing Aging" training program is envisioned for County and community workers covering a range of topics about how to best serve older adults. The Council for Age Friendly Communities is working on this already.

Promising Programs and Policies

Following are some of the current promising programs and policies related to older adults and their housing needs, in various stages of implementation in Alameda County.

Prevent Homelessness and Displacement
- Rapid Response Teams Serving Older Adults at Risk of Homelessness and Displacement
  - Daybreak has a State grant to deliver rapid response case management services for persons experiencing homelessness exiting from St. Rose hospital. The work includes identifying high quality room and board operators as well as benefits advocacy. Daybreak is also funded to serve seniors who are crime victims. Daybreak's work is specifically related to SB 1152 (coordination of hospital discharges) and not the general rapid response program recommended here.
  - The BHCS GART Program works with older adults with serious mental illness (SMI).
  - East Bay Innovations is working to place older adults in Board and Care residential care facilities in Newark.
  - St. Mary's Center and BACS have older adult specific programs.
  - Anthem and the Alliance are preparing to launch Health Homes, which will include contracts for care coordination, though the low level of reimbursement will probably only be helpful to supplement the funding FQHCs and AHS receive for their work with existing clients.
- Tenant and Homeowner Protection Ordinances in Unincorporated Areas
  - Berkeley and Oakland have adopted just cause eviction ordinances
  - Oregon has adopted a property tax deferral program for certain seniors and people with disabilities

Outreach to Unsheltered People
- Rapid Response Teams Serving Older Adults Experiencing Homelessness

Provide Health and Supportive Services
- Meet the Basic Human Needs of Unhoused Vulnerable Older Adults
  - There are opportunities to bring an older adult focus to the work (e.g., by the City of Fremont)
  - There are basic needs efforts scattered around the County (e.g., St. Mary's drop-in center, San Leandro shower program, mobile showers, low-threshold shelters, etc.)
- Medical Respite for Older Adults
  - Older adult subject matter experts could participate in design of a variety of projects underway to increase access to medical respite, including the Alameda Point Collaborative, Lifelong's plan to master lease a property in West Oakland as a medical respite facility, and a proposal from Telecare.

- SB 1152 requires more responsible hospital discharge of persons experiencing homelessness. Currently, there is a shortage of medical respite or board and care or skilled nursing facilities that will accept people with cognitive impairment of mixed etiology.
- There is advocacy for State legislation to permit a pilot program to permit use of the State Assisted Living Waiver for people facing homelessness.

Provide Shelter and Housing
- Shelters That Better Serve Older Adults
  - Alameda County Health Care for the Homeless has a program to train shelter operators.
  - Hayward is conducting planning for new shelters; could link with efforts to create more low-barrier shelters and shelters better equipped to meet the health needs of an aging population.
  - In the City of Fremont, a home health agency comes into shelters to help with personal care, and health care providers are supplied by an FQHC.
  - San Francisco has designated shelter beds that are paired with nurses and other care. Episcopal Community Services may have a useful model.
- Provide Support to Intermediary Organization(s) that Acquire, Develop, and Manage Properties that House Older Adults
  - Alameda County Behavioral Health Care Services has a proposal to establish a Land Trust.
  - HCSA's Housing Solutions for Health is moving forward with its Independent Living Association. Daybreak is planning to partner with HCSA on strategic partnerships with independent living homes facilities.
  - Programs providing subsidies for Board and Care facilities serving people with SMI.
- Ongoing Housing Subsidies to Support Older Adults
  - Ballot initiative to establish a fractional sales tax to fund a rental subsidy pool.
- Alternative Housing, Including Family Reunification, Roommate Matching, Tiny Houses, and ADUs to Support Older Adults
  - The County Department of Housing and Community Development has a program to support ADU development.
  - The City of Fremont has a roommate matching program.
  - Roommate matching is offered by Covia.
  - Projects to enrich supportive housing.
- Proposed strategy: "Target existing funding for permanent affordable housing, and develop new funding, to older adults who are experiencing homelessness or at high risk of homelessness"
  - There are set-asides for older adult units in the State No Place Like Home program and in Measure A1. Satellite Affordable Housing Associates has been setting aside 20% of units via unit turnover to homeless seniors 62 and older but have been disappointed with services provided to date and put the pause on

expanding the program for now. Tighter older adult service partnerships with their buildings could incentivize broadening the program.

Create a Coordinated System
- <u>Training for County Staff and Housing Services Providers on How to Work Effectively with Older Adults</u>
    - o Alameda County Care Connect, housed within the Health Care Services Agency, has a care communities program that will provide funding for expert assistance in how to best to build out facilities and deliver services. The agency is also establishing a vendor pool for housing and homelessness services. These two initiatives represent opportunities for individuals and organizations with older adult subject matter expertise to obtain contracts to deliver services.
    - o AC3 is carrying out a six-month intensive effort which includes paying people to engage and providing "elbow support": the intensive structure needed to reinforce new habits and establish data systems that support the new practice.

Housing Workgroup Participants

- Randy Morris, Alameda County Social Services Agency
- Alicia Morales, Alameda County Social Services Agency
- Joel Ginsberg, Alameda County Social Services Agency
- Linda Gardner, Alameda County Housing and Community Development Department
- Larry Brooks, Alameda County Housing and Community Development Department
- Eileen Ng, Alameda County Health Care Service Agency
- Andrea Dodge, Alameda County Health Care Services Agency
- Robert Ratner, Alameda County Behavioral Health, Housing Services Office
- Margaretta Lin, Dellums Institute, Our Beloved Community Action Network
- Wendy Peterson, Senior Services Coalition of Alameda County
- Kevin Prindiville, Justice in Aging
- Claire Ramsey, Justice in Aging
- Jim Treggiari, Legal Assistance for Seniors
- Linda Trowbridge, Center for Elders Independence
- Donna Griggs-Murphy, Humangood
- Katherine Kelly, On Lok
- Michael Galvan, Community Resources for Independent Living (CRIL)
- Greg Garrett, Alameda Health Consortium

Age Friendly Council Member Organizations

- Alameda Alliance for Health
- Alameda County Advisory Commission on Aging
- Alameda County Board of Supervisors
- Alameda County Community Development Agency
- Alameda County District Attorney's Office
- Alameda County Health Care Services Agency
- Alameda County Social Services Agency
- Alameda County Transportation Commission
- Alameda Health Consortium
- Alameda Health System
- Alzheimer's Association
- Alzheimer's Services of the East Bay
- Center for Elders' Independence
- City of Berkeley
- City of Fremont
- City of Hayward
- City of Oakland
- Community Resources for Independent Living
- Justice in Aging
- Legal Assistance for Seniors
- LIFE ElderCare
- On Lok
- Senior Services Coalition of Alameda County
- St. Mary's Center
- United Seniors of Oakland and Alameda County
- United States House of Representatives

Complete List of Recommendations Considered

#	Category	Intervention Description
2	Prevention	Provide full scope preventative legal and supportive services ("whatever it takes") for older adults at risk of losing housing
4	Prevention	Flexible housing assistance
5	Prevention	Support regulations that increase housing options and reduce displacement
15	Prevention	Home Safe pilot program to intervene to stop homeless among APS-connected seniors and dependent adults
3	Prevention	Improve enforcement of health and safety laws
26	Prevention	Require landlords to accept payments from third party payors to ensure payment processing before landlords recover possession
27	Prevention	Advocate for the Superior Court to create housing/elder courts
28	Prevention	Support the enactment of proactive rental inspection (PRI) policies at the level of local government
29	Prevention	Ensure that the County Tax Collector Office protocols adequately protect older adult homeowners in tax default
6	Housing	Increase capacity of housing-related service providers to serve older adults
7	Housing	Create long term housing subsidy pool
16	Housing	Promote alternative housing options, such as family reunification (broadly defined) and shared housing
17	Housing	Develop collaborative models and identify funding to bring needed supportive services to housed older adults
18	Housing	Prioritize the creation of affordable units for extremely low income seniors
30	Housing	Develop connections between case managers and housing services to facilitate continuity of care and keep older adults in long-term housing
31	Housing	Create an equity loan fund
32	Housing	Prioritize inclusionary zoning policies and projects; increase the requirement for affordable units in all new development; require higher percentages for off-site affordable construction
33	Housing	Leverage Medi-Cal to pay for housing related services
45	Homelessness	Maximize older adults' access to permanent supportive housing through Home Stretch
8	Homelessness	Improve training for housing and homeless service providers
9	Homelessness	Reconfigure current shelters to better serve older adults
10	Homelessness	Develop new housing and associated services for older adults

#	Category	Intervention Description
11	Homelessness	Create senior-only supportive encampments
19	Homelessness	Better coordinate advocacy efforts
34	Homelessness	Expand food and nutrition services
35	Homelessness	Expand the representative payee program to help with financial issues and reduce abuse
36	Homelessness	Expand transportation services to serve seniors who are homeless
37	Homelessness	Develop a plan to reduce improper usage of emergency departments
38	Homelessness	Offer mobile hygiene facilities
12	Cross-Cutting	Collect data about housing insecurity
13	Cross-Cutting	Provide spectrum of case management / care coordination
14	Cross-Cutting	Increase resources to reach out to housed isolated seniors
22	Cross-Cutting	Increase access and utilization of public benefits and supportive services
46	Cross-Cutting	Consider implementation of recommended interventions via a pilot that focuses geographically, perhaps in the County unincorporated
20	Cross-Cutting	Improve older adults information and assistance resources, including creating a resource referral tool and targeted community outreach and communications
21	Cross-Cutting	Increase funding for programs that provide repairs and make disability adaptations
23	Cross-Cutting	Infuse an older adult lens throughout systems, providing training on working effectively with older adults across service areas
24	Cross-Cutting	Engage the medical establishment to address homelessness
25	Cross-Cutting	Increase oversight of SROs, SNFs, unlicensed board and cares, and other group living facilities; should be vetted for negligence and abuse
39	Cross-Cutting	Provide on-call access to geriatric and dementia expertise for staff and volunteers serving the homeless
40	Cross-Cutting	Prioritize for funding organizations with a track record of success working with older adults
41	Cross-Cutting	Explore the idea of funding health care provider prescriptions for housing
42	Cross-Cutting	Work with hospitals and long-term care facilities to ensure older adults are not discharged into homelessness
43	Cross-Cutting	Increase funding for long-term caregiving, including additional training and support for IHSS workers
44	Cross-Cutting	Guarantee minimum income