



County of Orange, California

Recovery Plan

State and Local Fiscal Recovery Funds

2022 Report



County of Orange, California

2022 Recovery Plan

Table of Contents

General Overview2

- Executive Summary..... 2
- Uses of Funds 3
- Promoting Equitable Outcomes..... 7
- Community Engagement 13
- Labor Practices 14
- Use of Evidence..... 14
- Performance Report 15

Project Inventory18

- Project [003]: Workers' Compensation 18
- Project [004]: Paid Sick and/or Family Leave 18
- Project [005]: Revenue Replacement Provision of Government Services 19



GENERAL OVERVIEW

Executive Summary

The County of Orange (County) is dedicated to long-term strategic financial planning to ensure its ability to respond to economic changes and unanticipated events in a way that allows the County to preserve the range and quality of services provided to the community.

Coronavirus State and Local Fiscal Recovery Funds (SLFRF) of \$617 million was allocated and distributed in two equal tranches to the County. SLFRF was used to continue the County's response to the pandemic and strategically planned to place the County in a better position with regard to future public health emergencies. Planned allocation of SLFRF will be revisited during the County's 2022 Strategic Financial Plan (SFP) process and funds reallocated as priorities change.

During the reporting period, the County allocated a portion of SLFRF to revenue replacement to stabilize the County's budget and continue providing high quality services, sustaining countywide operations and initiatives, strengthening support for vital public services, restoring staff resources impacted by the pandemic, and addressing public health and other economic challenges. Furthermore, the County allocated SLFRF to several key efforts:

- **Emergency Medical Services Operating Facility**
The County is establishing a new Orange County Emergency Medical Services Operating Facility on County-owned land in the city of Irvine that will co-locate emergency medical services with disaster management services and the public health laboratory. This model will support continued response efforts, and, most importantly, pandemic preparedness to effectively manage future public health emergencies.
- **Be Well Irvine Campus**
Currently in the planning phase, this new facility is a second behavioral health campus on County-owned land in the city of Irvine and will provide a myriad of mental health services for the County's adults, children and families. The campus will also serve as an integrated support center by providing linkages with related community and social support services.
- **Housing**
The County is assisting with housing stability by providing landlord incentives of approximately \$5,000 per household for 500 units and match commitments for developing 200 units.



- **Juvenile Corrections Campus**

To improve existing space and relocate the Youth Guidance Center, the County will construct a new Youth Transition Center on the Juvenile Corrections Campus for programming, education services, health and mental health services and housing for juvenile offenders and transitional aged youth.

- **Homelessness, including a Coordinated Case Management**

This program aims to provide support services that will address the needs of individuals experiencing or at risk of homelessness, including transitional and permanent supportive housing as well as placement services for youths experiencing challenges on the path to a successful adulthood. Additionally, the County has identified a Coordinated Case Management program that will perform various outreach and engagement services, provide referrals or resources as needed to encourage self-sufficiency, and provide overall support to an individual.

As of June 30, 2022, approximately \$89.6 million in SLFRF was spent on County departments' general COVID-19 public health response and the following purposes described further in the *Uses of Funds* section of this report: public protection payroll costs; Veterans Cemetery; technology solutions for seniors; position restoration; emergency food and related storage equipment; anti-hate efforts; meal gap programming; economic support to arts-related small businesses and non-profits; paid sick and/or family and medical leave; and workers' compensation.

The County remains committed to continue promoting the safety, welfare, and health of all constituents, including its employees and families.

Uses of Funds

Under the Revenue Replacement category, County provision of government services and departments' immediate and future general COVID-19 public health response includes, but is not limited to, expenditures such as payroll costs for staff supporting the County's COVID-19 public health response; testing and tracing; personal protective equipment, hospital gowns, sanitation and other supplies to comply with COVID-19 measures; disinfection and sanitation of public areas and offices; maintaining and improving telework capabilities; public health facility costs; nutrition gap program extension; administrative support for the Affordable Housing, HomeKey and Emergency Housing Voucher programs; emergency shelter; Employee Health software system; Jail Pharmacy reconfiguration for COVID-19 operations; accounting staff time for preparing various ARPA claims and reports; and COVID-19 campaigns, broadcasting services and translation services.

In addition, the Revenue Replacement category includes the following uses of funds:

- Public Protection payroll – salaries and employee benefit costs for OC Sheriff Department and Public Defender Department.



- Veterans Cemetery – site development of Veterans portion of Mountain Park Cemetery, in Anaheim, California. The primary goal of this effort is to develop a “turnkey” State Veterans Cemetery pad, including a refined site access and utility service connections, all designed to Cal Vet standards.
- Bridge Digital Divide-Tech Solutions for Seniors – implementation of technology solutions for older adults impacted by COVID-19 to bridge the digital divide by ensuring that older adults have access to iPads, training, education and technology support which will assist in combating isolation and help them stay connected to family and friends, participate in virtual programs offered by senior centers and participate in telehealth offerings by their doctors or other medical providers. This effort will include the purchase of 2,200 iPads with data plans, subscription for training and online classes and technology support.
- Supportive Services/Landlord Incentives-Emergency Housing Vouchers (EHV) – implementation of the EHV program to assist individuals and families securing permanent housing. The funding will also assist the County in expediting the EHV leasing process by providing support to the participant through the voucher issuance process, working to identify available rental units and providing transportation assistance and financial resources to secure a rental unit.
- Restore Voluntary Incentive Program Deleted Positions – to address the budget shortfall due to the COVID-19 related revenue losses, the Board of Supervisors approved the Voluntary Incentive Program in July 2020, resulting in the retirement or resignation of 617 employees and the deletion of 212 vacant positions. In September 2021, the County restored 115 of these deleted positions to preserve continued quality of services provided to the community.
- A new Emergency Medical Services Operating Facility for preparing the County for future health emergencies (see page 2 of this report for more details).
- A second wellness campus to expand mental health and substance use services to treat both adults and youth (see page 2 of this report for more details).
- Remote Workspace Delivery – Virtual Desktop Infrastructure and Virtual Private Network Solution Expansion – two OC Information Technology projects providing a safe and secure workspace for all County employees, including a reliable, secure and maintainable remote work solution.
- OC Hunger Alliance – funding to Second Harvest Food Bank of Orange County and the Community Action Partnership of Orange County/Orange County food bank for the purchase of emergency food to address immediate needs related to COVID -19 and purchase of food and water storage equipment to aid in event of a future disaster or emergency.
- OC Human Relations Council – program services for enhancing and expanding anti-hate prevention in Orange County.
- The Illumination Foundation – temporary isolation shelter services will allow for non-congregate shelter to be provided for isolation and/or quarantine of individuals and families that are COVID-19 positive, symptomatic or exposed and are experiencing homelessness in Orange County.



- A new Youth Transition Center to address the transitional-aged youth population released from juvenile correctional facilities (see page 3 of this report for more details).
- Landlord incentives and match commitments for housing development (see page 2 of this report for more details)
- Homelessness (see page 3 of this report for more details).
- District Priorities and Projects – programs and projects that serve the community such as economic support for small businesses, childcare centers and non-profit organizations; housing assistance to aid residents experiencing or at risk of homelessness; programs to provide behavioral healthcare; workforce development programs; programs that support non-profit organizations aiding veterans; and grant monies to local governments, including school districts.
- Future Years COVID-19 Response and Budgets – to address continued and future response to COVID-19 and continue to facilitate the County’s recovery to pre-pandemic conditions.

Previously identified projects **[001] - Meal Gap Programming** and **[002] - Economic Support to Arts-Related Small Businesses and Non-Profits** have been shifted to the Revenue Replacement category since the last recovery plan, as allowable under the Final Rule of the SLFRF. Meal gap programming provides meal programs for seniors, persons with disabilities and other individuals experiencing food insecurity due to the COVID-19 pandemic and economic support to arts-related small businesses and non-profits allocates grants designed to foster economic recovery.

Finally, SLFRF was expended on paid workers’ sick and family and medical leave to enable compliance with COVID-19 public health precautions as well as workers’ compensation costs to accelerate the process of returning employees to work.

Other federal recovery funds received by the County are for the Emergency Rental Assistance (ERA) and the Emergency Housing Vouchers (EHV) programs. These funds are especially important for post-pandemic recovery and the County focused on quickly reviewing ERA program applications to confirm eligibility and provide households with financial assistance to ensure housing stability amidst the COVID-19 pandemic and support adherence to public health guidance. For households that experienced a financial hardship related to COVID-19, the ERA program provided financial assistance for rental arrears and/or overdue utility bills to promote economic recovery and household stability. Additionally, the ERA program provided financial assistance for small landlords and independent property owners who had not received their monthly rental payments from tenants experiencing financial hardships due to COVID-19. The County operated the ERA Round 1 program from February 2021 to December 2021 and has been coordinating and collaborating with the State of California’s COVID-19 Rent Relief program. The Orange County Board of Supervisors adopted a resolution to authorize the State of California Department of Housing and Community Development to administer the County’s federal allocation of ERA Round 2 funding in accordance with Assembly Bill 832 (Chapter 27,



Statutes of 2021) that was enacted into law on June 29, 2021. In upstreaming the ERA Round 2 funding, the State would continue to support Orange County residents through operating California’s COVID-19 Rent Relief Program.

The ERA program assisted communities disproportionately impacted by COVID-19. The program resulted in approximately 90% of ERA financial assistance to households with an Orange County Area Median Income (AMI) of 50% or less and/or households with one or more individuals unemployed as of the date of the application for assistance and not employed for the 90-day period proceeding such date. The following chart provides income levels by household persons for the Orange County Area.

Number of Persons in Household:		1	2	3	4	5	6	7	8
Orange County Area Median Income: \$103,000	Extremely Low	26950	30800	34650	38450	41550	44650	47700	50800
	Very Low Income	44850	51250	57650	64050	69200	74300	79450	84550
	Low Income	71750	82000	92250	102450	110650	118850	127050	135250
	Median Income	72100	82400	92700	103000	111250	119500	127700	135950
	Moderate Income	86500	98900	111250	123600	133500	143400	153250	163150

The County’s ERA Program ended December 31, 2021 and supported 4,734 households for a total of \$34.5 million in financial assistance provided to tenant households, which represents approximately 50% of the County’s direct ERA allocation from the U.S. Treasury. At the conclusion of the program after all eligible applicants were provided financial assistance, there was a balance of approximately \$19.2 million related to administrative costs. The County is working with the U.S. Treasury to upstream the remaining funds to the State for continued administration of the COVID-19 Rent Relief program. Combined with the previously upstreamed ERA Round 2 funding, the state’s program operates at the scale needed to efficiently utilize funding to support landlords and tenants in Orange County before the eviction moratorium and tenant protections end.

In addition, the issuance of EHV will support 557 households in securing long-term stable housing that would provide shelter and space to better follow the public health guidance related to COVID-19. EHV funding and related supportive services have expedited the housing search process; during the reporting period EHV funding assisted 224 households in transitioning from the streets, congregate shelter or overcrowded housing situations, thus reducing the risk of exposure to COVID-19. The EHV provides an ongoing rental subsidy for households unable to afford market rate housing and will ensure that their income can be utilized for other essential needs. The EHV has alleviated financial hardship for many households that were formerly experiencing homelessness or at risk of homelessness. These EHV have also provided landlords and property owners with a steady revenue for rental units that they may not have received otherwise.

Overall, the EHV program provides an opportunity for housing stability for the most vulnerable people with the greatest service needs through the provision of financial assistance. Individuals and families that are experiencing homelessness or at risk of

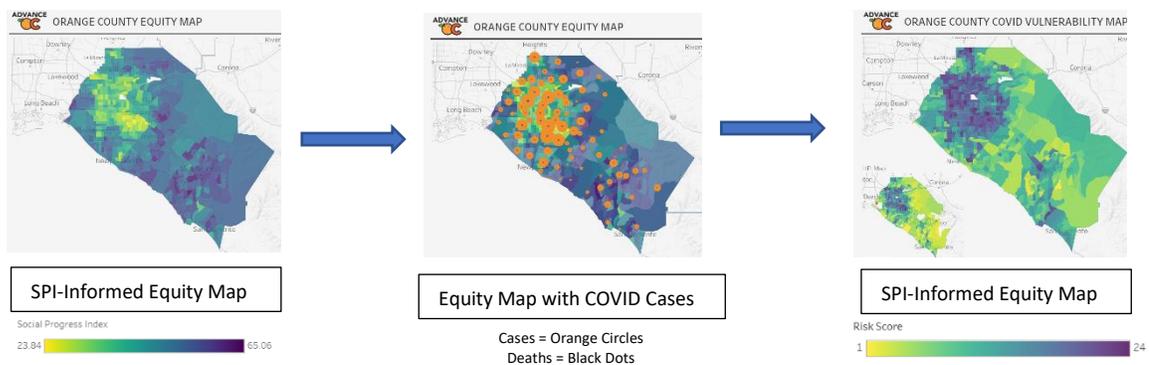


homelessness have been the most challenged in following and adhering to COVID-19 public health guidance. The lack of housing and the housing instability has limited these households' ability to follow safer at home guidelines, practice recommended precautions, quarantine and/or isolate as appropriate when sick or symptomatic with COVID-19. The EHV and related supportive services will better equip these individuals and families with following COVID-19 guidance and adopt other health and wellness practices to improve their overall wellbeing.

Promoting Equitable Outcomes

With funding from the Centers for Disease Control and Prevention (CDC) National Initiative to Address COVID-19 Health Disparities Among Population at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities Grant (Grant) in late June 2021, the Orange County Health Care Agency (HCA) continues its collaboration with Advance OC in ensuring use of the OC Equity Map (OCEM). Advance OC is a nonprofit organization dedicated to using innovation and strategic philanthropy to address inequities in Orange County communities. Since the last reporting period, HCA's main goal is to increase the use of the OCEM and data available for community planning, program implementation, and decision-making of focus areas and priorities pertinent to the community.

The OCEM provides detailed insight into which Orange County neighborhoods and communities experience health and wellness disparity. It comprises composite scores for each neighborhood called the Social Progress Index (SPI)¹, a worldwide metric which captures population outcome data in three broad dimensions: Basic Human Needs, Foundations of Well-being, and Opportunity. The index relies on over 50 social indicators that reflect a wide range of environment variables contributing to a neighborhood's social progress, such as supermarket access, broadband internet subscribers, eviction rates, diabetes prevalence and voter turnout.



¹ The **Social Progress Index (SPI)** is an innovative way to define the success of our community. This SPI measures the health and wellness of our community using 50+ social indicators across 12 different components. Some of the components the County is measuring are elements that have not been traditionally captured. For example, Health Care Agency is cataloging environmental data, public safety data, measures of inclusiveness, among others. <https://www.advanceoc.com/making-change#social-index>



The COVID-19 pandemic has revealed communities in Orange County that are more vulnerable to infection, hospitalization, and mortality due to pre-existing disparities. These circumstances have compounded during the pandemic among racial and ethnic minority groups as well as other underserved populations. To address these disparities and achieve an equitable community response to COVID-19, HCA has been using and will continue to use several approaches to ensure equity in communities experiencing the greatest COVID-19 impacts:

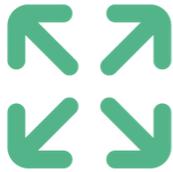
- Data to support distribution and allocation of COVID-19 responses and resources
- Access to COVID-19 support services
- Community outreach and communication and partnering with community-based organizations (CBOs)
- Strengthen the County's foundation for reducing disparities and building equity

The OCEM platform continues to inform HCA COVID-19 responses, including testing, vaccine allocation and distribution, and other mitigation strategies. HCA has thus been able to identify disproportionately impacted communities at the zip code and census tract level and, in turn, promote COVID-19 responses at the neighborhood level, as can be seen in the mobile vaccination clinics and targeted outreach efforts throughout the county. Using data at the neighborhood level contributed to HCA's increased vaccination rates in high impacted communities and decreased positivity rates of higher risk communities, including those in the equity zip codes areas in OC. Using the map, the County enhanced its knowledge of an individual and the community so that it can serve both, and research an individual's neighborhood to better understand challenges in that community.

The OCEM platform is available to anyone at no cost to measure, track and map inequities in the community with neighborhood precision, including identifying the root causes of inequities, understanding socioeconomic determinants, and informing strategies to advance the health and wellbeing of county residents. It also provides a roadmap for private and public partnerships to fund initiatives that seek collaborative approaches to addressing complex social circumstances at the root of inequities in health and wellbeing. It is a tool that brings HCA one step closer to achieving its mission: in partnership with the community, deliver sustainable and responsive services that promote population health and equity.

In addition, in late June 2021, HCA received funding from the Centers for Disease Control and Prevention (CDC) National Initiative to Address COVID-19 Health Disparities Among Population at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities Grant (Grant). With this funding, HCA increased its capacity and infrastructure by expanding the Office of Population Health and Equity (OPHE) and subsequently launched the Equity in Orange County (EiOC) Initiative. Over the course of several EiOC Taskforce convenings, community partners and members voted on Housing is Health, Food as Medicine, and Health and Healing as the three priority areas to advance health equity and address social determinants of health. The

EiOC Initiative strives for strategic partnership, planning, and implementation, and support of prioritized equity and population health efforts, particularly in collaboration with communities most impacted by health inequities resulting from COVID-19 health-related disparities. Below are four strategies of the EiOC Initiative:



EXPAND

Expand existing and/or develop new mitigation and prevention resources



DATA

Increase or improve data collection, reporting, and infrastructure



CAPACITY & INFRASTRUCTURE

Build, leverage, and expand capacity and infrastructure of local health departments



MOBILIZE

Mobilize partners and collaborators to advance health equity and address social determinants of health

Through the EiOC Initiative and various funding opportunities made available to the community to help build collective capacity for the current pandemic and any future ones and expand existing prevention resources, OPHE hopes to achieve the following four goals:



The EiOC initiative will move from the current planning phase to collective action in summer 2022.

In 2020, Orange County, in partnership with several mutual aid agencies, launched Operation Independence. This partnership fostered the establishment of large regional vaccination point-of-dispensing sites (PODs) to efficiently administer vaccines and reach the County’s most vulnerable populations. While vaccination efforts remain ongoing as of June 30, 2022, vaccine efforts have largely shifted to local pharmacies, health plans and medical providers. Approximately 77% of the eligible population of Orange County has



been fully vaccinated, with over 2.3 million residents fully vaccinated and nearly 1.3 million residents with a booster dose. County-wide vaccination activities also continue to occur at recurring POD clinics, small travel teams for homebound individuals, and pop-up clinics/events to strategically reach equity identified areas and vulnerable populations. Multiple locations are staffed and advertised daily. Priority is given to locations that are in identified equity zip codes, areas with high test COVID-19 positivity rate, areas with low vaccination rates.

The County continues to make available an online tool which allows OC residents to request a free ride to locations where they can be vaccinated. Scheduling and dispatching of rides are accomplished through a website tool and is also available through a widely published County call center number.

The County has a robust outreach and engagement program, including marketing and communication, to ensure all residents have access to vaccinations. The outreach is executed through collaboration with multiple CBOs focused on equity strategies. The County continuously coordinates these efforts with CBOs representative and aligned with the mission of serving specific demographics.

Finally, the County has contracted with third party providers to administer vaccines at various pop-up and mobile clinics overseen and arranged by the County. The County will serve as the Payor of Last Resort and expenses are supported with various funding sources.

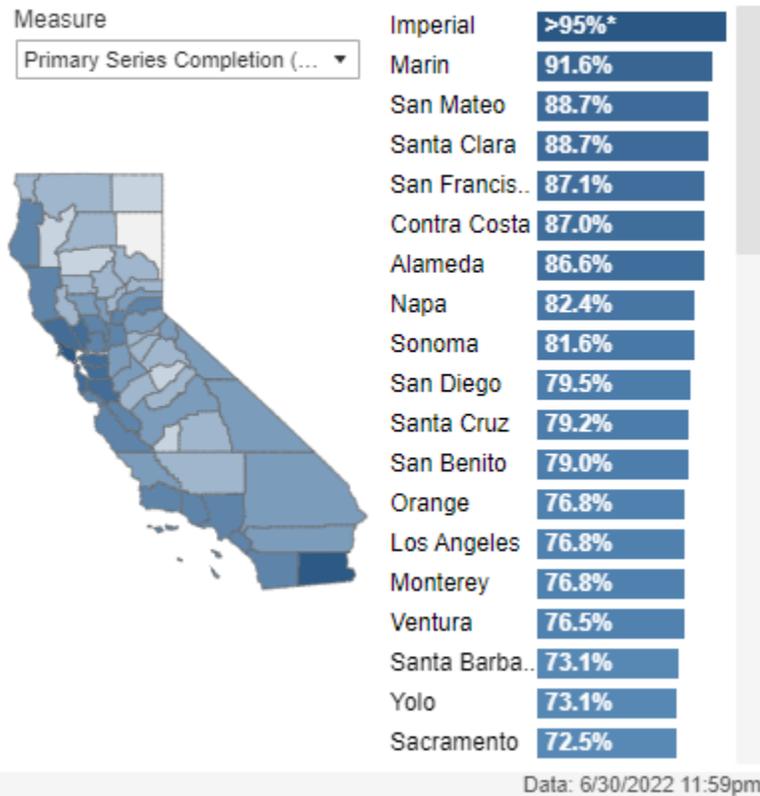
[Vaccine Dashboard \(arcgis.com\)](https://arcgis.com)





PRIMARY Series Completion (Total Population)

Vaccinated Persons by County of Residence



<https://covid19.ca.gov/vaccination-progress-data/>

In addition to the aforementioned efforts to promote equitable outcomes, the ERA program focused on reaching universal levels of services and ensuring tenants with rental arrears and/or overdue utility bills were provided financial assistance to support economic recovery and housing stability.

The County’s EHV program serves individuals and families experiencing homelessness who are prioritized through the Coordinated Entry System (CES). The CES prioritization schema includes length of homelessness, vulnerability, and service needs. Through the CES, the County works with access points and homeless service providers to identify eligible households who have not been provided a housing resource that meets their needs to rapidly connect them with the EHV program or another appropriate housing intervention. Additionally, the CES serves a number of subpopulations to ensure equitable access, including individuals, families, veterans, transitional aged youth, survivors of domestic violence, reentry subpopulation, and current homeless service program participants.



The flexibility and waivers provided for the EHV program allowed the County to target resources to historically underserved populations, especially the criminal justice-involved reentry population and people exiting institutional settings. These subpopulations are more likely to be medically vulnerable, extremely low income and Black, Indigenous, and people of color. EHV resources allocated and dedicated to these subpopulations support the County's efforts to promote equitable outcomes, address racial inequities and fill gaps in the system of care.

The Orange County Housing Authority (OCHA) issued a notice to all households on the housing choice voucher waiting list to provide awareness on the EHV program and include information on access, if eligible. To support outreach efforts, the County worked with 2-1-1 Orange County to ensure the latest information is shared with households seeking housing resources and/or are unstably housed and would benefit from the program. Additionally, the County, acting as the Collaborative Applicant for the Orange County Continuum of Care, has been including regular updates and information regarding the EHV program and related available supportive services. Information has been provided through written communication via listservs, an application that distributes messages to subscribers on an electronic mailing list, as well as presentations at regularly scheduled meetings and subsequent information sessions.

The OCHA has implemented all appropriate waivers and flexibilities related to the EHV program to ensure that administrative requirements do not impact access across groups. People accessing the EHV program are racially and ethnically diverse. Of the people who obtained permanent and stable housing through the EHV program, 49% are Black, Indigenous and people of color, 51% are White, Non-Hispanic/Non-Latin(a)(o)(x).

Furthermore, California's Governor released the Master Plan for Aging (MPA), which includes five goals to prepare California for a projected increase in the number of residents aged 60 years and older. An intergovernmental team consisting of Orange County Community Resources, Social Services Agency, HCA, and County Executive Office are engaging in a joint effort to improve the quality-of-service delivery to this population. This effort will begin with an engagement strategy focused on hearing from the County's aging population regarding services most important to them, and the best form of access. The MPA, coupled with the overwhelming impact of the pandemic on this vulnerable population, creates a unique opportunity to design an equitable and inclusive countywide plan informed by county residents. In addition, goals of the MPA were designed to be responsive to shifting social and economic realities including developing strategies that are responsive to underserved demographics and disproportionate impacts that many have experienced.

Finally, the County conducted and released the results of the 2022 Point-in-Time Count. When compared to the 2019 Point-in-Time Count, data suggests an increase in the number of homeless residents being sheltered, across all categories, including veterans, transitional aged youth, and seniors. The count collected participant-level information including sheltered and unsheltered, household compositions, subpopulations, and



disabling conditions information, such as substance abuse issues, serious mental health issues and physical disability, amongst other demographic factors. The information collected through this process is self-reported and allows for a better understanding of the needs and challenges of people experiencing homelessness.

Community Engagement

The County held a public workshop on September 30, 2021 to educate the public on the County's planning processes and use of ARPA funds. As part of the County's 2021 SFP and FY 2022-23 budget development processes, the County opened the public comment periods on its website from September 27, 2021 to October 22, 2021 and February 1, 2022 through March 11, 2022, respectively, for input on use of ARPA funds. As a result of feedback submitted during these periods and shared during the public comments segment of the Board of Supervisors meeting, ARPA funding was allocated to housing and homelessness as highlighted in the *Executive Summary* section. The County is assisting with housing stability by providing landlord incentives for 500 units and match commitments for developing 200 units

The County recognizes that groups in which English is not the primary language often are underserved and not adequately outreached to receive the available resources. As such, the County worked with its Director of Population Health and Equity and CBOs, including those in underserved communities and those that provide specialized services in various languages, for various outreach efforts.

In collaboration with CBOs, the County conducted targeted outreach in underserved communities and provided ERA communication and materials in all threshold languages (English, Spanish, Vietnamese, Farsi, Korean and simplified Chinese). Furthermore, the County partnered with 2-1-1 Orange County to operate an information and referral line to support interested applicants in completing the ERA application in the language of their choice over the phone and/or through an online portal.

Additionally, the County issued a press release and participated in several interviews to provide information on the ERA program. ERA program materials were distributed widely through various listservs, including all city managers in Orange County, California. The County also worked with CBOs to provide ERA program information to renter households and landlords. 2-1-1 Orange County provided ERA program information to organizations listed within its helpline database as part of the outreach effort.

The ERA program was designed in partnership with three-contracted providers who are leaders in the provision of homelessness prevention services. The County developed a simple ERA application, collecting only needed information to pre-screen and allow for quick follow-up with the applicant, when needed. Providers worked with the applicant over email, telephone or in-person appointments which were conducted in the applicant's preferred language to further review eligibility requirements and related documentation.



The County aimed to collect only the minimum documentation requirements that would support proper fiscal management practices and confirm there was no duplication of assistance.

The EHV program was designed in coordination and collaboration with the Orange County Continuum of Care, its boards and interested stakeholders, including the Continuum of Care Lived Experience Advisory Committee. The EHV program receives referrals of eligible individuals and families from CES. The CES is comprised of over 40 access points and homeless service providers that regularly engage and serve individuals and families experiencing homelessness or those at-risk of homelessness. The County, including the OCHA, held numerous information sessions and public meetings regarding the EHV program implementation providing an opportunity for questions and feedback around the intended program. The County has worked with 2-1-1 Orange County to ensure they have up to date information that can be shared with households seeking housing resources and/or are unstably housed and would benefit from the EHV program.

Labor Practices

This section is not applicable for the County; however, the County complies with all Federal and State wage requirements and is committed to equal employment opportunity in the workplace.

Use of Evidence

As of June 30, 2022, there are no SLFRF funds being used for evidence-based interventions; however, the County consistently measures outcomes for programs and services. Per a Board Directive issued on May 23, 2017, performance metrics are required in all Agenda Staff Reports pertaining to service contracts. Beginning with the July 11, 2017 Board date, all service contract renewals will include performance metrics. As such, for new service contracts, if there are performance requirements tied to the funding source (i.e., federal or state grants), performance will be measured according to those metrics.

The County developed and implemented the EHV program using a racial equity lens and a data-informed approach. Key program milestones, including referrals, voucher issuance and housing placement, are monitored by race, ethnicity, gender age group, and disability status on a weekly basis. Regular and ongoing oversight will allow the County to quickly respond and modify strategies or address barriers to accessing services.



CASE STUDY: Mr. M is a 62-year-old Black male living with tri-morbidity who has experienced multiple episodes of homelessness in Orange County since 2011. Mr. M receives Social Security Income and was unable to afford permanent, stable housing without ongoing rental assistance. As a high-cost healthcare utilizer involved in the criminal justice system, irregular service engagement and negative background checks previously prevented Mr. M from obtaining permanent housing through multiple prior housing interventions. Due to the EHV program's background check requirements and the partnership with the street outreach team, housing authority, housing service provider for housing and stabilization services and housing location team providing landlord engagement services, Mr. M successfully leased an apartment through the EHV program in April 2022.

Performance Report

The County received a total of 13,022 ERA applications and of which 32.7% (4,259) were processed, including determining eligibility and issuing payment. The remaining 8,763 applications were determined ineligible or participants were no longer interested in assistance. A total of \$34.5 million in ERA financial assistance for rental arrears and overdue utility bills and home energy bills were paid to Orange County households.

The County, acting as the Collaborative Applicant for the Orange County Continuum of Care, worked with the four Public Housing Authorities (PHA) in Orange County to establish Memorandums of Understanding (MOUs) for the EHV program. All four MOUs were signed and executed prior to the July 31, 2021, deadline provided by the U.S. Department of Housing and Urban Development (HUD). The MOUs detail EHV program milestones to be met by the PHA and the CES. These milestones are detailed below:

- CES will identify 50% of referrals within 7 weeks of the effective date of the MOU.
- CES will identify 100% of referrals within 14 weeks of the effective date of the MOU.
- CES will identify replacement referrals within 14 days for any returned matches.
- PHA will complete EHV processing within 45 days of initial contact with the participant as referred by CES.
- PHA will return ineligible referrals to CES within 3 business days of determining ineligibility.

Outcomes:

- CES identified 55% of referrals within 7 weeks of the effective date of the MOU.
- CES identified 61% of referrals within 14 weeks of the effective date of the MOU.
- CES identified replacement referrals within 7 days for any returned matches.
- PHA completed EHV processing within an average of 58 days from referral by CES.
- PHA returned ineligible referrals to CES within 2 business days of determining ineligibility.



CES exceeded the milestone to provide 50% of referrals within 7 weeks of the effective date of the MOU. During the 7th week of referrals, OCHA paused referrals due to staffing issues and delays in processing applications. OCHA has resumed accepting referrals and CES has referred 625 (112%) households to the EHV program which includes replacement referrals for people who were determined ineligible, inactive or declined proceeding with the application process.

CES identifies replacement referrals. on a weekly basis to expedite the referral process and provide rapid access to housing resources.

OCHA's flexible housing application process has resulted in delays in processing applications. On average, OCHA completed EHV processing within 58 days from referral by CES. The average days processing an application for White, Non-Hispanic/Non-Latin(a)(o)(x) households and Black, Indigenous, and people of color are similar (58 and 59 days, respectively).

OCHA quickly returns ineligible referrals to CES in order to receive a replacement referral as soon as possible. On average, OCHA returns ineligible referrals to CES within 2 business days of determining ineligibility. Replacement referrals are not provided by CES until the ineligible referrals are returned to CES by OCHA in the Homelessness Management Information System database.

HCA established EHV Supportive Service and Housing Search Assistance Contracts with five non-profit organizations to support 557 households receiving EHV from the OCHA. These contracts include performance objectives aimed at quickly securing rental housing and leasing up the voucher as well as promoting long-term housing stability. The performance objectives are detailed below:

- At minimum, 50% of the total number of expected participants will secure permanent rental housing within 90 days of EHV issuance.
- At minimum, 95% of the total number of expected participants will secure permanent rental housing within 120 days of EHV issuance.
- At minimum, 95% of the total number of expected participants will receive housing support assistance and housing stabilization services.
- At minimum, 95% of the total number of expected participants will remain in permanent housing at program exit.
- Of participants exiting to a permanent housing destination, 95% will maintain housing for more than six months from the date of their program exit.



Outcomes:

- 29% of housed participants secured permanent rental housing within 90 days of EHV issuance.
- 45% of housed participants secured permanent rental housing within 120 days of EHV issuance.
- 100% of participants received housing support assistance and housing stabilization services.
- Data for program exit outcomes are not applicable at this time.

The EHV Supportive Service providers are working diligently to identify and place people in permanent housing. Low vacancy rates and rising rental costs have contributed to delays in meeting the milestones to secure permanent rental housing within 90 and 120 days. These delays are largely impacting households seeking one-bedroom units. On average, participants are securing permanent rental housing within 124 days of voucher issuance. The following table provides average days between voucher issuance and permanent housing placement by demographic groups.

	Average Days to Housing Placement
Black, Indigenous and people of color	115
White, Non-Hispanic/Non-Latin(a)(o)(x)	134
Female	125
Male	125
Other Gender	191
18-24	106
25-61	124
62+	121
Disabling Condition	131
No Disabling Condition	103
Survivors of Domestic Violence or Human Trafficking	99

100% of EHV participants have received housing support services and housing stabilization services. Participants are linked with a housing supportive services provider at the time of referral to OCHA. The provider completes intake while OCHA processes the housing application. The concurrent workflow allows the provider to develop rapport with the participant during the application process support with completing the voucher issuance and housing search upon voucher issuance.

At this point in program implementation, insufficient time has passed to provide data on program exit outcomes.



Project Inventory

Previously identified projects **[001] - Meal Gap Programming** and **[002] - Economic Support to Arts-Related Small Businesses and Non-Profits** have been shifted to project **[005] – Revenue Replacement Provision of Government Services** since the last recovery plan, as allowable under SLFRF.

Project [003]: Workers' Compensation

Amount Allocated: \$4,685,735

Cumulative Expenditures as of 6/30/22: \$2,556,610

Project Expenditure Category: 1-Public Health

Project Overview: The County's Workers' Compensation Program provides prompt state-mandated benefits and quality medical care to injured County employees. This project allows the County to mitigate Workers' Compensation costs and accelerate the process of returning employees to work.

Use of Evidence: Not applicable

Performance Report: Due to the COVID-19 pandemic, the County has seen an increase in Worker's Compensation claims from employees who were impacted by COVID-19 while performing essential job duties for the community.

Project [004]: Paid Sick and/or Family Leave

Amount Allocated: \$15,934,219

Cumulative Expenditures as of 6/30/22: \$14,404,366

Project Expenditure Category: 1-Public Health

Project Overview: This project provides paid sick and paid family and medical leave for public employees to enable compliance with COVID-19 public health precautions.

Use of Evidence: Not applicable

Performance Report: This program has been identified as an enumerated eligible use. For full-time employees, employees are paid for up to 80 hours for leave taken when they are unable to work or telework and have a COVID-19-related reason, such as caring for and/or attending a vaccine appointment for themselves or a family member. For part-time employees, leave hours are determined through a calculation process based on their work hours. Full-time and part-time employees may be paid in excess of the aforementioned hours by using personal leave balances for COVID-related absences (e.g. annual, vacation, sick, and performance incentive program).



Project [005]: Revenue Replacement Provision of Government Services

Amount Allocated: \$596,220,990

Cumulative Expenditures as of 6/30/22: \$72,652,085

Project Expenditure Category: 6-Revenue Replacement

Project Overview: This project provides support for County departments' immediate and future general COVID-19 public health response, as well as various efforts for the provision of government services, described under the *Uses of Funds* section (pages 3 and 4 of this report).

Use of Evidence: Not applicable

Performance Report: Not applicable