LA COUNTY DEPARTMENT OF HOMELESS SERVICES AND HOUSING

Enriched Residential Care (ERC)

Enriched Residential Care

The Enriched Residential Care program provides housing access to participants with complex health problems to achieve healthy outcomes and housing retention

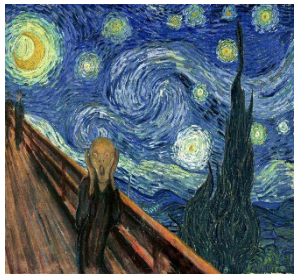
ERC is a “Step Up” from the shelter setting or PSH to a higher level of care where participants receive 24/7 care and supervision in Adult Residential Facilities or Residential Care facility for the Elderly

Through the ERC program, facility operators receive financial support to provide enhanced services in the license care facility

Who do we serve?

Ambulatory/Non-ambulatory

- Ambulatory: Able to walk independently without assistive device.
- Non-ambulatory: Not able to walk, bedridden or require total care



Complex Behavioral Issues

- Serious mental illness illnesses (*may be linked to DMH & FSP if needed)
- Dementia/cognitive impairment
- Substance use disorders
- Conserved by Office of the Public Guardian

Need assistance with Activities of Daily Living

- Inability to perform activities of daily living without intensive support and/or supervision

Manage Health Care

- Unable to access physical and/or mental healthcare, without support or supervision

Have the ability to pay rent for room and board

- Monthly contribution to rent is expected for participants with reported income, i.e., Social Supplemental Income (SSI)

Facility Types

Adult Residential Facility (ARF) – Ages18 to 59

Participants are independent and able to perform their ADLs. Facility operator provide 24/7 care and supervision, medication management, meal preparation (special diets if required), housekeeping, recreational activities, group therapy, and more.

Residential Care Facility for the Elderly (RCFE) – Ages *60+

Participants obtain 24/7 care and supervision, minimum assistance with ADLs, bathing, dressing, eating, medication management, wound care (stage 1 & 2), catheter care (if participant manages primarily on their own), colostomy, transportation to medical appointments, and money management. *Some facilities provide memory care units for participants with dementia.

HFH CHAMP Application for ERC Referrals

Objective: To complete and submit an HFH Application for ERC referrals

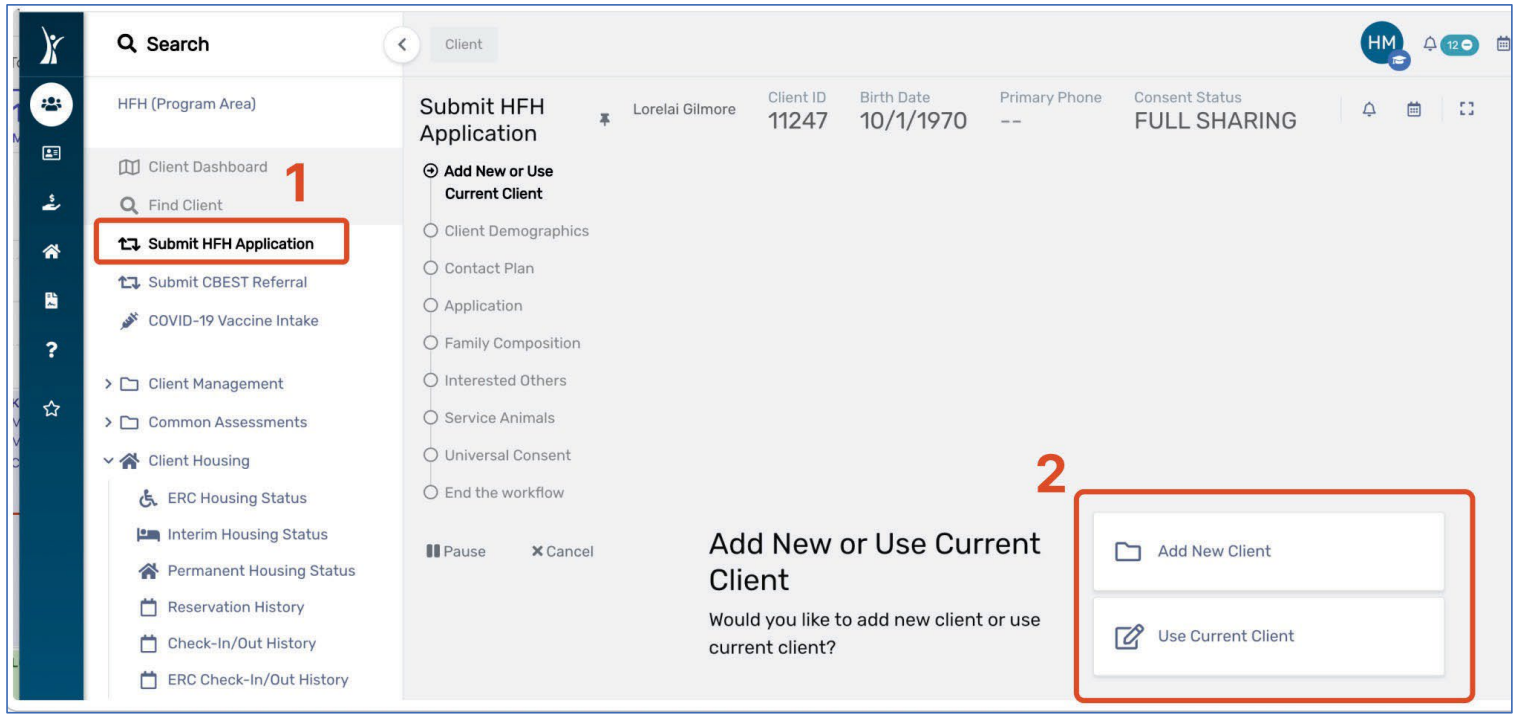
Procedures:

- Begin 'Submit HFH Application' workflow
- Search for existing client or add new client
- Complete 'Application' form
  - Select Referral Type(s): **Enriched Residential Care**
  - Select **Application SPA**
- Complete other steps of workflow as needed
- Upload ERC Required Documents
- Save and finish workflow

Submit HFH ERC Application

Navigate to the Client Workspace

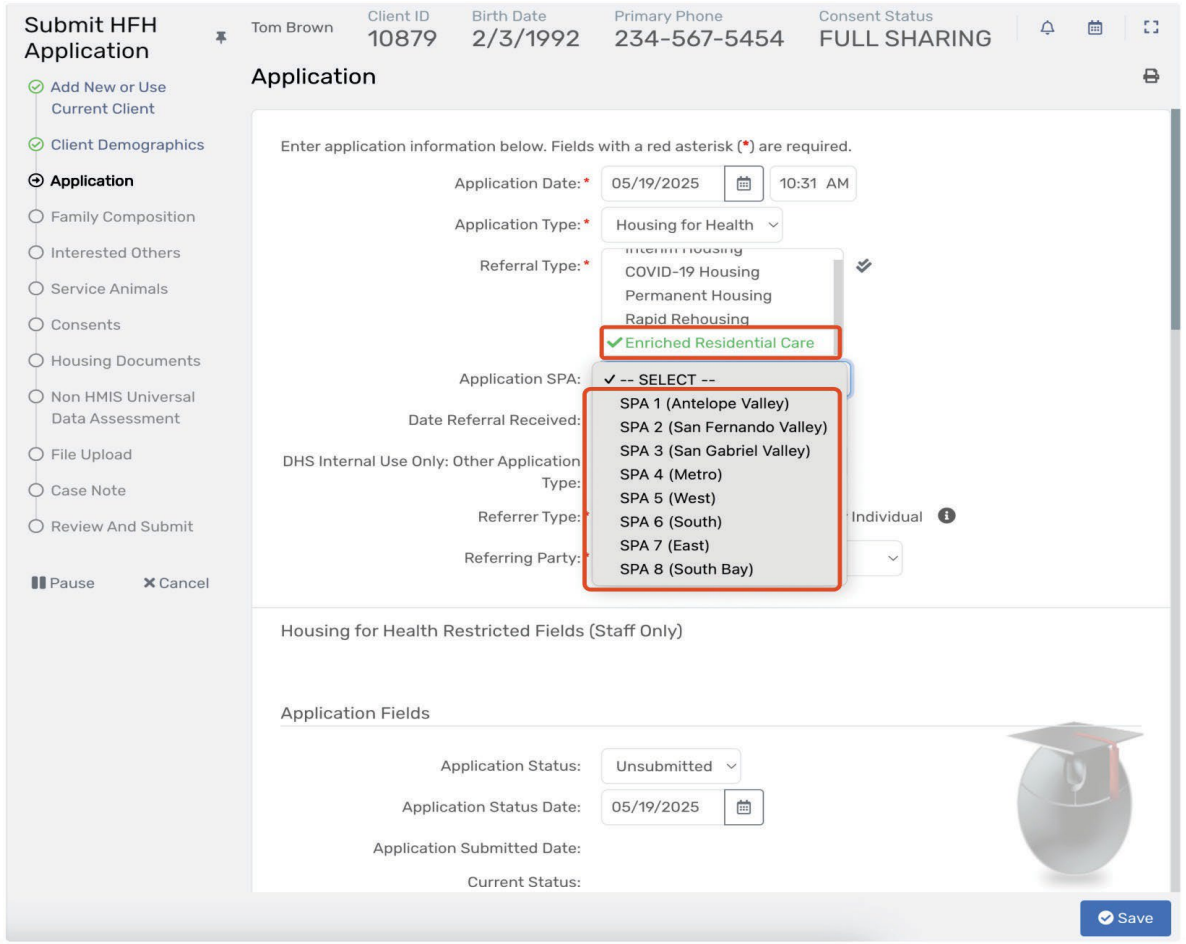
1) In the left-hand menu, select **"Submit HFH Application"**
2) Select **"Add New Client"** or **"Use Current Client"** as appropriate



Submit HFH ERC Application

Complete Application form

- Select **"Enriched Residential Care"** as Referral Type
- Select **"Application SPA"** as the SPA the referral is coming from
- Proceed with application and fill out participant's information/details where applicable



The ERC Packet

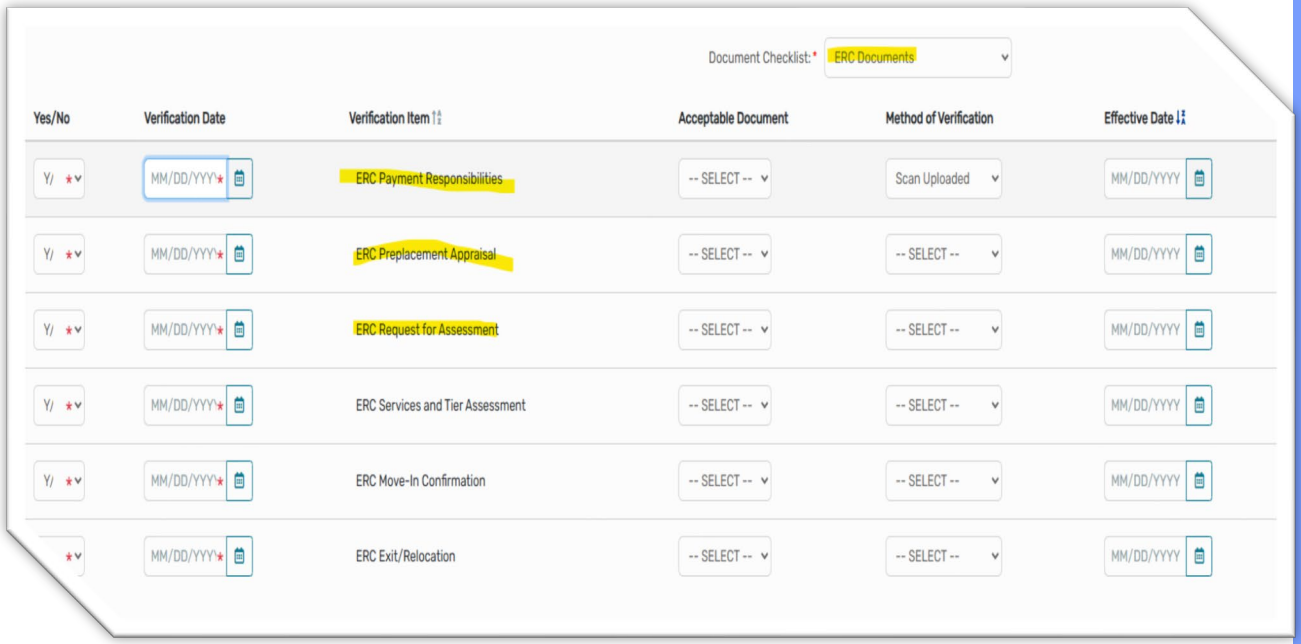
Required Documentation

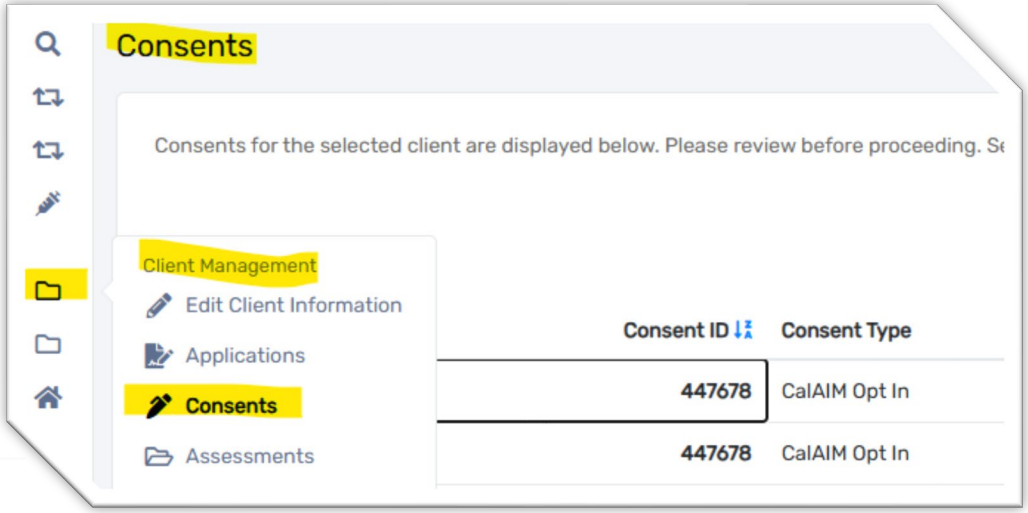
- Completed ERC application packet, including required consent and privacy forms (Universal Consent, NOPP, Request for ERC Assessment).
- Preplacement Appraisal (LIC 603) and Physician Report (LIC 602 or LIC 602A) completed by a physician (preferably the primary care provider).
- Physician Report should include recent TB test results, medication list, and any supporting medical documentation (e.g., hospital face sheet).
- Proof of medical insurance (active coverage required for placement).
- Payment Responsibilities Form signed by all participants, regardless of income. Income verification (e.g., award letter) if the participant receives benefits.
- Valid identification documents (e.g., Social Security card, birth certificate, passport, or ID).Medi-Cal information or CIN number required.

Uploading ERC Forms

CHAMP

- The Referral Party uploads all documents during the **HFH ERC Application** or independently under “Documents / ERC Documents”. The Physician's Report and other medical forms may be uploaded as “**Higher Level of Care**” or under its respected title via “Documents / HFH IH/ERC Documents.”
- Consent forms need to be uploaded separately under “Client Management / Consents.”
  - NOPP
  - Universal Consent Form
- ***Failure to upload all required forms will lead to a referral closure**





ERC Referral Submission Standard

To avoid delays, Please Follow This Order:

- **Collect** all required ERC documents
- **Verify** all forms are complete, singed, and current
- **Upload** all documents in CHAMP under “Documents / ERC Documents”
- **THEN Submit** the HFH – ERC CHAMP Application

- Referrals submitted without a complete ERC packet will:
  - Experience delays to potential assessment scheduling
  - Require RAP follow-up for missing documentation
  - Risk deactivation/closure of ERC application after two weeks of no follow-up and incomplete forms

ERC Payment Responsibilities

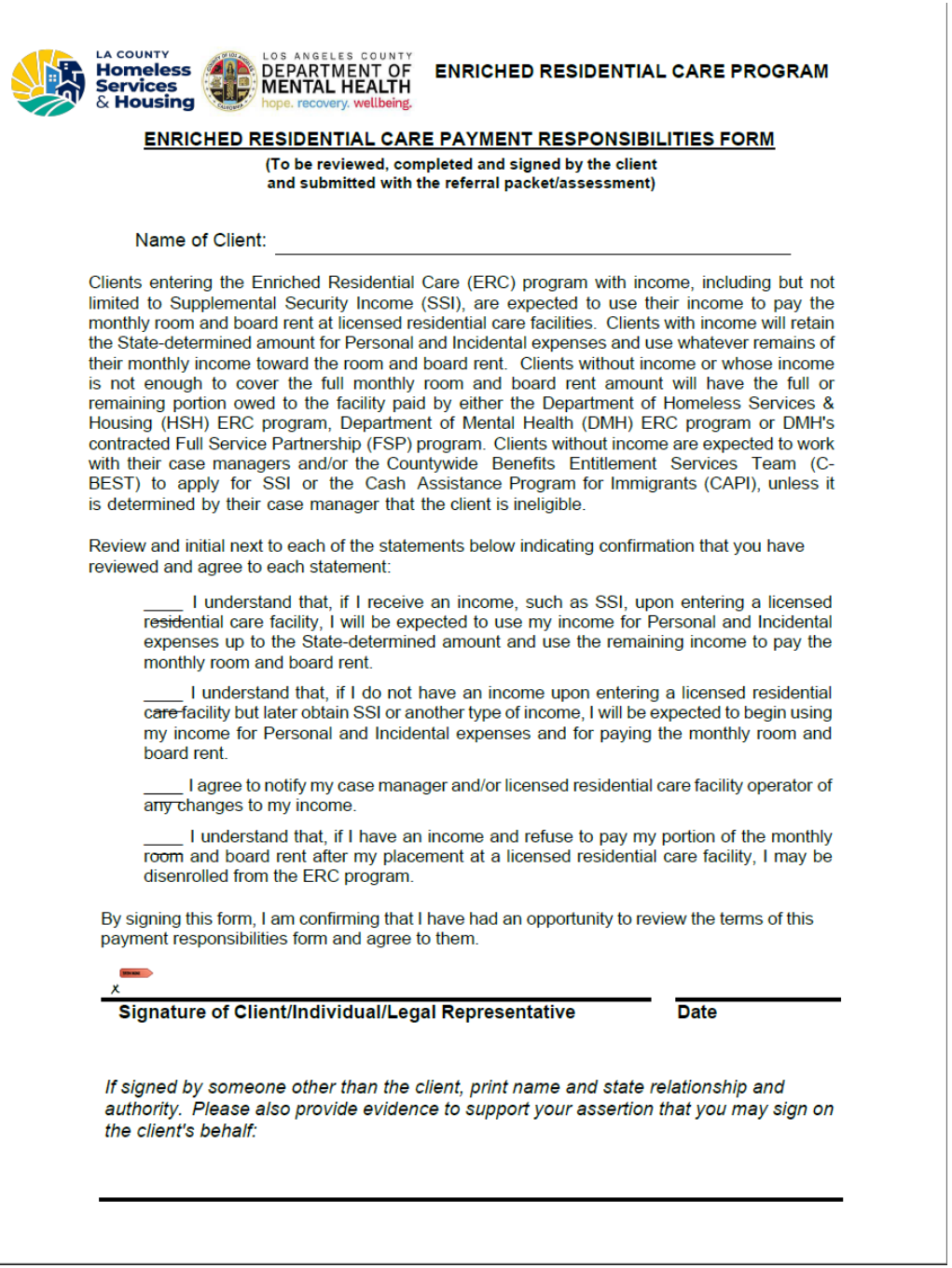
ERC Contributions Example:

Participant with SSI

- Participant is receiving $850.00 in SSI
- ERC Rent: $1,444.07
- P&I: $182.00 (Participant keeps)

  $850.00 - $182.00 = **$668.00 Participant's ERC Rent**

- $1,444.07 - $668.00 = $776.07 ERC's Contributing Support



LA COUNTY Homeless Services & Housing | LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH hope. recovery. wellbeing.

ENRICHED RESIDENTIAL CARE PROGRAM

ENRICHED RESIDENTIAL CARE PAYMENT RESPONSIBILITIES FORM

(To be reviewed, completed and signed by the client and submitted with the referral packet/assessment)

Name of Client: _____

Clients entering the Enriched Residential Care (ERC) program with income, including but not limited to Supplemental Security Income (SSI), are expected to use their income to pay the monthly room and board rent at licensed residential care facilities. Clients with income will retain the State-determined amount for Personal and Incidental expenses and use whatever remains of their monthly income toward the room and board rent. Clients without income or whose income is not enough to cover the full monthly room and board rent amount will have the full or remaining portion owed to the facility paid by either the Department of Homeless Services & Housing (HSH) ERC program, Department of Mental Health (DMH) ERC program or DMH's contracted Full Service Partnership (FSP) program. Clients without income are expected to work with their case managers and/or the Countywide Benefits Entitlement Services Team (C-BEST) to apply for SSI or the Cash Assistance Program for Immigrants (CAPI), unless it is determined by their case manager that the client is ineligible.

Review and initial next to each of the statements below indicating confirmation that you have reviewed and agree to each statement:

____ I understand that, if I receive an income, such as SSI, upon entering a licensed residential care facility, I will be expected to use my income for Personal and Incidental expenses up to the State-determined amount and use the remaining income to pay the monthly room and board rent.

____ I understand that, if I do not have an income upon entering a licensed residential care facility but later obtain SSI or another type of income, I will be expected to begin using my income for Personal and Incidental expenses and for paying the monthly room and board rent.

____ I agree to notify my case manager and/or licensed residential care facility operator of any changes to my income.

____ I understand that, if I have an income and refuse to pay my portion of the monthly room and board rent after my placement at a licensed residential care facility, I may be disenrolled from the ERC program.

By signing this form, I am confirming that I have had an opportunity to review the terms of this payment responsibilities form and agree to them.

X _____ _____

Signature of Client/Individual/Legal Representative **Date**

If signed by someone other than the client, print name and state relationship and authority. Please also provide evidence to support your assertion that you may sign on the client's behalf:

_____

ERC Assessment: Service Need and Tier Assessment (SeNTA)

- ERC has four tier levels determined by the Service Need and Tier assessment (SeNTA) form and completed by the Regional ERC Program Manager (RPM) assigned to the case. In some cases, our clinical team supports with the assessment, and the assigned PM determines the level of care needed when completing the SeNTA.
- The SeNTA helps recognize the following:
  - **Specific needs and barriers that can be supported with ERC services (Tiers 1 through 4).**
  - Identify a list of ERC facilities where a participant may be (internally) referred to for placement. Facilities are rated by the ERC Facilities Improvement Team (FIT) and assigned a tier level.
  - Assign an enhanced services rate which is then paid to the facility by the ERC program.
  - Most ERC participants primarily fall in the Tier 3 – 4 levels.

Service Need and Tier Assessment (SeNTA)

Tier Levels

Services Provided under SSI Rate	Tier 1 (All services listed under SSI Rate, plus)	Tier 2 (All services listed under SSI Rate and Level I, plus)	Tier 3 (All services listed under SSI Rate and Level I and II, plus)	Tier 4 (All needs listed under SSI Rate and Level I, II and III, plus)
☐ Double occupancy room with TV cable in the room. ☐ 3 Nutritious Meals/Day with snacks. ☐ Accommodations for residents on special diets. ☐ Medication management. ☐ 24/7 Supervision. ☐ Home visits by primary care physician, psychiatrist, and licensed MH clinician.	**Physical Health Support** • Maintain an accurate and up-to-date medication list. • Complete daily medication reconciliation. • Manage medications and ensure medication adherence. • Ensure appropriate storage or all medications. • Conduct medication reconciliation on a monthly basis and after every medication change post provider encounter. • Provide linkage and transportation to regular/annual check-ups. • Provide nutritionally balanced meals according to the USDA food pyramid.	**Physical Health Support** • Provide linkage and transportation to PCP every 3-6 months. • Provide linkage and transportation to specialist visit, as needed for chronic medical management. • Assist with coordination of multiple healthcare providers (PCP and specialist). • Provide contracted or in-house nursing staff (LVN/CNAs) to provide health education. • Provide basic wound care-applying band-aids, etc. • Provide health education about dietary restrictions.	**Physical Health Support** • Provide one-person assist for ADLs/iADLs. • Provide linkage and transportation and scheduling for frequent specialist visits. • Provide Stage 1-2 ulcer treatment. • Assist with administration of >5 medications. • Provide special diets-diabetic, renal, cardiac, and others based on orders from MD. • Provide 24/7 med tech staff or trained staff • Provide personnel to assist with visual or hearing impairments. • Provide personnel to assist with injections-insulin (i.e., contract LVN, RN under supervision of MD) • Provide personnel to obtain vital signs (i.e., contract LVN, RN, medical asst, med tech) • Ability to implement a Fall prevention program.	**Physical Health Support** • Provide 2-person assist. • Provide available nursing staff on call-LVN (contract or in-house) • Provide Bowel and Bladder incontinence assistance. • Provide in-home visiting PCP. • Assist with the administration of >7 medications. • Provide personnel to assist with injections-insulin (i.e., contract LVN, RN under supervision of MD) 3x per day. • Ability to manage high-risk and advanced disease patients. • Accommodate palliative or hospice care. • Provide bariatric care for clients 300 lbs or less. • Ability to accommodate patients on narcotics and controlled substances.

Placements

ERC Program Managers

- Participant documents are shared with Facility Administrators (FAs) for review.
- FAs assess eligibility, bed availability, and ability to meet medical needs.
- FAs coordinate assessments (in-person or virtual) with POC.
- Placement match is confirmed; move-in date is scheduled and transportation and warm hand off is coordinated.
- Participant arrives with 30-day medications and required supplies.
- Move-In Confirmation form (MIC) is sent; FA signs and all parties are notified.
- Facility Improvement Team (FIT) handles monthly facility payments.
- Post-placement: MCW is assigned; Nursing support and OT support as needed to ensure smooth transition.
- **To avoid delays in ERC enrollment, participants must be disenrolled or deactivated from existing services in CHAMP before enrollment can proceed.**
- Ongoing coordination with Wellness Team and facility to address client and program needs.

Common Barriers

Identifying Placement

- Financial & consent requirements: Payees and legal representatives (if applicable) must complete required forms, including the Payment Responsibilities Form.
- Substance use & support needs: Consideration given as part of overall care planning.
- Pets/ESAs: Limited facility capacity; documentation required, and participants must be able to fully care for the animal.
- Placement limitations: Availability depends on facility capacity and ability to meet medical needs.
- Regional preference: Considered when possible but not guaranteed due to limited locations and tier-level compatibility.
- *ERC Currently has an active **WAITLIST**
    - Participants in need of urgent services may still be referred to ERC however it is recommended that the referring party explore other programs as well.

For Your Reference

To Consider

- Participants needing one-on-one support may require a Skilled Nursing Facility (SNF) or a higher level of care beyond ERC.
- If the ERC RAP Team determines needs exceed ERC capacity, the referral will be closed.
- The team will communicate this decision with the participant's support team (ICMS, CM, PM, etc.).
- If the participant is connected to Full-Service Partnership (FSP), the FSP team should first pursue an ERC referral through DMH ERC.
- If DMH ERC cannot support the placement, they will connect with HSH ERC for further assistance.

ERC Bridges Homelessness To Stability With Coordinated Care, Dignity, And Continuity.

Closing Message

LA COUNTY Homeless Services & Housing

Thank you

LA COUNTY Homeless Services & Housing

HSH: ERC
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