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UNITED STATES DISTRICT COURT
CENTRAL DISTRICT OF CALIFORNIA - CENTRAL DIVISION
THE HONORABLE DAVID O. CARTER, U.S. DISTRICT JUDGE

JEFFREY POWERS, et al,

Plaintiffs,

Case No. LACV22-8357

vs.

DENIS RICHARD MCDONOUGH,

Defendants.

REPORTER'S TRANSCRIPT OF TRIAL PROCEEDINGS
TRIAL DAY 4
Friday, August 9, 2024
8:30 a.m.
LOS ANGELES, CALIFORNIA

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12 Tobin Dale, Veterans Administration

13 Keith Harris, Party Representative

14 Robert Davenport, Counsel

15 Marcie Vega

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1 **LOS ANGELES, CALIFORNIA; FRIDAY, AUGUST 9, 2024**

2 **8:30 A.M.**

3 **--oOo--**

4
5 THE COURT: Then we are in session. All counsel are
6 present. The parties are present. Ms. Hammitt is retaking the
7 stand. Good morning.

8 THE WITNESS: Good morning.

9 THE COURT: It's my understanding you are going to
10 take her on direct examination as if this was your case in
11 chief; is that correct?

12 MR. KNAPP: Correct.

13 MR. ROSENBERG: And, Your Honor, I would like to
14 take just one moment to introduce Marcie Vega from the
15 Department of Housing and Urban Development.

16 THE COURT: Pleasure. It's nice meeting you.

17 MR. ROSENBERG: She's our agency representative from
18 HUD. And she's the regional public housing director that
19 oversees basically California and several other states in the
20 southwest.

21 THE COURT: Welcome.

22 So, counsel, direct examination then on behalf of
23 the defense. And although I know each of you, just identify
24 yourself again for the record.

25 MR. KNAPP: Good morning, Your Honor.

1 THE COURT: Good morning.

2 MR. KNAPP: Cody Knapp for the federal defendants.
3 And good morning, Ms. Hammitt.

4 MS. HAMMITT: Good morning.

5 MR. KNAPP: Good to see you again.

6 DIRECT EXAMINATION

7 (Federal Defendants Direct)

8 BY MR. KNAPP:

9 Q We touched -- or you touched on this briefly yesterday
10 with Mr. Du, but I want to start today by talking a bit about
11 your background.

12 Can you tell us what your educational background is.

13 A Sure. I'm a social worker. And I got my bachelor's in
14 science in psychology and sociology, a minor in criminal
15 justice. And then I went on to get my master's degree at the
16 University of Kentucky.

17 Q And do you hold any professional licenses?

18 A I do. I have an advanced practice license in social work
19 in the state of Ohio. The initials are LISWS. And that means
20 licensed independent social worker with supervisory
21 designation.

22 Q And what does your license authorize you to do?

23 A My license authorizes me to perform the full level of
24 social work practice, to provide supervision to those social
25 workers who are trying to achieve their independent license. I

1 can do group therapy, individual therapy, psychoeducation.
2 And, certainly, around those evidence-based practices with
3 certification, I can also do that.

4 I don't do much of that these days because I'm mostly in
5 an administrative role.

6 Q Why did you go into the social work field?

7 A So, I think the desire to be a part of the helping
8 profession was grown into me with my grandmother and my mother.

9 I always saw them doing their best to care for others,
10 whether it was in church or whether it was, you know, just
11 sitting around with their friends giving advice. And while
12 that's certainly not the role of a social worker to necessarily
13 give advice all of the time, I felt a calling to that. Even
14 when I was younger, I found myself being the one that was
15 rooting for those that didn't have a voice of their own. And I
16 think that was brought into me from my parents.

17 My father served in the military. He's a Navy veteran.
18 And so the mission of the VA has been one that has been really
19 valuable and true to me and to my family as well.

20 Q What was your first social work position?

21 A I worked in a nonprofit residential substance abuse
22 treatment program for women in Lexington, Kentucky. And many
23 of the women had experienced homelessness. Many of them had
24 been involved with the criminal justice system. And many of
25 them struggled with addiction and mental health problems.

1 Q And where did you work after that?

2 A I went to work for the Department of Justice in the Bureau
3 of Prisons. And I worked at the federal medical center in
4 Lexington, Kentucky. I worked with males that were
5 incarcerated. And I worked within a program called RDAP,
6 Residential Drug Abuse Program. And we provided services to
7 men that were incarcerated.

8 I focused on men that struggled with addiction and
9 mental illness. Some of the individuals, if they didn't have a
10 violent crime, could get up to a year off their sentence.

11 Q And how long were you in that position with RDAP?

12 A About seven years.

13 Q And where did you go after that?

14 A I went to the Cincinnati VA. And my first job in the VA
15 was as a HUD-VASH social worker.

16 Q And what did your job as a HUD-VASH social worker at the
17 Cincinnati VA entail?

18 A Our focus was to utilize HUD-VASH vouchers and provide
19 clinical case management to veterans experiencing homelessness.
20 And our goal was to just make sure that everyone had a safe
21 place to stay.

22 Q And when you say "clinical case management," can you tell
23 the Court what exactly that means?

24 A Sure.

25 So, we would provide connections to care. That might be

1 mental healthcare. That might be, you know, addiction. Maybe
2 it's medical care as well. And those clinical responsibilities
3 were really important because we wanted to make sure that each
4 veteran had the supportive services wrapped around them. And
5 so sometimes we would find ourselves working with someone, and
6 while we wouldn't be necessarily providing clinical
7 psychotherapy with the veteran, we would have brief
8 interactions with the veteran where we would listen to their
9 stories and talk with them about what services were available
10 outside of our program so that they could get the support they
11 needed.

12 That might be employment. That might be mental health.
13 That might be medical services.

14 Q Did you eventually move on to a different position within
15 the Cincinnati VA?

16 A I did. At the time, there was an opportunity for me to be
17 reassigned to a position that was a little bit of a split
18 position. It was a homeless outreach worker. And, also, a
19 portion of the job was as a veteran justice outreach
20 specialist.

21 And my role as a veteran justice outreach specialist at
22 the time was to create a justice outreach program for the
23 Cincinnati VA.

24 I got to do that one day a week. And the other four
25 days, I was focused on street homeless outreach.

1 Q And what does street homeless outreach entail?

2 A My main focus in that work was going out to encampments,
3 working with a team of my colleagues, going to shelters, going
4 to transitional housing settings and really meeting the
5 veterans where they were physically and trying to engage them
6 to bring them indoors and, if they were already indoors, trying
7 to engage them and make connections to the HUD-VASH program for
8 permanent housing.

9 Q And did your involvement with the Veterans Justice
10 Outreach Program eventually become a full-time engagement?

11 A It did. So, probably about a year -- maybe even less than
12 a year than starting that, it became a full-time job.

13 And so my role in that work was to work with the courts
14 and to work with law enforcement and the jails.

15 A big portion of my job was -- and I'm really proud of
16 -- this was creating veteran treatment courts in Ohio,
17 Kentucky, and Indiana. And as part of that role, veteran
18 treatment courts are like a hybrid mental health court, drug
19 court. And they were specifically for veterans.

20 So, I served as a member of the treatment team and
21 helped to build a mentoring component to those courts.

22 I also did jail outreach. So I would go into local
23 jails and meet with veterans and try to help connect them to
24 services and divert their incarceration.

25 Also worked with law enforcement to roll out trainings

1 so that their teams understood an approach to serving veterans
2 and had resources available to them.

3 We also developed legal clinics, supportive services
4 from pro bono attorneys to assist veterans with their legal
5 circumstances.

6 Q And how long were you in your role with the Veterans
7 Justice Outreach Program?

8 A Probably about three years.

9 Q And what did you do after that?

10 A After that, I was selected to lead the homeless programs
11 in Cincinnati, Ohio.

12 So the title was the director of the community outreach
13 division.

14 And I was responsible for a number homeless programs
15 under that division.

16 Q And how long did you spend as director of the homeless
17 programs at the Cincinnati VA?

18 A I was there for about seven years.

19 Q And after that, where did you go?

20 A Well, if I could back up just a second because in 2019, I
21 had an opportunity to apply for a detail role here in Los
22 Angeles.

23 And at the time, there was a leadership transition in
24 the program. The chief of Community Engagement and
25 Reintegration Service, CERS, was leaving to go to another job.

1 And I applied for and was selected to lead CERS in Los Angeles.

2 And I did that for about five months. And really
3 enjoyed my work in Los Angeles. It was very challenging and
4 very exciting. Lots of resources and lots of opportunities
5 presented themselves. And so I actually applied for the job,
6 the permanent position, and was selected for the position.
7 And, unfortunately, I could not take that job. My mother was
8 very sick, and I decided to return to my family and help the
9 family.

10 Q So around when was this that you were serving in the
11 acting director of CERS role?

12 A It was about February of 2019 until, probably, July
13 of 2019.

14 And then I went back to my job at Cincinnati until
15 August of 2020.

16 Q And then what happened in August of 2020?

17 A So I saw a posting for the social work chief in Los
18 Angeles. And I think my ultimate goal was to get back to Los
19 Angeles and serve in the role that I was detailed to. So I
20 thought this would be a good opportunity to step back in Los
21 Angeles but in a different role.

22 So my role was social work chief. And I was responsible
23 for the professional practice oversight of about 500 social
24 workers at Greater Los Angeles. And programs under my purview
25 included things like caregiver support, intimate partner

1 violence program, medical and surgery social work, mental
2 health social work. There is probably a couple of other that
3 I'm missing. But, essentially, I served as the chief of the
4 professional practice of social work.

5 Q And how did -- how did that work overseeing the social
6 work service differ from the work in overseeing CERS?

7 A I missed it. I missed working in CERS.

8 It was different because CERS was a separate service
9 than social work. And we integrated services. And I also
10 noticed that there was more that could be done. So I worked
11 really hard during that time to bridge those services together
12 to make sure that social workers working in CERS were a part of
13 the team and that we recognized the importance of every place
14 across the medical center has an opportunity to be a part of
15 the mission to end veteran homelessness.

16 But it was different in that I wasn't working in the
17 day-to-day programming of homeless work, where, you know,
18 before I was leading teams and driving that mission.

19 Q And how long you were in the chief of social work service
20 role?

21 A From August of 2020 until early 2023 when I was actually
22 asked again to step in and take a detail opportunity to lead
23 CERS.

24 Q And are you currently -- what is your current position?

25 A I'm currently the chief of CERS. And I have held this

1 role officially -- I was -- applied and selected -- excuse
2 me -- applied and selected for that role in May of 2023.

3 Q At a high level, what is CERS?

4 A At a high level, our mission in CERS is to make sure every
5 veteran has a safe place to call home.

6 And we do that by making connections to resources,
7 benefits, community partners. And our focus is on making sure
8 that what the veteran needs and what the veteran wants, what
9 their preferences are, that we work around their preferences.
10 And we do that under the Housing First approach to care.

11 Q And as chief of CERS, what are your responsibilities?

12 A My responsibilities are to oversee all the staff in my
13 service but recognizing that there are many staff that are not
14 in my service that work in delivering care to veterans in
15 homeless programs.

16 I'm a champion for our medical center. I am expected to
17 create partnerships because we know VA can't do it alone. I'm
18 responsible for overseeing our budget, making sure that staff
19 are trained and they are hired. And where we see difficulties
20 and obstacles, it's my responsibility to drive those changes
21 and to do that in a way that creates an environment of cohesion
22 and good relationship and partnerships.

23 It's my job to make sure my team listens to the veterans
24 we serve and when they identify concerns that we look into
25 those concerns. And I might not be working with veterans

1 directly, but my role is to ensure that the leaders and the
2 frontline staff feel supported, they have the resources that
3 they need to do their job. And when we get it wrong, we listen
4 to those things. And we try to get that as close to right as
5 we can.

6 Q So we're now going to bring up what has been marked as
7 Exhibit 1214.

8 Ms. Hammitt, do you recognize Exhibit 1214?

9 A I do.

10 Q What is this document?

11 A This is CERS' organizational chart. So these are all the
12 staff that report up through my service.

13 Q And looking at the first page of Exhibit 1214, near the
14 bottom left, is that your signature?

15 A That is.

16 Q And on what date did you sign Exhibit 1214?

17 A This was signed on February 5th, 2024.

18 MR. KNAPP: Your Honor, I would move that
19 Exhibit 1214 be admitted into evidence.

20 THE COURT: Received.

21 (Exhibit 1214 received into evidence.)

22 BY MR. KNAPP:

23 Q So, Ms. Hammitt, we're going to walk through the
24 organizational chart just so that the record is clear what is
25 shown here.

1 Do you see in the top right of Exhibit 1214 a box that
2 starts with the term Approved FTE?

3 A I do.

4 Q What is an FTE?

5 A FTE stands for full-time employee.

6 Q And so what does it reflect when that phrase or that term
7 is used in this document?

8 A So this means that CERS has been approved on our official
9 org chart for 377.625 full-time employees.

10 So that may not be individuals, but it totals -- each
11 FTE for a full-time employee is one. And so there may be some
12 individuals that work a half-time schedule or three-quarters of
13 a schedule. But that means that we have been approved for that
14 total number of full-time employees.

15 Q And beneath that, what does GP funded FTE refer to?

16 A So that means general purpose funded full-time employees.
17 And so that means the Greater Los Angeles Healthcare System
18 pays for the salaries of those employees.

19 THE COURT: Just a moment. I see the approved FTE
20 at the top. Did you say GP funding?

21 THE WITNESS: Yes, underneath --

22 THE COURT: And show me where on the page. If you
23 could just point that to me on the Elmo, for instance.

24 MR. KNAPP: Your Honor, I believe it's highlighted
25 currently on the Elmo just beneath approved FTE.

1 THE COURT: I see. I'm sorry. Thank you very much.
2 I appreciate it.

3 BY MR. KNAPP:

4 Q And, Ms. Hammitt, beneath there is a term SP funded FTE.
5 What does that refer to?

6 A I always call it special purpose funding, but I think it's
7 special purpose funding. And that funding is specifically
8 coming from our Homeless Program Office.

9 And, so, what that is referring to is that 337 full-time
10 employees that report to CERS are funded from the Homeless
11 Program Office and not VA Greater Los Angeles.

12 Q And when you refer to the Homeless Program Office, what is
13 that?

14 A So that's the national office that -- all of the directors
15 of all of the various homeless programs that you see on the
16 organizational chart, they are part of the Homeless Program
17 Office and report up through central office and our lead
18 director of the homeless programs.

19 Q And is your position as chief of CERS reflected on org
20 chart?

21 A It is not. It's -- the box is there, but it's not funded
22 in this specific org chart.

23 Q Apologies. If we can go back to the main document.

24 Do you see the box with the title in the center of the
25 page office of the chief CERS?

1 A I do.

2 Q Is that your position, Ms. Hammitt?

3 A That is my position.

4 Q And then above that is another box with the title deputy
5 medical center director. Do you see that?

6 A I do.

7 Q Who holds that position?

8 A That is my boss. And that is John Kuhn. And he's the
9 deputy medical center director.

10 Q And does the line between those two boxes reflect you
11 report up to Mr. Kuhn?

12 A It does.

13 Q And do the lines beneath the box with the title office of
14 the chief of CERS indicate that everyone below reports up to
15 you?

16 A It does.

17 Q All right. Do you see the box outreach or access/outreach
18 deputy chief?

19 A I do.

20 Q What is that individual's responsibility?

21 A So that is a deputy chief that reports to me. And her
22 responsibilities are to lead the programs under her section.
23 And you will see those programs under her box.

24 So all of those employees report up through their
25 supervisors and then to her.

1 Q All right. So let's walk through some of those programs.

2 Do you see a reference to CRRC?

3 A I do.

4 Q What is CRRC?

5 A That is -- that stands for Community Residential and
6 Referral -- I'm sorry. Community Resource and Referral Center.

7 And we call that our welcome center on our campus.

8 And that is what CRRC stands for.

9 Q What does CRS stand for?

10 A That stands for Contracted Residential Services. And so
11 this is -- both of these are -- this is under the auspice of
12 Healthcare for Homeless Veterans. But we're just labeling it
13 in abbreviations on this chart. But it's Contracted
14 Residential Services under the Healthcare for Homeless Veteran
15 program.

16 Q And is Healthcare for Homeless Veteran program sometimes
17 abbreviated HCHV?

18 A Yes.

19 Q Ms. Hammitt, if you'd turn to page 2 of Exhibit 1214. Do
20 you see boxes listing positions within CRRC?

21 A I do.

22 Q And do you see boxes listing positions within CRS?

23 A I do.

24 Q Does this just reflect more specifically the breakdown of
25 assignment within those programs?

1 A Yes. That does. Those are individual staff that work in
2 that program.

3 So, earlier, I mentioned our welcome center. So, we
4 have a building on our campus. And veterans can walk into that
5 building and receive services there.

6 We also have laundry and showers outside of that
7 building. So it can serve as a front-door approach to veterans
8 receiving care. And so we have three peer specialists working
9 under the auspice of CRRC. We have three social workers and --
10 actually, four social workers, but three are at a different
11 grade level. So they might be licensed, or they might be
12 working on getting their license. And then we have an advanced
13 practice social worker. We call these senior social workers on
14 that team. And they all report up to a program coordinator,
15 who is also an advanced practice clinician.

16 In our CRS, which is HCHV contracted residential
17 services, we contract out with community partners to provide
18 emergency shelter for veterans experiencing homelessness. And
19 there are eight social workers working in that program. And
20 their primary goal is to make those connections to those
21 emergency shelter contracted programs.

22 They also oversee the work that those contractors do.
23 So they monitor them and make sure the things that they said
24 they were going to do that they are following through with
25 those contracts.

1 Q So you mentioned that you have three peer specialists
2 working in CRRC, the welcome center.

3 What is a peer specialist?

4 A A peer specialist is a veteran who works in our programs,
5 so they have been in the military.

6 Oftentimes, they have experienced homelessness
7 themselves. They may have experienced addiction. They may be
8 still recovering from addiction or other mental illness.

9 And peers are incredibly important to the work that we
10 do.

11 They provide support to the veterans and can walk
12 alongside them and often say things like, I have been there, I
13 know what this is like, let me give you some helpful advice
14 that can help you through this.

15 Oftentimes -- and just speaking as a social worker in
16 general -- I have been a social worker for 20 years -- and I
17 think peers have often been more powerful to the experience of
18 a veteran than I can be.

19 I did not serve in the military. I was not one of the
20 ones who signed a blank check up and to include my life. I'm
21 honored to serve the VA, but I also recognize that I wasn't in
22 the military, and I haven't experienced some of the things that
23 veterans experience.

24 And so having peers in our program -- and you will see
25 them throughout this organizational chart -- are just critical

1 to us being successful.

2 Q Turning back to page 1 of Exhibit 1214.

3 Do you see a reference to CES?

4 A I do.

5 Q What is CES?

6 A CES stands for Coordinated Entry Specialists.

7 And these are individuals that work in our service.

8 Because we have so many different programs in our service from
9 emergency shelter to transitional housing to permanent housing,
10 they serve as the coordinator of our system.

11 And, so, it's their job to make sure that we're
12 identifying veterans and we're coordinating services throughout
13 our programs and throughout our service so that veterans can
14 get housed as quickly as possible and to assist with meeting
15 their needs.

16 Q And is the staffing for CES broken out in greater detail
17 on page 2 of Exhibit 1214?

18 A It is.

19 Q On page 1 of Exhibit 1214, do you see a reference to VJP?

20 A I do.

21 Q What is VJP?

22 A VJP stands for Veteran Justice Programs. As I talked
23 about earlier, these programs -- which include Justice Outreach
24 Specialist and Healthcare For Re-Entry Veterans.

25 Those two programs are really focused on engaging with

1 veterans who are justice involved, meaning they have had some
2 involvement with the criminal justice system. They may be in
3 prison; they may be in jails; or they may be facing some sort
4 of incarceration or legal problems. And so the focus of this
5 program is to ensure that we provide opportunities for those
6 veterans in the spirit of decriminalizing homelessness and
7 mental health and addiction. So working with our justice
8 partners to ensure that veterans have the services and benefits
9 that are entitled to them.

10 Q And is the staffing for the VJP program broken out in
11 greater detail on page 2?

12 A It is.

13 Q Do you see a reference on page 1 to street outreach?

14 A I do.

15 Q What is street outreach here?

16 A So street outreach, as I discussed earlier, are made up of
17 employees who go into the community, perhaps encampments, under
18 bridges, wherever veterans are in our community that are
19 unsheltered, and try to make connections to care and assist
20 with quickly moving veterans that are experiencing unsheltered
21 homelessness indoors.

22 We -- that is a program that I worked in myself. And so
23 sometimes we will get calls from people in the community saying
24 that they saw someone with an American flag or camouflage or
25 there is someone sleeping in the lobby of our hospital. And so

1 that team will deploy to those various locations and provide
2 outreach and engagement to those veterans to try to make
3 connections to care.

4 Q And is the staffing for street outreach broken down in
5 greater detail on page 2?

6 A It is.

7 Q On page 1, do you see a reference to the clinical care
8 deputy chief?

9 A I do.

10 Q What is that individual's responsibilities?

11 A So that individual's responsibilities -- she, as the
12 deputy, reports to me. And the programs that she focuses on
13 are HPACT, which is our Homeless Patient Aligned Care Team; our
14 Grant and Per Diem program, which is transitional housing; and
15 CTRS, which is our Care, Treatment and Rehabilitation Service.
16 And some people refer to that as our tiny shelters.

17 Q So what is HPACT?

18 A HPACT, as I mentioned, Homeless Patient Aligned Care Team,
19 is a primary care approach to serving veterans who are
20 experiencing homelessness.

21 And that program provides an opportunity to provide care
22 a little bit differently.

23 What we recognize is that veterans experiencing
24 homelessness often have barriers to getting involved with care,
25 so we want to make sure we have physicians and mental health

1 providers and others that really understand homelessness,
2 understand the physical and mental health concerns that
3 homeless veterans experience.

4 And we locate that care with what we referenced earlier,
5 our CRRC, our welcome center, because know that we want to
6 provide a one-stop shop.

7 We recognize that having the medical services located
8 closely to the housing services is really helpful. We can do
9 warm handoffs, and we can provide services in that way.

10 We have a few different HPACTS. We have an HPACT in
11 Downtown Los Angeles. We have one at the West LA Medical
12 Center, and we have one in our Sepulveda ambulatory clinic.

13 But the premise here is to really understand those
14 barriers that veterans are facing and serve them in a way that
15 meets their needs.

16 We also have a mobile medical unit. And if you can --
17 the best way I can describe this is almost like an exam unit on
18 wheels.

19 Sometimes it's a truck or an RV type of vehicle where we
20 take out into the communities -- we take these to places that
21 we know veterans are that are experiencing homelessness, and we
22 have our nurse practitioners or physicians and social workers
23 go into the community to serve.

24 Q And then is the staffing for HPACT broken out on page 3 of
25 Exhibit 1214?

1 A It is. And you will see here that only social workers and
2 peers are referenced.

3 I think it's important to note that there are many HPACT
4 positions that are funded through the national homeless office,
5 but don't report to my service.

6 There are physicians, there are psychiatrists,
7 psychologists that all -- nurses that all provide services in
8 HPACT and all of the other services in CERS, but they are not
9 reflected on this org chart.

10 Q So why do they -- are they not reflected on this org
11 chart?

12 A They report to other services. For example, our nurses
13 report to our nursing service, psychologists and psychiatrists
14 report to our mental health service.

15 And that -- so medicine, we have our chief of primary
16 care that oversees our physicians and psychiatrists. Some
17 psychiatrists report to mental health. This is considered a
18 service line structure.

19 Some facilities operate under a care line structure,
20 which CERS used to operate under a care line structure where
21 all of these various disciplines were under the same service.

22 In fact, when I was in Los Angeles in 2019, all of those
23 different disciplines reported up through CERS, and the org
24 chart looked a lot bigger. The decision was made, and this
25 predates me, to structure those positions back to a service

1 line model where the disciplines report directly to their
2 professional practice leads.

3 Q Even though these other professions report to other
4 service lines, are you still responsible for overseeing their
5 delivery of services within CERS?

6 A I am.

7 With a caveat, I'm responsible to ensure that the
8 funding that they -- that we receive for their positions, that
9 they are operating in those positions, and providing care to
10 the veterans.

11 It's also my responsibility to ensure that they are
12 providing care in the way that we endorse and believe in and
13 those Housing First models. Where I see that there are
14 fractures in care, it's my responsibility to advocate for a new
15 approach and look at care differently.

16 So while I don't actually oversee them, my
17 responsibility is to ensure I'm talking with those chiefs of
18 the other service and making sure that they know the
19 complexities of the care and the challenges that we're facing.

20 Q You earlier reference a Grant Per Diem program. Can you
21 tell us what that is?

22 A Sure. So our Grant Per Diem program is a program where
23 not profits usually apply for funding and they respond to a
24 notice of funding available. And they deliver care and they
25 provide transitional housing to veterans with wraparound

1 services.

2 So that program has a few different models.

3 In Los Angeles, we have nearly 600 transitional housing
4 beds, and those can be made up of different models.

5 So, you may have a low demand model, and that is usually
6 when veterans have tried other programs and they are just not
7 finding that a good fit for them. So this provides a very low
8 level of expectations for veterans to come in.

9 For example, if they are struggling with substance abuse
10 issues, there might be a safe room, there might be an amnesty
11 box where, if they have a weapon with them, there is a place to
12 keep that.

13 The goal of transitional housing, obviously, is to move
14 to permanent housing. The timelines are a little bit
15 different. For low demand, it's about six months.

16 We also have service intensive transitional housing,
17 where things like employment and healthcare and your
18 traditional wraparound services are provided while a veteran is
19 on their journey to obtaining permanent housing.

20 We have clinical treatment models, and that is where a
21 veteran might engage in substance abuse treatment or mental
22 health treatment while they are in those transitional housing
23 beds.

24 All of those that I referenced, you know, we look at a
25 goal of 90 -- six months, with 90 days being the goal of a

1 model called Bridge Housing. Bridge Housing model is where
2 either before the person comes into that model, they have a
3 housing intervention identified, so maybe they have a HUD-VASH
4 voucher or maybe they have already started working with a
5 partner, Supportive Services For Veteran Families, called SSVF.

6 That model goal is 90 days of stay. And if a person
7 doesn't have a housing intervention identified when they go
8 into that level of care, within the first two weeks, we expect
9 that we will connect them with someone that can provide that
10 permanent housing opportunity.

11 These are usually congregate settings. And sometimes
12 there is individual rooms in some of these places, but these
13 are scattered throughout our geography that we serve.

14 Q And then CTRS, can you briefly tell us what that is?

15 A Care Treatment and Rehabilitation Service. That program
16 is some -- people refer to it as our tiny shelters. On West
17 Los Angeles VA campus, we have tiny structures on our Great
18 Lawn that sits sort of between San Vicente and Wilshire
19 Boulevard.

20 That is really an emergency shelter. These are
21 individual pallet shelters, and we have a total of 147 of them
22 on our campus. 12 are drop-in, and not really a part of the
23 CTRS program, and 135 of these tiny shelters are part of our
24 CTRS program.

25 We have showers and we have laundry and we have meals

1 services there. We also have a contract from a monitoring
2 company that does wellness checks and is there 24/7. We also
3 have a security contract there and a janitorial contract there
4 at CTRS.

5 THE COURT: I'm sorry. Are these the -- what have
6 been referred to as the "tiny homes" near the parking lot?

7 THE WITNESS: Yes.

8 THE COURT: The parking lot then the grass area.

9 THE WITNESS: Yes, Your Honor.

10 THE COURT: Okay. You have 135 there; is that
11 correct?

12 THE WITNESS: 147 total. And a lot of people call
13 CTRS tiny homes. In our program, we refer to them as "tiny
14 shelters" because we don't consider that a home. It doesn't
15 have bathrooms or kitchens, and we really don't want to see
16 veterans staying in that level of care for a long period of
17 time.

18 THE COURT: You have 147?

19 THE WITNESS: 147, Your Honor.

20 THE COURT: Thank you. Same location?

21 THE WITNESS: It is.

22 THE COURT: Thank you.

23 THE WITNESS: Those 12 are just separated a little
24 bit, because those are drop-in pallets or tiny shelters, and
25 they are not in the other milieu.

1 We also have the ability to serve couples in that we
2 have five tiny shelters that are a little bit larger and serve
3 couples.

4 BY MR. KNAPP:

5 Q And do you see a reference to nurse practitioners?

6 A I do.

7 Q What does that reference refer to?

8 A So we have nurse practitioners, and you will see that is
9 under SP Funding. Those nurses are funded by the homeless
10 office. And our nurse practitioners are responsible for
11 providing care in all of our programs. They are under this
12 structure -- and actually, they are reporting to medicine now
13 because of a recent change.

14 But they -- you know, I want to just make the point that
15 even though these boxes report up to certain deputies, the
16 staff in these boxes serve veterans across a continuum of
17 programs.

18 And so the nurses are would be a good example of that.
19 Our nurse practitioners are prescribers. They may be seeing
20 veterans at CTRS. They may be seeing veterans in the community
21 in Grant Per Diem or HCHV Contract emergency shelter and
22 throughout HPACT maybe on the medical mobile unit.

23 Q So you just referred to HCHV Contract emergency shelter.
24 Can you tell us what that is?

25 A Sure. So HCHV Contract emergency shelter is a program

1 where we work with our partners in the community to understand
2 the need of our community, and then we contract the services
3 that we don't have available out in those specific communities
4 so that we can provide those services to veterans.

5 For example, we're soon to have a solicitation come out
6 because there are some communities that have a lack of
7 emergency shelter and resources for veterans.

8 So we want to make sure we're providing that level of
9 care so that veterans can immediately come off the streets and
10 into shelter.

11 Another component of that program is making sure that
12 veterans are connected to care.

13 I do think it's important to note that in order to be
14 housed in emergency shelter, in both CTRS and contracted
15 residential services, one has to be eligible for medical care
16 through the VA.

17 Q And what does it mean to be "eligible for medical care
18 through the VA"?

19 A So, a person has to have served a certain amount of time
20 in service, have a certain discharge, has to be a good
21 discharge with a certain amount of time.

22 I want to just say that I'm not a benefits expert, but
23 we serve veterans even if they can't get medical care at our
24 service. But for HCHV Contract services and CTRS, they have to
25 be eligible for our medical healthcare.

1 So, that usually means serving a certain period of time,
2 post a service era, and having a good discharge.

3 Sometimes -- that's a little bit different depending on
4 when a veteran has served.

5 So, after 1980, it's a little bit different in terms of
6 lengths of service. And before that, it's a little bit shorter
7 and different as well. A lot shorter actually.

8 Q Looking back at page 1 of Exhibit 1214. Do you see a
9 reference to Virtual Health Resource Center?

10 A I do.

11 Q What is that?

12 A So this is a program I'm really excited about. It's very
13 new. This is a Homeless Virtual Health Resource Center.

14 This is a group of individuals that can assist to
15 provide support to veterans to use their devices.

16 You know, something that may seem simple like learning
17 how to use a smartphone, may be really complex. The VA has a
18 strategy to provide iPads to individuals to receive mental
19 healthcare and certain medical care.

20 So, it might mean helping a veteran understand how to
21 use that tablet. It may be something like helping a veteran to
22 understand how to use their smart TV.

23 You know, one thing that we have recognized as we're
24 developing housing on our campus is that even though that
25 housing is really close to our medical services, sometimes

1 veterans aren't receiving those medical services. Maybe going
2 in clinic is difficult or challenging, or maybe there are
3 barriers. So we noticed that it's important to go into the
4 homes and help people understand how to use their smart TVs
5 because maybe they don't want to make an appointment or
6 participate in treatment because it's at the same time their
7 show is on, so setting up DVR and helping people understand how
8 to use those smart TVs are really important.

9 We have a very small staff right now, and we're getting
10 larger. All of these positions that you see are funded, but we
11 only have three people that are actually acting in those
12 positions.

13 So --

14 THE COURT: The Virtual Health Resource Center?

15 THE WITNESS: Yes.

16 So if you are familiar with, like, a Geek Squad,
17 sometimes that is referenced this way.

18 So not just veterans, but if families have technical
19 issues with their devices, the intent is to help those
20 individuals. And particularly those individuals who are at
21 risk of homelessness or struggling with homelessness so we can
22 get them connected to care.

23 My HealtheVet is another way of communicating with
24 physicians and mental health providers, so getting those
25 accounts established is something that is really important.

1 Because sometimes we will get e-mails and things like that, and
2 we can't always protect privacy, so we want to use My
3 HealtheVet in order for people to communicate one on one, and
4 those individuals help them set those accounts up.

5 They might actually even help them set up accounts with
6 Social Security, places that are resources in the community
7 that can help them get housing. So if they need to fill out
8 online applications, this team helps them get an account set
9 up. And that serves as a really useful tool to help the
10 clinicians and the peers and the social workers that are
11 working in the field with the veterans every day.

12 Q Do you see a reference on page one of Exhibit 1214 to
13 Education and Survey Readiness?

14 A I do.

15 Q What is that?

16 A So, that is a group of individuals who -- there is a
17 variety of positions there.

18 But, essentially, responsible for training, research,
19 making sure that we're following protocol and compliance so
20 that we're -- Joint Commission accreditation, we need to make
21 sure that we're following the rules, CARF accreditation, and --
22 unfortunately, we lost one of those positions.

23 That was a medical center-funded position. That wasn't
24 filled for a while, and we lost that position.

25 But that group specifically makes sure that staff has

1 the training that they need, there our partners have the
2 training they need, and that we're driving what we do based on
3 things that have been proven in the research, and that we're
4 learning from the things we have done that didn't work.

5 Q Do you see a reference to the business office?

6 A I do.

7 Q What is the business office?

8 A So those are the administrative support staff that are
9 helping all of the programs in the organizational chart. From
10 things like making sure they have the supplies they need,
11 making sure that -- when we're recruiting for staff, that they
12 are working with HR and making sure that those people are
13 coming on board and getting things like laptops and phones.
14 Keeping track of our government vehicles. We're assigned about
15 120 government vehicles so that our staff can go out into the
16 community and visit with veterans in their homes and help them
17 get housing in the community.

18 So they are tracking the mileage, the upkeep of the
19 vehicles, making sure that those resources are shared widely,
20 and making sure that things like certain certifications and
21 trainings that staff need to have are up to date and in their
22 files, their competency folders.

23 Q And finally, do you see a reference on page 1 to HUD-VASH?

24 A I do.

25 Q Briefly, can you summarize what HUD-VASH is?

1 A Sure. HUD-VASH is -- it stands for Housing and Urban
2 Development, VA Supportive Housing, and it's a partnership
3 between HUD and the VA.

4 And HUD provides the vouchers, and VA provides the case
5 management.

6 So this is a program where we have -- it says on what
7 we're looking at -- 233 FTE. There are actually 260 funded
8 program positions, but there are also, as I mentioned before,
9 positions reporting to other services throughout our medical
10 center.

11 But HUD-VASH, essentially, is a team-based approach to
12 ensuring that veterans have housing and they have the
13 supportive services that they need to both obtain that housing
14 but also sustain that housing.

15 Q And is the staffing for HUD-VASH within CERS broken out in
16 greater detail on page 4?

17 A It is.

18 Q I just want to help define some of the terms on page 4.

19 So, there are references here to SPA. What is an SPA?

20 A SPA is a service planning area. So throughout LA County,
21 we have eight service planning areas and they are quartered off
22 on a map, if you look at it, depending on their geographic
23 area.

24 So our teams operate under a team-based model, and they
25 also look at geographic areas.

1 And this is helpful to us because in LA, traffic,
2 obviously, is really difficult. So having staff focus on
3 certain areas of LA County, or you will see outlying areas also
4 on the chart, you save time in the car and can focus the staff
5 intention on resources and building landlord relationships in a
6 particular area.

7 So that's what that means when you break that up by
8 service planning areas.

9 THE COURT: I didn't want to interrupt you. I don't
10 understand, and help me with, SPA 5/8, and then go down to
11 SPA 6, and then go over to SPA 1/2, or SPA 3/7. I don't know
12 what the numbers mean after them -- the 4, the 5/8, the 6.
13 What are those? Are those geographical areas?

14 THE WITNESS: Yes, sir.

15 THE COURT: Just a moment. Very simple. So when I
16 look at SPA, the number following would correspond to some
17 geographical area?

18 For instance, SPA 5/8, if I correlated that, would I
19 find a geographical area labeled 5 and a portion of a
20 geographical area labeled 8?

21 THE WITNESS: Correct.

22 THE COURT: Okay. So sometimes we might have the
23 social service worker in the first box in two areas, 5 and 8,
24 geographically, correct?

25 THE WITNESS: Correct.

1 THE COURT: Help me read this. In 6, there, that
2 social worker is within geographical area 6 wherever that is,
3 right?

4 THE WITNESS: Yes.

5 THE COURT: Okay. Thank you. I appreciate that.
6 Thank you very much.

7 BY MR. KNAPP:

8 Q Ms. Hammitt, do you see a reference to aftercare on this
9 page as well?

10 A I do.

11 Q What is aftercare?

12 A Aftercare is -- during the HUD-VASH program, we provide
13 case management based on various stages of acuity, depending on
14 what the veteran needs.

15 Usually when a veteran comes into our program, they are
16 typically -- not always, but typically in intensive stage of
17 case management.

18 We have minimum requirements for when veterans are seen
19 during that stage of case management.

20 For example, for intensive case management. A veteran
21 may be being seen by multiple providers on our team, a few
22 times a week, minimally once a week at least in intensive.

23 That is when someone is working toward getting housed,
24 getting engaged with the housing authority.

25 And then there is stabilization, and that is -- usually

1 veterans are in housing at that point.

2 They have usually been in housing, you know, maybe for a
3 month, but that is not -- you know, it's kind of
4 individualized. So they are being seen less frequently
5 sometimes.

6 Then it transitions into maintenance stage. And, again,
7 the visits correlate to what the needs of the veterans are in
8 their particular situation.

9 Preparation for discharge -- and discharge is our final
10 phase. This predates me a little bit, but what we noticed in
11 Los Angeles is there were a lot of people falling out of
12 housing. So this team specifically focuses on assisting
13 veterans that are -- they have -- maybe they have graduated
14 from HUD-VASH, meaning that they no longer need the case
15 management services, but they still have to do things to make
16 sure that they maintain their housing, like recertification
17 through the public housing authority. Or they may have a
18 situation that comes up where they just really need to connect
19 with case management because something has happened in their
20 life and maybe they need treatment or maybe they, you know, had
21 a loss and they really want some support and connection.

22 This team was developed to make sure that veterans
23 maintain their housing and that they connect them with the
24 resources to ensure that they are doing the recertifications,
25 that they are having the ongoing support that they need

1 throughout the medical center, and reconnecting if they need to
2 do that.

3 THE COURT: Counsel, do you mind if I ask couple a
4 of questions along the way, just to make certain I understand.
5 Would that be okay?

6 MR. KNAPP: Of course, Your Honor.

7 THE COURT: It's not to the merits. It's just so I
8 can read this again tonight and absorb it.

9 I want you to look at page 4. Let's read down
10 together. Let's just take SPA 5/8. I know that those are two
11 geographical areas or portions thereof.

12 I have one supervising social worker. And then if I
13 count, I have got eight social workers, four peer specialists,
14 one social science tech. If I add those together, I think I
15 come out with 14, but in parentheses we have 13. So look at
16 the top. Your FTE is 14, then in parentheses, you have 13. I
17 count 14. What is happening there?

18 THE WITNESS: So that means that those 13 positions
19 are funded by our national Homeless Program Office.

20 THE COURT: So I'm not correlating one worker per --
21 all right. Going down then to aftercare. There, I add up 10,
22 and in parentheses, you have 10.

23 THE WITNESS: That means that all of those positions
24 in that box are funded by our national office.

25 THE COURT: Now, if I took any one of these -- let's

1 take SPA 5/8. You pointed out how important the peer
2 specialists are. Are those peer specialists actually located
3 in an office of some kind in 5 and/or 8, or do they go out to
4 those locations from a centralized location like the West LA
5 center?

6 THE WITNESS: Right. So these peers work in a
7 number of places, but their primary role is to work --

8 THE COURT: I know their role. That's not my
9 question. Where are they physically located?

10 They get up. It's 8 o'clock. Where -- this four
11 peer specialists, are they actually already living in this
12 area? Do you have a office there? Do they come out from a
13 different location and drive?

14 THE WITNESS: Right. So 5/8, most of the
15 individuals in 5/8 are located in West Los Angeles because --

16 THE COURT: Where?

17 THE WITNESS: Usually at the medical center or
18 Inglewood.

19 THE COURT: Okay. Now, just a moment. Where is 5,
20 geographical area 5?

21 THE WITNESS: 5 is West Los Angeles.

22 THE COURT: Where is 8?

23 THE WITNESS: 8 is -- I might have to look at a map.

24 THE COURT: Don't worry.

25 THE WITNESS: I know Inglewood is --

1 THE COURT: Okay. Let's go down to 6 for a second.
2 You have four peer specialists again. Where is 6? I don't
3 care if you make a mistake. If you don't know, don't worry. I
4 know you know it from a chart. I'm not concerned.

5 Where is 6?

6 THE WITNESS: I am actually not --

7 THE COURT: Don't worry about it.

8 THE WITNESS: I think 6 might be San Fernando
9 Valley.

10 THE COURT: Let me take one more here. All I'm
11 asking is that -- I will give you an analogy. The City of Los
12 Angeles for instance has LAHSA, but the complaint by the
13 individual city council members for years have been, frankly,
14 that LAHSA doesn't get out of what I call the Taj Mahal -- this
15 large building here in Los Angeles.

16 So what happens is your individual council person in the
17 valley complains, look, on paper, LAHSA is supposed to have
18 workers here, but by the time they drive out here and hand out
19 two bottles of water and drive back -- and I'm being facetious
20 now, but these are council peoples' words to me -- they are
21 worthless.

22 All I'm trying to find out is how accessible -- I know
23 on paper they are here.

24 THE WITNESS: Right.

25 THE COURT: How accessible are they to the

1 geographical SPAs? And are they driving to Lancaster out of
2 the Downtown center where four hours are spent on the road?
3 Help me with that, if you can.

4 THE WITNESS: Sure. So our HUD-VASH groups have
5 offices in the SPAs that they work.

6 THE COURT: Do they have it in 6?

7 THE WITNESS: If that is San Fernando, yes.

8 THE COURT: I don't know. Okay.

9 THE WITNESS: So that would be Sepulveda.

10 THE COURT: So, would 6 cover the whole San Fernando
11 Valley or a portion of it?

12 THE WITNESS: So it's the big --

13 THE COURT: And trust me, the lawsuit doesn't turn
14 on this.

15 THE WITNESS: The big part of it. But the idea is
16 that all of the peers.

17 THE COURT: I know the idea. That's not what I'm
18 asking. On paper it looks great. Don't get me wrong. I'm
19 trying to get a feeling for how large the area is, and how much
20 take it takes our peers to get to the area --

21 THE WITNESS: From their location.

22 THE COURT: -- from where they are coming from so we
23 have maximum time on-site.

24 THE WITNESS: Okay.

25 THE COURT: Now, answer that later on. You don't

1 have to answer that now. And I don't know that -- how even
2 critical that is to me right now. But I'm trying to get an
3 idea from at least the city and county's experience with LAHSA,
4 how they are operating with the VA.

5 Come back to that. Talk to your counsel later
6 on.

7 THE WITNESS: Yeah. If I could --

8 THE COURT: Don't do it now. Talk to him later on.
9 I'm not holding you to that.

10 All right. Your next question.

11 MR. KNAPP: And, Your Honor, I think we're going to
12 work on getting an exhibit of the SPA.

13 THE COURT: And by the way, it may not be critical.
14 I'm just trying to find out what our downtime is, how long it
15 takes to get there, how long we're on-site. I don't think I
16 will be writing too much about that, so just curious. Only
17 because I have heard so many complaints in other area from city
18 council people who feel that LAHSA is not on-site, and they
19 keep asking why don't you just station two LAHSA people in our
20 council district offices and have them report directly to work
21 at 8 o'clock rather than going to Downtown LA, filtering out to
22 the valley for two or three hours in traffic, et cetera.

23 Okay. Counsel.

24 BY MR. KNAPP:

25 Q And, Ms. Hammitt, do you have individuals reflected on

1 this org chart within the HUD-VASH team stationed out in the
2 SPAs?

3 A We do. And we also have been employing telework and
4 working with individuals closer to where they live so that they
5 can actually start their day in their home via telework. And
6 we learned a lot through the pandemic, that people could be
7 successful with doing their documentation and things at home
8 and then going right out to see veterans in the field.

9 And, so, we shift people around, you know, if they ask
10 to be reassigned because they want to be working closer to
11 their homes, but we also recognize the importance of them
12 working in a location that is close to them being able to
13 provide care.

14 For example, SPA 4, that is downtown. And so all of our
15 staff might have an office space just in case they need to make
16 copies or they need to send something or scan something to
17 public housing authorities, but they also work from home so
18 that they can go right into the community and serve the
19 veterans because we don't want them to lose time spending in
20 the car.

21 Q And let's put Exhibit 1214 aside for just one moment
22 because earlier you were talking about --

23 THE COURT: That's okay, Counsel. I'm straining my
24 eyes. I'm joking with you.

25 MR. KNAPP: We're going to come back to it briefly,

1 but I'm going to move us to a different thing for just a
2 moment.

3 BY MR. KNAPP:

4 Q Ms. Hammitt, do you recall discussing the stages of case
5 management earlier?

6 A I do.

7 THE COURT: Just a moment. These are the SPAs that
8 you are showing me right now? I'm sorry, Counsel. Thank you.

9 MR. KNAPP: Yes, Your Honor. And we will get this
10 in as an exhibit later in the direct.

11 THE COURT: Okay. Do you want to mark this as an
12 exhibit eventually?

13 MR. KNAPP: And, Your Honor, this is from Exhibit 1.
14 I believe it's page 26.

15 THE COURT: Okay. Just designate that so I know.
16 Page 26 of Exhibit 1. If someone could pull that for me
17 eventually, especially if we continue on in this area.

18 MR. DU: Your Honor, I want to make sure that the
19 record is clear. I think it's Exhibit 1, page 54 is what it is
20 identified as.

21 THE COURT: If somebody would take it out. If we
22 continue on this area, if we come back to it, as a witness,
23 Ms. Hammitt will have that.

24 MR. ROSENBERG: Page 26 of the actual exhibit.

25 THE COURT: By the way, for my record, I received

1 Exhibit 1, I think, in total. But you can refer back to the
2 pages. So later on, when you check with Karlen, unless you
3 tell me differently, although you may refer to a page, when you
4 ask if Exhibit 1 is received, I don't want to hear argument
5 later on, Judge, it was only page 54. I'm assuming it's all
6 coming in. Thank you.

7 MR. KNAPP: I appreciate that, Your Honor.

8 BY MR. KNAPP:

9 Q Ms. Hammitt, do you have a GLA standard operating
10 procedures around the stages of case management?

11 A I do.

12 Q And we're going to bring up Exhibit 1221 now.

13 THE COURT: By the way, you are not here to testify
14 as an expert or in your capacity, I assume, about the
15 HUD-VASH -- I think it has 233 out of the 377 FTEs, are you?
16 In other words, are you an expert in what I'm going to call
17 Box 3? I think it's Box 3. Yeah. Box 3. You are not an
18 expert. You are not here to testify about this, are you?

19 THE WITNESS: I oversee the HUD-VASH program, so I'm
20 not sure I'm an expert, but I think I know the program.

21 MR. KNAPP: Yes, Your Honor. Ms. Hammitt will be
22 testifying about that box and the details of how the program
23 runs, but she's not serving in a role as an expert.

24 THE COURT: And we just touched lightly on that,
25 which has the majority of your FTEs in it.

1 THE WITNESS: Yeah.

2 THE COURT: Okay.

3 MR. KNAPP: Yeah. And we're going to come back to
4 it.

5 BY MR. KNAPP:

6 Q But, Ms. Hammitt, do you have Exhibit 1221 in front of you
7 now?

8 A I do.

9 Q Do you recognize this document?

10 A I do.

11 Q And what is this document?

12 A So this document is the standard operating procedures. So
13 it helps our HUD-VASH staff understand the expectations around
14 them carrying out visits and sort of defines the partnership
15 and the purpose of the program.

16 So it's not the directive, but it's a guide for our
17 staff.

18 This is sort of a living, breathing document, if you
19 will. And so it's intended to be updated. In fact, we're
20 updating this now.

21 MR. KNAPP: Your Honor, I would move to admit
22 Exhibit 1221 into evidence.

23 THE COURT: Received.

24 (Exhibit 1221 received into evidence.)

25 BY MR. KNAPP:

1 Q Ms. Hammitt, could you turn back to Exhibit 1214.

2 A Yes.

3 Q Do you have it in front of you now?

4 A I do.

5 Q On page 4 of Exhibit 1214, do you see a reference to PBV
6 in the bottom left side of that page?

7 A I do.

8 Q What does PBV refer to?

9 A PBV refers to Project Based Vouchers. And, so, those are
10 vouchers that are attached to a specific unit in a building.

11 So, usually, these are buildings that several veterans
12 live in and are participating in the HUD-VASH program. And so,
13 for example, on our campus, we have buildings that use PBV
14 vouchers, which are PBVs, project based vouchers.

15 So if a veteran leaves that building, the voucher stays
16 with the building. The veteran doesn't take it with them.

17 THE COURT: Just a moment. Would you show me what
18 page you are on?

19 Thank you, Counsel. Please continue.

20 BY MR. KNAPP:

21 Q And what do the numbers after PBV refer to?

22 A Not to be confused by service planning areas, which are
23 those geographic areas on the map, which I should know, but --
24 I have lived here for a few years. I'm still learning.

25 The 1, 2, and 3, under PBV, is just breaking that out

1 into various teams.

2 Q Do those teams work with specific buildings?

3 A They do.

4 Q And can those buildings be located throughout the
5 Greater -- the Los Angeles community?

6 A Yes. In fact, we have about 60 buildings that are
7 operational right now across all of the counties that we serve.

8 THE COURT: Let me be sure of this. Therefore, when
9 I see a number, for instance, of 12, that is not referring to
10 any geographical area? Or 10? What is that number referring
11 to.

12 So, for instance, go down to PB1, what does one mean?

13 THE WITNESS: So that's just identifying, under PB1,
14 just one team of staff.

15 THE COURT: Okay. Just one. So it's not a
16 building; it's not a geographical area.

17 THE WITNESS: No.

18 THE COURT: Now go down to -- just so I'm certain --
19 seven social workers. And you'll see GS0185. What does the
20 GS0185 stand for?

21 THE WITNESS: Sure. So that is the general schedule
22 employee, that GS stands for. The 0185 is an occupational
23 series number for social workers.

24 THE COURT: Okay. There's a dash 12. What is that?
25 Is that the level?

1 THE WITNESS: 12 is the grade level.

2 THE COURT: Like a GSA level?

3 THE WITNESS: Right.

4 THE COURT: Okay. Then, finally, what does the FS
5 stand for?

6 THE WITNESS: That is a functional statement.

7 THE COURT: Okay. All right. Counsel, I'm sorry.
8 Thank you very much. I appreciate it.

9 BY MR. KNAPP:

10 Q And what is a functional statement?

11 A You will also see PD underneath. So we have -- depending
12 on -- like, peer specialists are Title 5 positions. They have
13 position descriptions, but clinicians have functional
14 statements. So, it's essentially a job description.

15 THE COURT: So I don't have to worry about it being
16 a building, an SPA. It's just a designation of what the
17 employee's GSA position is?

18 THE WITNESS: Correct.

19 THE COURT: Thank you.

20 THE WITNESS: And these groups --

21 THE COURT: That's fine.

22 THE WITNESS: Okay.

23 THE COURT: Counsel, your question.

24 BY MR. KNAPP:

25 Q And moving to the right-hand side of the page, do you see

1 a reference to intake team in the middle portion --

2 A I do.

3 Q -- of the right-hand side?

4 A I do.

5 Q What is an intake team?

6 A So the intake team was formed to really work with veterans
7 on the front end of trying to get their vouchers.

8 So, bringing them in and helping them understand the
9 HUD-VASH program, helping them fill out applications. So those
10 intake team members may be serving on geographic areas within a
11 SPA, but this box delineates that they report up to a
12 supervisor that supervises the work of all of the intake staff.
13 So they may come in for group vouchering sessions. They may
14 come in for application support.

15 THE COURT: And are all of these references to
16 project based, or do they include tenant based?

17 THE WITNESS: They include tenant based. So the
18 aftercare team, the intake team, they all serve in project
19 based -- they provide project-based support and tenant-based
20 support.

21 THE COURT: Okay.

22 BY MR. KNAPP:

23 Q And beneath that, do you see a reference to VEN/SB on
24 page 4 of Exhibit 1214?

25 A I do.

1 Q What does VEN/SB refer to?

2 A That stands for Ventura and Santa Barbara.

3 Q So does this indicate that the individuals in this box and
4 reporting line work in Ventura and Santa Barbara?

5 A They do. In addition to some nurses that aren't reflected
6 here and some voc rehab specialists.

7 THE COURT: Once again, the same question to be
8 certain. Does that mean that they are actually on location at
9 8 o'clock in the morning in Ventura and/or Santa Barbara, or
10 are they driving from a centralized location?

11 THE WITNESS: That's correct, Your Honor. They're
12 located -- their office or duty station is either in their home
13 or at an office in Ventura or Santa Barbara.

14 THE COURT: Thank you very much.

15 BY MR. KNAPP:

16 Q And to the right of that, do you see a box with the term
17 SLO/BAK?

18 A I do.

19 Q What does SLO/BAK refer to?

20 A That is San Luis Obispo and Bakersfield.

21 Q And, again, just for the Court's benefit, are these
22 individuals stationed in San Luis Obispo or Bakersfield?

23 A That's correct. They are either working in their home in
24 that area, doing some telework, but there is also an identified
25 space in both -- in that area where they can go in if they need

1 to make copies and things like that.

2 Q And then moving up to the top of the page.

3 THE COURT: If you have one motor vehicle -- let's
4 say for Ventura. Look down for just a moment.

5 You see Ventura/Santa Barbara?

6 THE WITNESS: Yes.

7 THE COURT: Okay. Look down. And you have one
8 motor vehicle?

9 THE WITNESS: Uh-huh.

10 THE COURT: How do you distribute your peer
11 specialists, which you have three, and there was one motor
12 vehicle. Do you need more resources out there?

13 THE WITNESS: So that's a motor vehicle operator.
14 And so that position is a person that focuses on helping to
15 provide transportation but also servicing the vehicles.

16 THE COURT: How do we get our peer specialists out
17 to the scene where a veteran might be on a corner, you know,
18 babbling or needing help?

19 THE WITNESS: Sure. So we have vehicles that are
20 assigned to all of these areas.

21 THE COURT: Okay. So I don't match the operator
22 with the number of vehicles you have?

23 THE WITNESS: No.

24 THE COURT: Thank you. I'm sorry. Counsel.

25 BY MR. KNAPP:

1 Q And, Ms. Hammitt, do you recall testifying earlier about
2 the number of vehicles that you have available within CERS?

3 A I do.

4 Q What is that number?

5 A It's approximately 120. And then those are distributed to
6 various areas so that staff can pick them up in the area that
7 they work and take that to go do their job.

8 Q Thank you.

9 Moving up to the top of page 4 of Exhibit 1214. Do you
10 see a reference to contract liaisons?

11 A I do.

12 Q What is a contract liaison?

13 A These are social workers that work in the HUD-VASH
14 program, and they oversee contractors. So we have about 200
15 contracted HUD-VASH employees. They will not be reflected on
16 this org chart, but these individuals, their main
17 responsibility is working with those contractors. We see those
18 contractors as part of our team, but we also need to monitor
19 that they are doing what they say they are supposed to do as a
20 part of their contract.

21 And so these social workers will meet with them, they
22 will huddle with them, just like our other teams, and make sure
23 that they are providing services as written in their contracts.

24 Q And just to be clear, these are individuals who are not VA
25 employees but are paid by VA to provide HUD-VASH services? The

1 people who are being served by contract liaisons?

2 A Correct.

3 Q All right. So we can move away from Exhibit 1214.

4 But we're now going to bring up Exhibit 1215.

5 MR. KNAPP: Your Honor, there is going to be some
6 personally identifying information about various employees on
7 this document. So with the Court's permission, we will just
8 use the physical copies with the witness and with the Court but
9 not put it on the public screen.

10 THE COURT: Okay.

11 THE WITNESS: Your Honor, I'm so sorry. I forgot my
12 glasses in my bag.

13 THE COURT: Why don't we take a recess anyway. You
14 have been on the stand a long time. Why don't we take 15 or
15 20 minutes right here, Counsel, and get your glasses and all of
16 you folks use the restroom. We will see you in about 15
17 minutes.

18 MR. KNAPP: Thank you, Your Honor.

19 (Recess.)

20 THE COURT: Then we're back in session and all
21 counsel are present, the parties. And if you would be kind
22 enough to retake the witness stand, please.

23 All right. Counsel, you can continue your direct
24 examination.

25 BY MR. KNAPP:

1 Q Ms. Hammitt, do you have what has been labeled as
2 Exhibit 1215 in front of you?

3 A I do.

4 Q Do you recognize this document?

5 A I do.

6 Q What is it?

7 A This is what we call our PDL, our position description
8 listing. So that org chart that was visible previously, every
9 person is identified by name on this chart and what position
10 they hold.

11 Q Just so the record is clear, I see throughout the chart a
12 number of blue highlighted lines. Do you see those as well?

13 A I do.

14 Q And what do the numbers in those highlighted lines
15 reflect? If you can see them.

16 A Those numbers reflect the total number of full-time
17 employees in each of those areas.

18 Q And so that will correspond to the FTEs listed on Exhibit
19 1214 that we have been discussing this morning, correct?

20 A Yes.

21 Q Do you see a column on Exhibit 1215 titled funding?

22 A I do.

23 Q And beneath that, do you see the term GP?

24 A Yes.

25 Q What does that term indicate?

1 A General purpose. And the meaning behind that is that the
2 VA Greater Los Angeles Healthcare System funds that position.

3 Q And do you also see a little further down the term SP in
4 that column?

5 A I do.

6 Q What does that refer to?

7 A Specific purpose funding. And that refers to positions
8 that are funded by our national Homeless Program Office.

9 MR. KNAPP: Your Honor, I would move that
10 Exhibit 1215 be admitted into evidence.

11 THE COURT: Received.

12 (Exhibit 1215 received into evidence.)

13 BY MR. KNAPP:

14 Q Ms. Hammitt, is CERS fully staffed at this time?

15 A We are not.

16 Q To your estimation, what is the current staffing level
17 within CERS?

18 A So in HUD-VASH -- we're approximately in the whole service
19 at about 87, 88 percent staffed.

20 That is a combination.

21 THE COURT: In the whole service nationwide or
22 Southern California region?

23 THE WITNESS: Just at VA Greater Los Angeles
24 Healthcare System.

25 THE COURT: Okay. Greater Los Angeles Healthcare,

1 87 percent?

2 THE WITNESS: Yes. That's probably a close
3 estimation of where we are right now. With HUD-VASH
4 specifically, I know that in order to get to 90 percent
5 staffing, we need ten additional staff members to be hired to
6 be able to get to that 90 percent.

7 THE COURT: Now, is this for the programs that you
8 supervise or -- in other words, I don't know what those ten are
9 needed --

10 THE WITNESS: Right. So those ten positions are
11 specifically in HUD-VASH. And HUD-VASH is a program that
12 reports up through me.

13 THE COURT: So it's in HUD-VASH?

14 THE WITNESS: Correct.

15 THE COURT: Ten more positions in HUD-VASH to get to
16 90 percent?

17 THE WITNESS: Correct.

18 BY MR. KNAPP:

19 Q And does your estimation of 87 percent staffing across all
20 of CERS' programs, does that account for the number of
21 contractors that you have working in those programs?

22 A It does not.

23 Q Ms. Hammitt, we have discussed a little bit this morning
24 that there are staffing working within CERS programs that may
25 report to other service lines such as medicine. Do you have an

1 estimate of how many doctors work within CERS programs but are
2 not reflected in CERS' staffing org chart?

3 A So physicians -- I have an estimate of all of the
4 positions. We have approximately 68 positions in various
5 disciplines. I believe that ten of those are physicians, but I
6 may not be accurate without seeing the chart.

7 But those 68 positions are a combination of nurses.
8 They are also a combination of psychologists, psychiatrists
9 physicians. There are individuals that just provide medical
10 services, physicians that just provide medical services, and
11 physicians that provide psychiatric services, and the nurses.

12 We also have some vocational rehabilitation specialists
13 that report to another service, mental health. They are
14 responsible for working, providing services for employment
15 readiness and connections to employers.

16 We also have administrative staff. And these
17 individuals are medical support assistants. And so you may see
18 them in our HPACT clinic when someone comes in to receive
19 service. They may help with establishing eligibility for care.

20 So those 68, roughly, report to other services.

21 THE COURT: Just a moment. Karlen, do you have 1214
22 by any chance?

23 Please continue, Counsel. Thank you.

24 BY MR. KNAPP:

25 Q And, Ms. Hammitt, do you have an estimate of the number of

1 contracted staff across CERS programs?

2 A As of last -- as of a couple of days ago, it was nearly
3 200. About 195.

4 And that is just for HUD-VASH. I just want to make
5 sure. That total does not capture our HCHV contracted
6 residential services. I don't have a count of those. I have a
7 number of beds that we contract for but not the employees in
8 that program. So the 195, 200 are specifically contractors
9 that were providing HUD-VASH case management.

10 Q And do you have an estimate of the number of peer
11 specialists that are employed across CERS programs?

12 A About 65 that are employed throughout CERS. And there are
13 a total of about 80 across our healthcare service. So some of
14 the peers serve in a variety of other programs, and they don't
15 report up through my service. But they are still supporting
16 veterans experiencing homelessness.

17 Q And are some of the contractors that you work with in
18 HUD-VASH, are those also peers?

19 A They are.

20 Q Is one of these peers Rob Reynolds?

21 A So Rob is not a peer that works in HUD-VASH. He is an
22 employee but not in that contracted number that I gave you.

23 Q What is Rob Reynolds' role in his engagement with CERS?

24 A Rob's role is much like a consultant for CERS.

25 He works part of his time serving individuals that we

1 work with. And it seems like a peer, but that is not his
2 title.

3 He helps them achieve their housing. He helps them with
4 connections to other programs within our service. He connects
5 with our team and talks with us about things like challenges
6 that veterans face and helps us problem solve when we can do
7 things better.

8 Q And are you familiar with how Rob Reynolds came into that
9 position?

10 A Not specifically. I remember my boss telling me that we
11 had an opportunity to work with Rob. And I knew of him just as
12 in his advocacy role and that work. And so I learned that he
13 would be kind of part of our One Team to make sure that
14 veterans had a place to call home.

15 Q So you just got into where I want to go next.

16 What is One Team?

17 A One Team is -- it's be so incredibly changing for our
18 system.

19 One Team means that -- VA can't do it alone, and we need
20 all of our partners. We need everyone in our system coming
21 together and creating an effective and efficient way, systems,
22 to end homelessness.

23 THE COURT: So is it a concept, or do I have to find
24 this on an org chart?

25 THE WITNESS: So they aren't our employees. You

1 won't find it on an org chart. And I wouldn't say it's a
2 concept. I would say it's something that we have deployed
3 and -- particularly, over the past year, we have created a
4 leadership committee, and we have created policies and
5 procedures in our system.

6 And the reason we're doing that is because, for example,
7 in the community that I came from, in Cincinnati, we worked
8 with several different continuums of care for the homelessness,
9 like LAHSA here.

10 And in our community, that group took the lead role in
11 convening work groups and leadership committees and veteran
12 work groups. We didn't have that in our community. And so One
13 Team is about bringing all of those people together at the
14 table.

15 One thing I have learned throughout my career is that VA
16 can't do it alone, but, also, we can't be making the rule for
17 our system without understanding the barriers and the obstacles
18 that others face.

19 And so bringing up more seats to the table and bringing
20 our partners from the county, the city, peers that work in the
21 community, and peers that work in VA, and having individuals
22 serve as leaders, having people with lived experience come
23 together.

24 And we do that with frequency. And we have a committee,
25 a One Team committee.

1 THE COURT: So you are not hiring people for One
2 Team; you are bringing different entities together?

3 THE WITNESS: Correct.

4 THE COURT: Thank you. Counsel.

5 BY MR. KNAPP:

6 Q And is the idea to coordinate the efforts of all of those
7 different entities in some way?

8 A It is. We have found that we're duplicating services
9 across the area that we serve.

10 And when we bring people together and we're transparent
11 about what we're doing, what we've found is that we can
12 accelerate housing placements for veterans.

13 Q When you say that you have found that you can accelerate
14 housing placements for veterans, what do you mean by that?

15 A So if we look at the number of permanent housing
16 placements -- so that means an independent apartment -- either
17 using a voucher or something else, a subsidy through SSVF,
18 rapid rehousing, maybe a voucher through Department of Health
19 Services -- we found that since we started our One Team
20 leadership committee and One Team approach to doing business,
21 our housing placements increased by 38 percent.

22 And so we get together as a community, and we talk about
23 our monthly goals. And we talk about how important it is to
24 work with one another. And we have developed a system whereby
25 we are all coming to the table and using our quality by-name

1 list to case conference every veteran that we have identified
2 is experiencing homeless and putting them on a pathway to
3 housing.

4 Q When did you start implementing this One Team approach?

5 A So my understanding is that this work was in development
6 before I got to Greater Los Angeles. But we had our first One
7 Team convening with leaders and frontline staff across our
8 system in June of 2023.

9 So, shortly after I started in this position, we had our
10 first convening. And about 250 partners from across our
11 regions that work for LA in some way, shape, or form with the
12 homeless population came together.

13 We developed a tri-chair leadership structure. In my
14 experience as a leader working in homeless programs, it's so
15 important that I am not -- I am not reinforcing that VA call
16 the shots for how we do business.

17 We want our partners to have a voice at the table. We
18 want to hear from them.

19 So myself, I'm a VA employee, of course; Jim Zenner who
20 is the executive director at LA County Military and Veteran
21 Affairs; and Chris Gilrath who is a program manager for SSVF.

22 THE COURT: What is that?

23 THE WITNESS: Supportive Services for Veteran
24 Families. So he -- that's a program that helps veterans and
25 their families either prevent homelessness or end homelessness.

1 THE COURT: I want you to go back because it's too
2 quick. We're not picking this up. I want to hear the first
3 name who you mentioned was the executive director of LA County
4 Military and Veteran Affairs.

5 THE WITNESS: James Zenner.

6 THE COURT: Spell his last name, please.

7 THE WITNESS: Z-E-N-N-E-R.

8 THE COURT: All right. The name of the military --
9 you will have to state that again. We didn't get it.

10 THE WITNESS: Jim Zenner or James Zenner. He's the
11 executive director of LA County Military and Veteran Affairs.

12 THE COURT: And Chris?

13 THE WITNESS: Chris Gilrath, G-I-L-R-A-T-H. Chris
14 Gilrath is --

15 THE COURT: Just a moment.

16 What organization again?

17 THE WITNESS: Salvation Army.

18 THE COURT: Salvation Army?

19 THE WITNESS: That's correct.

20 THE COURT: All right. Please continue, counsel.

21 BY MR. KNAPP:

22 Q And when you say that this is a tri-chair structure, what
23 does that mean?

24 A So, that means Jim and Chris and I lead this One Team
25 leadership committee, and the three of us meet together, our

1 one team leadership committee -- I will try to slow down. I
2 get really excited about this because we have seen some great
3 work.

4 Our leadership committee comes together every week, and
5 we have work groups where we have work group chairs, and we
6 strategically form these work groups with a VA employee and a
7 community partner.

8 For example, we have a data and performance work group.
9 And that work group really looks at all of our data, looks at
10 our by-name list, and looks at trends and what we're seeing in
11 our system.

12 We have an access and triage group, and that is chaired
13 again by a VA employee and a community partner. And that looks
14 like how do we ensure that we have access points in the area
15 that we serve so that individuals can quickly be accessed and
16 triaged to the programs that meet their needs.

17 We have something called a by-name list refinement
18 group, and that is chaired again by a VA staff and a community
19 partner.

20 And we have a list of every veteran experiencing
21 homelessness that we have identified in our community. That
22 work group ensures that policies and procedures are around that
23 by-name list so that people can quickly be connected to someone
24 to help them on their pathway to housing.

25 We also have a work group called HUD-VASH, SSVF --

1 that's Supportive Services for Veteran Families --
2 collaboration. So that work group is a collaborative work
3 group chaired again by a non-VA staff, an SS grantee, and a VA
4 staff member who get together with all of their work group
5 members and ensure that our policies and procedures are being
6 developed. And we needed to do this as a community because
7 there wasn't something in place in our community in the veteran
8 space.

9 And we also have a racial equity work group that is
10 deploying, and we have a training and education work group,
11 again, chaired by a VA staff and a non-VA staff, and really
12 focusing on things, like for racial equity, ensuring our
13 policies and procedures aren't screening people out. And for
14 training and education -- we recognize that the VA is a really
15 big place, and it's complex, and so we want to train all of our
16 partners on how to access services so they can help the
17 veterans that they serve understand how to utilize services.

18 We also know that some people might not know about
19 Housing First, and so we want to help them understand those
20 things.

21 When we have a change in our system, our training and
22 education committee rolls it out, not to just VA staff, but our
23 entire system and offers opportunities for learning and growth
24 there.

25 So we allow those working in the field to identify the

1 things that they need training on, and that group helps with
2 that.

3 Q So you have referred several times to a leadership
4 committee. What is the size of that committee?

5 A So, it can -- it can be anywhere -- on the high end, I
6 have seen almost 90 people in our meetings -- and it's
7 virtual -- and as little as 60. But anywhere around like 57 --
8 57 to 90, I have seen, because we see the participant list on
9 Teams.

10 And every week on Fridays, we come together. We're
11 changing things a little bit in that the tri-chairs are going
12 to meet with work group chairs because we have noticed that we
13 want to get realtime updates from our work groups and we want
14 to drive the progress that we're seeing regarding permanent
15 housing placements.

16 Usually, about once a quarter, we meet in person.

17 The last convening that we had -- which doesn't just
18 include the leaders but also includes frontline staff that are
19 serving the veterans -- that was hosted at Bob Hope Patriotic
20 Hall here Downtown.

21 But our goal is to meet weekly and keep going
22 with the strategies that we have put in place to ensure we end
23 veteran homelessness.

24 Q I believe earlier you referenced that you are doing case
25 conferencing as part of One Team. What is case conferencing?

1 A Case conferencing happens in each SPA. So we have a
2 by-name list specific to each area that the veterans are
3 experiencing homelessness, and we have facilitators of case
4 conferencing. Essentially, they are coming together, VA and
5 non-VA -- and usually it's virtually, but sometimes our groups
6 meet in person.

7 If you saw -- if you could see everyone in person,
8 imagine them around a table, and everyone who has access to a
9 different computer system has their computer system up.

10 We recognize that we can't always see what community
11 providers are documenting, so we're pulling up our VA
12 databases, they are pulling up their databases. And we're
13 sharing information about who is working with each veteran, and
14 who will be ensuring that they are on a pathway for housing.

15 We also -- during those meetings, there are people that
16 come to the table and say we have capacity for ten veterans
17 this week in HUD-VASH. And that might just be one specific
18 SPA.

19 So those cases that we're looking at, attached to that
20 line item is a veteran, and so that veteran will then be
21 referred to a specific agency, and it's that agency's
22 responsibility to reach out to that veteran and support them on
23 their journey to housing.

24 So, I hope I explained that. It is really transforming
25 our system. When you understand who is experiencing

1 homeless and you are coming together as a team to move
2 individuals quickly into housing and holding each other
3 accountable for the work that we're doing.

4 You know, this week if I sit in a case conferencing
5 meeting and I say I'm going to reach out to a veteran, the next
6 week I better come to that meeting and I better say that I
7 either tried and I was unsuccessful or I did reach out and here
8 is our plan for moving forward to ensure housing.

9 Q You referenced that individuals as part of one team may
10 have access to different -- different computer systems.

11 Why is that? Why can't they all be centralized?

12 A VA system is specific to those that are badged employees
13 and have gone through a credentialing process and have
14 authorization to look at VA databases.

15 So not all of our partners are VA employees.

16 And so, they enter into a different system. And usually
17 that system is HMIS, which is Homeless Management Information
18 System, and those systems don't talk to one another.

19 My job would be much easier if they did, and I hope some
20 day there can be a solution in place, a software solution where
21 that happens.

22 But we know that one system may not be capturing the
23 work that is happening with a certain program with that
24 veteran, particularly the VA can't see that, and those
25 community partners can't see what the VA is doing in our

1 database system.

2 So we have to come together regularly and share that
3 information so we're not duplicating our efforts.

4 Q Earlier you mentioned SSVF. Can you state again for us
5 what SSVF refers to?

6 A Supportive Services for Veteran Families.

7 Q And is that a VA program?

8 A So, it is funded by VA. VA employees don't work in SSVF.
9 But yes, it's a VA program. And much like Grant Per Diem and
10 Contracts, people apply for a notice of funding availability,
11 and so we typically have nonprofits that are serving as
12 grantees that are working with veterans.

13 So, we don't necessarily -- like, my team in CERS can't
14 see the work specifically that SSVF is doing, but VA does
15 capture that work because SSVF enters their information in
16 HMIS, and then there is a process by which we gather that
17 information and can share it.

18 Q And finally, you have talked about the size of the
19 leadership committee, but can you give the Court a sense of who
20 is in attendance, what organizations are in attendance at these
21 meetings?

22 A So, these are VA employees in every program that we have,
23 from employment programs, to HUD-VASH, to Grant Per Diem, to
24 Healthcare for Homeless Veterans, our coordinated entry
25 specialists, but also community partners that serve as grantees

1 for SSVF.

2 Grant Per Diem, emergency shelters, we actually had -- a
3 couple of weeks ago, we had someone from law enforcement that
4 joined our leadership team, Captain Deedrick, and we have LAHSA
5 at the table that comes and joins our meetings. We sometimes
6 have representatives that pop in from our national office, like
7 program regional coordinators that come in and observe.

8 We have peers. We have the Department of Mental Health
9 represented. We have the PHAs, public housing authorities are
10 at the table at these meetings that we work with.

11 I don't think I'm missing anyone. But really, the
12 intent is, any leader working in a veteran space, in the VA and
13 outside of the VA, comes together and is a part of this group.

14 Q And now we're going to bring up Exhibit 1219.

15 Ms. Hammitt, do you have Exhibit 1219 in front of you
16 now?

17 A I do.

18 Q Do you recognize this document?

19 A I do.

20 Q What is Exhibit 1219?

21 A This is a One Team approach implementation toolkit.

22 And I'm really proud to say that this was developed
23 based on the work that has been happening in Los Angeles and
24 our One Team approach.

25 And so, this toolkit is to be used by communities across

1 the country if they are developing a One Team approach, which
2 is what is the recommendation out of the Homeless Program
3 Office, and certainly has shown to be successful.

4 So this toolkit walks through what it would take to
5 implement One Team at one's own area.

6 Q So does this toolkit reflect the efforts that have gone on
7 here in Los Angeles to implement the One Team approach?

8 A Yes.

9 In fact, the technical assistance and support team that
10 was instrumental in developing One Team alongside me in LA
11 developed this toolkit largely based on the work that was
12 happening in LA.

13 MR. KNAPP: Your Honor, I would move to admit
14 Exhibit 1219 into evidence.

15 THE COURT: Received.

16 (Exhibit 1219 received into evidence.)

17 BY MR. KNAPP:

18 Q Moving to a slightly different topic, Ms. Hammitt. Are
19 you familiar with something called the VeteranConnect pilot?

20 A I am.

21 Q What is that?

22 A The VeteranConnect pilot is a project out of University of
23 Southern California. It's a project that -- my understanding
24 is the intent is to really look at how we're identifying
25 veterans that are experiencing homelessness.

1 There have been some questions about the point-in-time
2 count, and if that is reliable information.

3 If I can just reference my background at the Cincinnati
4 VA.

5 When we would go out and do a point-in-time count, which
6 is a PIT count, we would work with our partners and we would
7 physically go out into the community.

8 The difference on how the PIT count is conducted here in
9 LA versus how we used to do it in the place that I came from is
10 that we would engage with veterans and those that weren't
11 veterans experiencing homelessness.

12 And for example, we would go out in teams and we would
13 talk to people. We would always ask their veteran status, and
14 we would arrange for transportation, and we would arrange for
15 sheltering the day of the PIT count.

16 And we would do a lot of work moving up to the PIT count
17 to ensure that we understood where people were staying, where
18 our teams were going to disseminate. And if people were
19 willing to go indoors and take shelter, we would actually offer
20 them transportation. Specifically for the veterans, we would
21 offer them transportation to our contracted emergency shelters
22 or our transitional housing, and at times, some community
23 emergency shelters that weren't VA funded.

24 And that was -- when I first came to LA, I was -- I
25 wasn't expecting when I went out to my first PIT count that we

1 would just be counting people. We would just have an app in
2 our hand, and anyone that we saw -- we would say if it was an
3 encampment, we would tell our team leader how many people we
4 saw, but we were never verifying veteran status.

5 So I also -- you know, as every member in 2019, I think
6 that was one of the first times I was introduced to how the PIT
7 count was conducted here.

8 And I have been on PIT counts since I have been back in
9 this role, and it's the same thing.

10 So this VetConnect project is a different way of doing,
11 not the PIT count on the night of the PIT count, but time
12 working up to the PIT count to try to identify who are these
13 individuals that we're meeting? Are they veterans?

14 And what we have found out is that maybe we might be
15 overestimating the number of veterans -- you know, I don't
16 think that has been necessarily proven yet. But just in my
17 team's experience of going out and participating in the
18 University of Southern California VetConnect project, we have
19 seen a number of individuals who may indicate that they are
20 veterans, but then when we actually follow up and look through
21 our systems, we can't verify that.

22 They are not -- you know, it's not coming up that they
23 are a veteran in our system that particularly has access to the
24 programs that we serve.

25 So that specific program and pilot, the intent of that,

1 I believe, is to create a different way, leading up to the PIT
2 count, to not only get an accurate sense of how many people are
3 experiencing homelessness that are veterans. But also, the
4 really valuable piece of this is to connect them to programs
5 and care, make that connection at the point where we're
6 encountering them, and we're doing that in conjunction with
7 other people that don't work for the VA.

8 Q Moving to how CERS staff document their work.

9 I guess, do CERS staff document their work?

10 A They do.

11 Q And how -- where does that documentation take place?

12 A So, two primary places that CERS staff document their
13 work.

14 One is in our computerized patient record system. We
15 call that CPRS. That is a electronic medical record that the
16 VA has.

17 And so, staff in my service, in CERS, document their
18 encounters with veterans in that system.

19 We also have a system called HOMES.

20 And that is sort of the VA's equivalent to HMIS. It's
21 Homeless Operation Management Evaluation system.

22 And so we document program entry, we do assessments that
23 are captured in homes, progress reports, things of that nature
24 for -- every program gets documented in that. So there are two
25 systems.

1 I will say that we have some staff that have the ability
2 to enter into HMIS, but it's very minimal. And that's
3 primarily because we want our teams to be spending time with
4 veterans. We don't want them to be entering in several
5 systems. They already have to enter into two specific systems
6 for VA.

7 But sometimes we encounter veterans and we know
8 that our community uses HMIS, so we have some administrative
9 staff that may enter information like name, social security
10 number, date of birth, and veteran status, and the location
11 where they were encountered into HMIS as well.

12 Q Within VA's documentation systems, is every interaction
13 between CERS staff and a veteran reflected in that record?

14 A It's not. In fact, as a social worker, I hear this phrase
15 over and over in my head, like, documenting tells the story,
16 right? And there are times when -- there is something called
17 the cost of doing business, and if we are not meeting with the
18 veteran directly, and let's say we're meeting with a housing
19 authority or we're meeting with a partner on behalf of that
20 veteran, we're not able to capture that in the medical record
21 because that veteran needs to be present for that interaction.

22 One of the times that you can capture that is when you
23 are working with three different disciplines, like a social
24 worker, a nurse, peer specialist, are all talking about a
25 veteran for at least 30 minutes. You can document that

1 interaction and that encounter without the veteran present.
2 But ordinarily, you can't do that -- unless you develop an
3 administrative note title, which we do that, or you could use a
4 historic visit.

5 So -- but I would not say that it's true that every
6 encounter with veterans we can find in our medical records
7 system.

8 Q Who has access to these medical records?

9 A VA staff have access. Veterans can request access to
10 their own records. Community partners do not have access to
11 our medical records. It has to be a VA-badged employee that
12 can see that.

13 Q To your understanding, why don't community partners -- why
14 are they not allowed to access the VA's medical records
15 systems?

16 A Well, for confidentiality purposes. And I think much
17 like, you know, when I go to the doctor, you know, maybe my
18 doctor, if I have another medical organization that needs to
19 know certain things, maybe they can share some information for
20 my safety and well-being. But it's really around privacy.

21 We want to keep confidential the work that we do with
22 veterans. We can share some things with partners but there are
23 exclusions to what we can share without a veteran giving their
24 permission for us to share that.

25 Q Within VA, how do CERS staff use these historic notes in

1 the medical records?

2 A So with CERS staff, let's just say that I have a staff
3 member that is trying to make contact with a veteran but they
4 are unsuccessful. It's really important that they document
5 that, and we're always encouraging them to document that so we
6 know they are trying to connect with that veteran.

7 So, they would go into the record and they would list
8 that under an administrative type note and use what we call a
9 historic visit. That means the veteran wasn't present.

10 For example, if a case manager made a call to the public
11 housing authority, that case manager could go into that record
12 and they could indicate that they made that call on behalf of
13 the veteran and, for example, what the status of their voucher
14 was.

15 Q Are you familiar with the term "red flagging"?

16 A I have heard red flagging. If you are speaking about a
17 behavioral flag, that is my understanding of a flag that might
18 go into a patient's chart for a couple of reasons.

19 Q What are those reasons?

20 A So behavioral flags are risk flags. So one example would
21 be suicide risk. So if someone is at high risk of suicide,
22 that is identified in their chart.

23 And the purpose of that is to ensure that when veterans
24 are presenting for care, that the clinicians that are meeting
25 with them know to ask them questions specifically about their

1 thoughts of suicide, their plans around suicide. It's really
2 something to assist clinicians to ensure the safety of
3 veterans.

4 There is another behavioral flag called a disruptive
5 behavior flag. That would be another reason.

6 And that would be -- let's say that a veteran presented
7 to an appointment, and perhaps they were aggressive towards
8 another veteran or staff, maybe they were violent. That flag
9 doesn't happen immediately.

10 There is a group of individuals that comprise a
11 committee in our healthcare system. So they review a report.

12 So let me give you a quick example. If I'm meeting with
13 a veteran and a veteran begins to yell at me, maybe cuss at me,
14 maybe comes close to me and/or maybe throws something across
15 the room or perhaps is verbally elevated. I might go into the
16 system and write a report about what happened. And the reason
17 for that is to ensure that we give objective information so
18 that other clinicians know that sometimes the veteran might get
19 elevated, and so that helps us take a different approach.

20 The one thing to note is that those reports don't always
21 result in a behavioral flag. So this committee, which consists
22 of usually VA police, psychologists, social workers, sometimes
23 social workers in the homeless programs, and other
24 professionals, maybe nurses, throughout our system review that
25 and determine if the behavior is significant enough that

1 renders the need to place a behavioral flag.

2 That behavioral flag, if it is placed, can sometimes
3 explain how care is received. Like, where care is received.
4 For example, if it's something very serious, where someone has
5 been violent or hurt someone, that could mean they have to
6 receive care in a certain place, or they have to check in with
7 the VA police before they receive that care.

8 It doesn't always mean that. And it shouldn't prevent
9 individuals from being able to access housing or services.
10 Those services may just need to look different, to make sure
11 that staff are safer and that the veteran is safe.

12 Q I want to talk briefly about how CERS services relate to
13 healthcare.

14 So, first, do CERS staff provide healthcare to veterans?

15 A I would say yes. Because we have nurses and we have nurse
16 practitioners and we have social workers, and all of those
17 individuals at some level can provide a certain level of
18 healthcare, whether that is mental healthcare, you know, on our
19 MMU that I talked about earlier, exams, vaccinations. So yes,
20 if they are in a position that is responsible for providing
21 that healthcare.

22 For example, we have substance abuse specialists in the
23 homeless programs, and so they are responsible for providing
24 group treatment therapy or individual services around
25 addiction.

1 We have nurses in our HPACT providing healthcare,
2 assessing veterans, and guiding them along their medical
3 journey.

4 We have nurse practitioners who might be prescribing
5 medications, so yes.

6 Most of the individuals that provide the physical
7 healthcare work in HPACT and don't necessarily report to CERS,
8 but they are funded by the homeless program national office and
9 I do provide those services.

10 But I consider healthcare and our full spectrum of
11 healthcare to mean a lot of things and not just going to a
12 primary health doctor. So I would say yes, individuals in our
13 services and CERS do provide some of that healthcare.

14 Q And how does the healthcare that CERS provides differ from
15 healthcare that might be provided from other divisions at GLA?

16 A So, most other of the divisions provide care physically in
17 a clinic or through telehealth modalities. And so they
18 specialize in a specific medical treatment or delivery of care.

19 And the way CERS is different is we may not be
20 delivering that care but we're making those connections to
21 care. Sometimes we deliver the care through the MMU, sometimes
22 our nurses do vaccination clinics and so they are doing that in
23 the field.

24 But I would say, primarily, they are really involved in
25 making those connections to mental health and medical care for

1 the veterans that we serve.

2 And we usually do that in the community, in those SPAs
3 that we were talking about, going into their homes, going into
4 encampments, and things of that nature. That is a little bit
5 different from the other medical providers because they're
6 usually in an office.

7 Q Does CERS provide any transportation to get veterans to
8 those more fixed or long-term healthcare providers within the
9 VA?

10 A We do. We can provide transportation services through our
11 staff. We can also work with veterans to ensure that they know
12 the transportation benefits that they are eligible for
13 throughout the healthcare system.

14 I'm not an expert in beneficiary travel, but sometimes
15 veterans who have specific service-connected disabilities
16 qualify for transportation to appointments.

17 We also help them make connections with community
18 resources that can assist them with that transportation.

19 There is a couple of organizations that we work with
20 that provide Uber and Lyft in attempts to support that
21 transportation because we know that that is vitally important
22 to veterans and many who are experiencing homelessness have
23 difficulty gaining transportation.

24 Q So you mentioned that some providers at VA may offer
25 virtual forms of healthcare.

1 Are there any benefits or -- are there any benefits to
2 virtual care?

3 A I see a lot of benefits to virtual care. And I think,
4 specifically, living in Los Angeles is really difficult with
5 traffic. And so sometimes it takes a veteran a long time to
6 sit in traffic.

7 And I can give an example of, like, someone experiencing
8 high levels of anxiety or maybe post-traumatic stress disorder.
9 It may be very difficult to go into an office setting and be
10 around people. Maybe it's more comfortable to do that from
11 their home.

12 Maybe it's more comfortable to do that from their
13 HUD-VASH appointment. So having that ability to connect
14 virtually can be a really powerful tool to a veteran,
15 particularly a veteran who has mobility issues and has a hard
16 time getting to appointments or a veteran that just doesn't
17 prefer to go into the hospital to get their care.

18 Q Are there any challenges to the delivery of virtual care?

19 A I think there are.

20 I think that the group that is in my service, the
21 homeless virtual resource center, that is a tool to helping
22 people learn how to use devices.

23 You know, part of when someone is given a tablet or when
24 they are given a device to be able to engage in care, part of
25 it is knowing how to use that device. And so that could be a

1 challenge.

2 You know, luckily, those devices are built with
3 connectivity to services, so a person wouldn't necessarily have
4 to have Wi-Fi to be able to access that.

5 But that could be a challenge if someone decides to use
6 their smartphone and they don't have access to Wi-Fi, that
7 could be challenging.

8 And I think some people may prefer to see a physician.
9 There are a lot of things you can do with medicine now that we
10 do through what we call digital divide. And, you know,
11 veterans can be trained with taking their blood pressure or
12 monitoring certain symptoms. And some people prefer using
13 that.

14 But I think, you know, it's important that the veterans
15 that we serve under CERS have support in getting comfortable
16 with those devices.

17 Q Moving toward some of the specific housing programs
18 offered by CERS. I want to discuss those in a little bit more
19 detail starting with CTRS.

20 So we're going to bring up Exhibit 1207.

21 Do you have Exhibit 1207 in front of you?

22 A I do.

23 Q Have you seen this document before?

24 A I have.

25 Q What is this document?

1 A So this document is a guide for staff, sort of a standard
2 operating procedure, specifically around care, treatment and
3 rehabilitation services, CTRS. So it talks about admission to
4 CTRS, which also we call our tiny shelters, and expectations
5 and what the staff are doing while someone is admitted and
6 living in CTRS.

7 MR. KNAPP: Your Honor, I move to admit Exhibit 1207
8 in evidence.

9 THE COURT: Received.

10 (Exhibit 1207 received into evidence.)

11 BY MR. KNAPP:

12 Q We're now going to bring up what we have marked as 1208.

13 Do you have Exhibit 1208 in front of you?

14 A I do.

15 Q Have you seen this document before?

16 A I have.

17 Q What is Exhibit 1208?

18 A So this is a document that every individual that becomes a
19 program participant in CTRS will get.

20 And this outlines roles and responsibilities -- or
21 responsibilities and gives an opportunity to kind of talk
22 through all of that and also have a consent form, like agreeing
23 to participate, you know, as a veteran in this program. They
24 are agreeing to certain things to do and not to do while they
25 are in that program.

1 MR. KNAPP: Your Honor, I would move to admit
2 Exhibit 1208 into evidence.

3 THE COURT: Received.

4 (Exhibit 1208 received into evidence.)

5 BY MR. KNAPP:

6 Q So, Ms. Hammitt, do you recall testifying yesterday that
7 CTRS is considered emergency shelter?

8 A I do.

9 Q Why should CTRS only be considered emergency shelter?

10 A It's not a place that we want people to stay for a long
11 period of time. It's not a home. It's not permanent housing.
12 It doesn't have a bathroom. It's small. It doesn't give a
13 person an opportunity to have guests.

14 It doesn't -- it's a structure that keeps a person safe
15 and oftentimes serves as a very powerful tool to connect
16 veterans to services that they may want.

17 But the goal that we have as a program is to make sure
18 that veterans don't stay there very long, and they are quickly
19 served and moved into a permanent housing, a dwelling that is
20 more appropriate for a home.

21 Q So why offer something that, as you say, shouldn't be
22 considered a home to veterans?

23 A Because we want to make sure they are off the streets. We
24 know that being unsheltered and being homeless is one of the
25 most traumatic experiences that anyone can experience. And we

1 also recognize that we have really, really high rents. And we
2 have really, really -- a shortage of affordable housing.

3 And we also have individuals that may have never
4 utilized our system. And so it gives them a safe place to
5 immediately come in and connect with the services that they may
6 need or want to be successful.

7 Q What sort of services are available at CTRS?

8 A We have peers and social workers and -- we have people
9 coming from other services down to CTRS that are nurses. And,
10 so, in CTRS, for basics, individuals get a shelter. They have
11 access to clothing, if that is not something they have. They
12 have access to three meals a day. They have laundry services.
13 They have showers. And they also have a team of people that
14 can offer them opportunities to engage in medical services,
15 mental health services, recreational services, and employment
16 services.

17 Q And do you consider CTRS to be -- what I believe you said
18 earlier is a low demand model?

19 A I do.

20 Q Does the low demand nature of CTRS present any challenges?

21 A It does. And, you know, we're not expecting individuals
22 to come in and, you know, if they are using substances be
23 sober. But we have to create a safe environment for everyone.
24 So, you know, we can't allow drugs or alcohol into the program.

25 You know, many people who have experienced homelessness

1 are fearful for their lives. And so, sometimes, they have
2 weapons on them. But we can't allow weapons to come in there
3 because it could present a danger to others.

4 Veterans often come with belongings that are very
5 important to them, and they want to bring those belongings with
6 them. We can only allow a certain amount of belongings because
7 the structures aren't very big. And that's sometimes really
8 hard for veterans to part with things that are so important to
9 them.

10 It's also hard for them to leave their weapons behind
11 because they might still feel fearful. So it does present
12 challenges.

13 We have security who wand individuals to make sure that
14 they don't have weapons on them. And that can feel really hard
15 for veterans using that program.

16 And they can feel shameful about having to go into a
17 space like that and being wanded or having someone check on
18 them three times a day. We have a monitoring contract where we
19 actually go into the pallets, we knock. And if there is no
20 answer, we go in there because we want to make sure that people
21 are safe.

22 But people probably don't want people knocking on their
23 door and coming in.

24 So it does present challenges. Sometimes people don't
25 get along.

1 People have service animals. And so it presents some
2 challenges, yes.

3 Q Notwithstanding those challenges, do you assess CTRS is in
4 relatively high demand?

5 A It is. In fact, I would say that almost on a daily basis
6 we have an average of only ten available pallets. And,
7 usually, it's -- there might be a pallet offline because it was
8 damaged or we're repairing it. Most of our drop-ins --
9 usually, it's about anywhere from four to seven of the drop-ins
10 are full every night. So I would say we have a very high
11 occupancy in CTRS.

12 Q And how does the occupancy of CTRS compare to other
13 emergency shelter or transitional programs on the campus?

14 A So, I would say that, you know, when I looked at the data
15 yesterday -- and, overall, this is true -- our grant per diem
16 or transitional housing usually runs at about 80 percent. We
17 usually have about 120 beds across our system that are
18 available in transitional housing at any given night.

19 For emergency shelter across our system, we have about
20 50 beds available.

21 So on West LA's campus, we currently have 85
22 transitional housing places in a place called New Directions on
23 our campus.

24 And we have a place called A Bridge Home that has 32
25 beds. And that's contracted emergency shelter.

1 When I looked at the census of both of those places, New
2 Directions had about 68 out of their 85 beds filled.

3 A Bridge Home had 28 out of 32 filled.

4 And then we have a women's specific program that has 19
5 beds. And that had 12 beds occupied.

6 And, so, I would say -- you know, there are certainly
7 beds available, but CTRS seems to have, generally, a high
8 occupancy than the other places on campus.

9 Q To what do you attribute that seemingly higher demand for
10 CTRS?

11 A Well, I think we can be a little bit more successful with
12 lower barriers. Because New Directions is a congregate living
13 space, and so certain behaviors that can be tolerated at CTRS
14 because there are individual pallets might not be able to be
15 tolerated in New Directions in the congregate living.

16 I think the thing that is complex about New Directions
17 as well is that while we encourage Housing First approach,
18 transitional housing wasn't really built on Housing First.
19 They have a clinical treatment model where people are in there,
20 and they are actively participating in substance abuse
21 treatment.

22 So, they have bridge housing and they have low demand
23 housing. But there is a mixture, and it's a congregate
24 setting. Just in terms of the women's contracted residential
25 shelter, you know, we have heard from women veterans that don't

1 necessarily want to be on campus, but that is also a congregate
2 setting, whereas CTRS is not a congregate setting. Even though
3 all of these tiny shelters are in an area, the veteran can go
4 in on their own, by themselves, and not be sleeping around
5 other veterans.

6 In terms of A Bridge Home, it is congregate. We used to
7 have more beds than we do now. But what we realized is that
8 having barracks like that, people didn't want to live in those
9 congregate settings. So we were able to remodel the space to
10 create more dignity and more privacy and space out a little bit
11 more in that area.

12 Q And is CTRS an HCHV program?

13 A It is. It's very unusual. You don't see -- in fact, I'm
14 not sure that there are any other programs like this at the VA.
15 I think someone is trying to develop one in Philadelphia.

16 But you don't see this on campus because, usually, HCHV
17 contracted residential shelter is contracted out to a
18 nonprofit. In this case, we have had volunteers and civic
19 engagement involved to donate the pallets and then VA to staff
20 that area through HCHV. And then we have contracts for
21 monitoring and food and janitorial services and security
22 services there.

23 Q So we're going to bring up what we have marked as
24 Exhibit 1225.

25 Do you have a document marked Exhibit 1225 in front of

1 you, Ms. Hammitt?

2 A I do.

3 Q Do you recognize this document?

4 A I do.

5 Q What is Exhibit 1225?

6 A This is VHA -- a Veterans Health Administrative Directive
7 that guides our Healthcare for Homeless Veterans outreach
8 services.

9 Q And is that one of the services offered through the HCHV
10 program?

11 A It is. So it doesn't spell CTRS out here because it's a
12 unique program and there is not many across the system.

13 But, certainly, this would be under the umbrella of
14 Healthcare for Homeless Veterans and providing emergency
15 shelter and providing those wraparound services to veterans who
16 are eligible.

17 MR. KNAPP: Your Honor, I would move to admit
18 Exhibit 1225 into evidence.

19 THE COURT: Received.

20 (Exhibit 1225 received into evidence.)

21 BY MR. KNAPP:

22 Q Ms. Hammitt, moving to Grant and Per Diem, what sort of
23 services are available to veterans participating -- or being
24 served through Grant and Per Diem?

25 A So our Grant and Per Diem program is a -- transitional

1 housing. And the services that are provided are usually
2 provided by a nonprofit who has been awarded a grant through
3 the VA.

4 So they provide housing, and they provide case
5 management and wraparound services.

6 And there are a few different -- several models that are
7 used in Grant and Per Diem, as I mentioned previously.

8 Q And are you familiar with the organizations in Los Angeles
9 who are grantees through Grant and Per Diem?

10 A I am.

11 Q Could you list some of them for the Court?

12 A Sure. So we have Volunteers of America; we have New
13 Directions; we have Salvation Army; we have People Assisting
14 the Homeless. LA Family Housing was connected with us, but,
15 recently, they are no longer a grantee, but they are still a
16 partner with us.

17 So there are several agencies that are nonprofits across
18 our community.

19 THE COURT: LA Family Housing is in the valley,
20 aren't they?

21 THE WITNESS: Yes.

22 THE COURT: Why aren't they connected with you?

23 THE WITNESS: So they were connected with us. But,
24 recently, they decided not to continue with their grant.

25 THE COURT: Why?

1 THE WITNESS: I think it was because of their low
2 census of veterans.

3 THE COURT: Because of their --

4 THE WITNESS: Low census of veterans. I'm not
5 exactly sure, but I also know that there has been some
6 discussion about concerns about the per diem rate that grantees
7 are experiencing.

8 THE COURT: Just a moment.

9 Thank you very much.

10 BY MR. KNAPP:

11 Q And across Los Angeles, how many Grant and Per Diem beds
12 are available?

13 A We have approximately 597. I believe that there are more
14 than that awarded. I think we're in -- like, 620 or 630 were
15 awarded, but there are some beds that are under construction.
16 So I'm not counting that as an available bed because they are
17 not available, truly, right now.

18 Q And are those beds reserved for veterans, even though they
19 are off of the campus and out in the community with the
20 grantees?

21 A They are reserved for veterans.

22 And I'm curious if I could just go back to LA Family
23 Housing because I would like to make a correction in something
24 that I said.

25 I said maybe there weren't veterans identified. And I'm

1 recalling, specifically, a number of veterans that my team
2 needed to transition out of those beds, so there were veterans
3 in those beds.

4 But the main concern that that provider had -- and we
5 have heard from other providers -- is that their per diem rate
6 is not high enough, so they were choosing not to continue.

7 Q What is the per diem rate?

8 A I don't know the actual number of the per diem rate, but
9 it's, essentially -- I could find that, but it's a dollar
10 amount that the grantees get paid for every day that the
11 veteran occupies that bed.

12 Q Are you aware of any discussions of how to address this
13 challenge, the Grant and Per Diem grantees are receiving?

14 A There has been a lot of advocacy.

15 My team is not specifically engaged in that advocacy,
16 but we're hearing from grantees about their concerns about the
17 per diem rate.

18 THE COURT: Are you paying a flat rate to these
19 different providers for those beds each month? Or are you
20 paying a rate when you can actually verify that the veteran
21 occupies the bed? And if you are paying a rate where you can
22 verify the veteran is occupying the bed, what data are you
23 relying upon?

24 THE WITNESS: So we pay a daily rate and we --

25 THE COURT: You pay a daily rate?

1 THE WITNESS: Uh-huh.

2 THE COURT: Whether that bed is occupied or not; is
3 that correct?

4 THE WITNESS: Whether it's -- only occupied.

5 THE COURT: I'm being very specific now. Listen to
6 my question. Are you paying a daily rate whether the bed is
7 occupied or not? In other words, do you have what I call a
8 set-aside with -- whether it's Volunteers of America or LA
9 Family Housing historically or PATH or whomever?

10 THE WITNESS: We're only paying the rate if the bed
11 is occupied.

12 THE COURT: How do you verify that? The provider?

13 THE WITNESS: The grantee submits billing.

14 THE COURT: Repeat my question. How do you verify
15 that?

16 THE WITNESS: We look at census reports and sign-in
17 sheets. So our staff works with that grantee to look at that
18 on a monthly basis. And they verify their invoice based on the
19 records of them serving that veteran and sign-in sheets and
20 things like that.

21 THE COURT: Provided by the provider, correct?

22 THE WITNESS: Correct.

23 THE COURT: Do you do any independent investigation
24 of whether that is simply a sign-in and whether the veteran is
25 actually there, or do you rely solely upon the provider?

1 THE WITNESS: That has extra measures because we
2 have liaisons that go there.

3 THE COURT: Do you rely solely upon the provider?
4 Yes or no?

5 THE WITNESS: No.

6 THE COURT: Okay. What verification do you do, in
7 detail?

8 THE WITNESS: We have social workers that actually
9 go on-site, visit with the veterans, talk to the veterans, ask
10 them how their experience is at that site. And they might meet
11 with them in common rooms. They might meet with them in their
12 room. They also review records that the grantee keeps because
13 the grantee doesn't document in a VA system. So our liaisons,
14 our Grant and Per Diem liaisons at the VA have to look at their
15 system and look at their documentation.

16 THE COURT: Thank you very much. Counsel.

17 BY MR. KNAPP:

18 Q Thank you, Ms. Hammitt.

19 So moving to HUD-VASH. First of all, what is VA's role
20 in the HUD-VASH program?

21 A VA's role is to provide the case management and work with
22 the veterans to ensure they have wraparound supports not only
23 to obtain their housing but to maintain their housing.

24 Q So we're going to bring up Exhibit 1216.

25 THE COURT: Are you aware, while we're bringing that

1 up, about the concerns of this Court in unrelated litigation to
2 this where the providers hold that information and, thus far,
3 many have not been able to produce this information that you
4 say you are receiving? Let me repeat that.

5 Providers historically have been allowed to retain their
6 own information. In retaining that information, they are
7 supposed to have that available to the county or to the city.

8 Are you aware of the present status of that alleged
9 information that they have retained showing that people
10 actually occupied these beds?

11 A I'm not.

12 THE COURT: Okay. All right. Counsel.

13 Are you aware of an audit taking place concerning
14 this? Are you aware of an audit -- an independent audit that
15 the Court's ordered concerning this?

16 THE WITNESS: I'm not.

17 THE COURT: Okay. Then we'll leave you alone.
18 Thank you.

19 Tread very carefully in this counsel, very carefully
20 when you make representations to the Court about what is
21 occupied and not. You may be the virtuous agency who is doing
22 spot checking. But I'm warning you, don't get caught in a
23 blanket representation to this Court. Leave yourself kind of
24 pure and possibly away from a lot of money unaccounted for,
25 let's say, with alleged occupancy of beds, double counting, et

1 cetera. Okay. And, if not, just start Googling.

2 Okay. All right. Therefore, we will leave you alone.
3 I don't want you in that area, okay? Fairness to you.

4 BY MR. KNAPP:

5 Q Ms. Hammitt, do you have Exhibit 1216 in front of you now?

6 A I do.

7 Q And what is this document?

8 A This is the Veterans Health Administration Directive
9 governing the Housing and Urban Development, Department of
10 Veteran Affairs Supportive Housing Program. So that is our
11 HUD-VASH program. And this is the directive that guides that
12 program.

13 Q And is this one of the policies that governs CERS'
14 administration of that program here in Los Angeles?

15 (Reporter clarification.)

16 BY MR. KNAPP:

17 Q Is this one of the policies that governs CERS'
18 implementation of the HUD-VASH program here in Los Angeles?

19 A It is.

20 MR. KNAPP: Your Honor, I would move that
21 Exhibit 1216 be admitted into evidence.

22 THE COURT: Received.

23 (Exhibit 1216 received into evidence.)

24 BY MR. KNAPP:

25 Q So you mentioned that as part of HUD-VASH, VA provides

1 case management services; is that right?

2 A That's correct.

3 Q Can you tell us what case management services are?

4 A Sure. Case management services can look different for
5 every veteran that we serve. But, essentially, case management
6 is -- involves working with a veteran to help them achieve
7 housing, whether that be helping them to get documents in order
8 to be able to apply to the housing authority for a voucher. It
9 could mean helping them establish benefits or transportation
10 services, maybe connect with food subsidies. That case
11 management could look like providing transportation or could
12 look like providing connections to medical care or mental
13 healthcare.

14 It could also mean assisting veterans and providing
15 services to help with employment. It could also -- connecting
16 to the community and recreation.

17 Q So we're going to bring up Exhibit 1222.

18 Ms. Hammitt, do you see Exhibit 1222 in front of you?

19 A I do.

20 Q Do you recognize this document?

21 A I do.

22 Q What is Exhibit 1222?

23 A So this document speaks to the responsibilities of various
24 individuals in CERS in carrying out case management and
25 HUD-VASH.

1 Q And do you expect your staff to comply with these
2 procedures?

3 A I do.

4 MR. KNAPP: Your Honor, I would move that
5 Exhibit 1222 be admitted into evidence.

6 THE COURT: Received.

7 (Exhibit 1222 received into evidence.)

8 BY MR. KNAPP:

9 Q Ms. Hammitt, are you aware whether the National Homeless
10 Programs Office also issues guidance on implementation of the
11 HUD-VASH program?

12 A They do.

13 Q We're now going to bring up Exhibit 1209.

14 Ms. Hammitt, do you recognize Exhibit 1209?

15 A I do.

16 Q What is Exhibit 1209?

17 A This is a document that talks about common evidence-based
18 practices that are used in HUD-VASH and explains the
19 expectations around how we're carrying out our care based on
20 things that work.

21 Things like Housing First, things like motivational
22 interviewing, things like peer support and peer mentoring.

23 Q And are these evidence-based practices implemented at GLA
24 through CERS?

25 A They are.

1 MR. KNAPP: Your Honor, I would move that
2 Exhibit 1209 be admitted into evidence.

3 THE COURT: Received. Thank you.

4 (Exhibit 1209 received into evidence.)

5 BY MR. KNAPP:

6 Q We will now bring up Exhibit 1211.

7 Ms. Hammitt, do you see Exhibit 1211 in front of you?

8 A I do.

9 Q Do you recognize this document?

10 A I do.

11 Q What is Exhibit 1211?

12 A This is a document that guides our teams and talks about
13 the importance of shared case loads in HUD-VASH and talks about
14 creating a team where one person shouldn't be working with a
15 veteran, that really we should take the approach to use several
16 individuals with different backgrounds of different diverse
17 backgrounds, ethnic backgrounds, but also professional
18 backgrounds, to wrap our support around the veteran in
19 HUD-VASH.

20 Q And are the practices indicated in this document
21 implemented at GLA through CERS?

22 A They are.

23 MR. KNAPP: Your Honor, I would move Exhibit 1211 be
24 admitted into evidence.

25 THE COURT: Received.

1 (Exhibit 1211 received into evidence.)

2 MR. KNAPP: We will now bring up Exhibit 1212.

3 BY MR. KNAPP:

4 Q Ms. Hammitt, do you see Exhibit 1212 in front of you?

5 A I do.

6 Q Do you recognize this document?

7 A I do.

8 Q What is Exhibit 1212?

9 A This document talks through potential team structures that
10 could be present and encouraged to use throughout the HUD-VASH
11 program, so it gives information around the various models of
12 team structures that exist within HUD-VASH.

13 Q And are any of these team structures used at GLA in CERS?

14 A Yes. We use a combination of models.

15 We use intensive case management, you know, with those
16 that have a higher acuity. This talks about acuity teams and
17 also geographic teams. And so, our teams -- really, we have a
18 blend of functional teams but also geographic teams. And in
19 that, we -- because of things like we talked about earlier
20 about not being able to get to the veteran quickly, we do
21 geographic teams so that we're in close proximity to the
22 veterans, and we also use models where we know that all of the
23 programs within CERS are really important to collaborate with
24 to ensure that we have a clear pathway to HUD-VASH. So we
25 often have a multi -- we operate under shared caseload,

1 multidisciplinary teams with nurses, peers, social workers, and
2 others to ensure that that pathway is well-connected and
3 coordinated.

4 MR. KNAPP: Your Honor, I would move Exhibit 1212 be
5 admitted into evidence.

6 THE COURT: Received.

7 (Exhibit 1212 received into evidence.)

8 BY MR. KNAPP:

9 Q Ms. Hammitt, let's talk about in a little bit more detail
10 how these some of these practices are implemented through
11 HUD-VASH.

12 How does a veteran first get into the program?

13 A That typically happens through our triage system.

14 So previous to when I came to HUD-VASH and actually into
15 my time in CERS, we had a system where CERS was taking all of
16 the referrals directly to VA staff, and we recognized that that
17 was slowing things down quite a bit.

18 So we opened up One Team and created access points and
19 created access and triage so that anyone experiencing
20 homelessness could get right to HUD-VASH through our by-name
21 list case conferencing.

22 And so, how that works is someone is identified at a
23 point of care, and that could be VA staff or non-VA staff, and
24 they are engaged and encouraged to immediately come indoors.
25 And if they decide they don't want to come indoors, that

1 doesn't mean they can't get connected to HUD-VASH.

2 Typically, during those by-name list conferencing
3 meetings, several people will indicate their capacity to take
4 veterans into HUD-VASH, whether that is contractors or VA staff
5 or SSVF rapid rehousing, and then they are assigned to point of
6 contact or someone that is going to be working directly with
7 them on their housing.

8 So that individual or that agency or sometimes a group
9 of individuals will work with that veteran and ask them what
10 their preferences are. Where do they want to live? Do they
11 want to live in a project based community? Do they want to
12 have a tenant-based voucher? What area of town do they want to
13 live in?

14 Based on that response, we have a triage tool that gives
15 their first three preferences.

16 So, we explore those preferences. Let's just say
17 someone wants to live in a project based community.

18 That individual will submit that information on behalf
19 of the veteran, work with the veteran to get the application
20 materials to process through that project based community, and
21 those referrals will then go to the housing authority.

22 We do need to screen to make sure that veterans are
23 eligible for HUD-VASH, and our primary responsibility with that
24 is making sure that they are homeless and making sure they are
25 a veteran.

1 Q And how do you verify that someone is a veteran?

2 A So, there are systems that we have in place that we can
3 verify that.

4 Sometimes they will give us their DD214, which is their
5 discharge papers. And sometimes they don't have that because
6 they may have never received it or maybe they lost it.

7 So, we work closely with the Veterans Benefits
8 Administration. All of my team has access to a system that VBA
9 owns and operates, and they can quickly go into that system and
10 determine whether or not someone is a veteran.

11 We also have our partners using -- because they can't
12 necessarily access that system -- they can do that through us,
13 but they can also use a systems called SQUARES. And I'm not
14 exactly sure what that stands for, but it's a system where
15 anyone in the community can put in a veteran's name, date of
16 birth, and Social Security number, and it will bring up what
17 programs that veteran is eligible for in VA homeless programs.

18 Q And I believe you mentioned that after you have verified
19 that someone is homeless and a veteran, that then a referral is
20 made to the public housing authority; is that correct?

21 A Almost. The referral is played to the housing authority
22 once the application is completed and we can submit that
23 application to the housing authority because they won't accept
24 an application if it's incomplete.

25 And so, sometimes those applications are really robust

1 and it takes some time to assist a veteran in completing those
2 applications.

3 So, once that has been done and that application is
4 completed, we will refer that veteran to the housing authority.
5 And the VA will do that, and in some cases our SSVF grantees
6 will do that, or the Department of Health Services who has a
7 set aside amount of vouchers that they can also refer to the
8 housing authority for.

9 Q Have you heard that certain PHAs, including the Housing
10 Authority of the City of Los Angeles would like to see faster
11 referral rates?

12 A I have.

13 Q And have you explored ways to improve the rate of
14 referrals to housing authorities in Los Angeles?

15 A I have. In fact, I'm really happy to report that looking
16 at this time last year, as compared to this time this year --
17 taking nine months of last year from October until through
18 June, and October through June of this fiscal year -- we have
19 increased our referrals by 32 percent.

20 We're really excited about that and we attribute
21 that to stronger relationships with our PHA, more regular
22 communication with them, and strategies that we have created in
23 our system to make sure that we no longer have backdoor
24 approaches to get people into housing.

25 Everyone who is identified on our by-name list can now

1 be referred --

2 THE COURT: I'm sorry. When you say "32 percent,"
3 is that 32 percent over a time period? In other words, was the
4 prior referral -- let's say, hypothetically, I'm making it up,
5 180 days, but you have decreased that time period 32 percent or
6 have you increased the volume of veterans going in 32 percent?

7 THE WITNESS: We have increased the volume of
8 referrals going to the housing authorities of veterans.

9 THE COURT: Does that mean there are more veterans
10 out there and that is why this volume have gone up? I don't
11 understand, I'm sorry. I need to understand this. I don't
12 know what the 32 percent refers to.

13 THE WITNESS: I think we're referring faster. I
14 think we're submitting more referrals to the public housing
15 authority.

16 THE COURT: In other words, we're measuring these
17 referrals not necessarily by volume, we're measuring it by how
18 more quickly we're responding. So if we had a time period
19 before, we're cutting that time period substantially?

20 THE WITNESS: So we had from October of 2022 until
21 -- I'm sorry, October of 2022 to June of 2023, about 600
22 referrals to the housing authority.

23 And when we look at this time, this fiscal year from
24 October of '23 to June of '24, we are almost at 900 referrals.

25 THE COURT: What I'm referring to is -- I will wait,

1 but I don't know whether that's because of an increase of
2 veterans or an increase of efficiency right now. Okay?

3 Thank you. I appreciate that.

4 THE WITNESS: Thank you.

5 THE COURT: Okay. Counsel.

6 BY MR. KNAPP:

7 Q Ms. Hammitt, do you assess that that increase over this
8 comparative time period is attributable to an increase in
9 efficiencies?

10 A I do.

11 Q And are some of those efficiencies related to the
12 implementation of One Team, as we discussed earlier?

13 A They are. In fact, our public housing authorities -- our
14 two largest public housing authorities, LACDA and HACLA attend
15 our One Team meetings weekly. They are also involved with
16 creative strategies to ensure that we're having maximum
17 utilization of our vouchers. That is our goal, to use
18 100 percent of our vouchers.

19 And the housing authorities are critical to that
20 success. We meet with them weekly, not just in the leadership
21 committee, but we meet with them in other settings. We meet
22 face to face in their offices. They come to our offices in
23 West LA. And importantly, they participate in case
24 conferencing. They participate with our teams to help us
25 understand what is stopping the veteran from completing the

1 application process.

2 So if they receive an application and something is
3 missing, we want to know as quickly as possible so that we can
4 get that information from that veteran and quickly turn that
5 over to the housing authority.

6 Q So what is the role of the housing authority in assessing
7 whether an application is complete?

8 A So, the housing authority is determining a number of
9 things.

10 They are determining if the person's income level meets
11 the qualifications that HUD sets forth. They are doing
12 background checks to make sure that they are qualified for the
13 voucher.

14 I think -- I'm gathering everything -- they are
15 responsible also for reviewing the application to make sure all
16 of the documents are clear.

17 So, VA primarily determines homelessness and whether or
18 not the person is a veteran, and all the other regulations are
19 specific to HUD.

20 THE COURT: So, is the City of Los Angeles and the
21 County of Los Angeles housing veterans at their expense?

22 THE WITNESS: I think so. I think HUD awards the
23 funding and then distributes it.

24 THE COURT: Thank you.

25 BY MR. KNAPP:

1 Q Just to be clear, the expense that the County and City
2 expend, is it your understanding that those are federal funds?

3 THE COURT: Well, everything is federal, counsel.
4 It all flows to your COCs. It all -- well, not all, but most,
5 from the federal government, whether it's through the state to
6 our COC. Okay.

7 MR. KNAPP: I just wanted to make sure the record
8 was clear, Your Honor.

9 THE WITNESS: The VA pays for the case management,
10 and HUD pays for the housing subsidy.

11 THE COURT: Basically, you are the large amount of
12 money that flows down. Okay.

13 BY MR. KNAPP:

14 Q Are you aware that there can be lag times between when an
15 individual receives -- is admitted into the HUD-VASH program
16 and when they are able to actually access housing with a
17 voucher?

18 A I am.

19 Q In your experience, what do you attribute that lag time
20 to?

21 A There are a number of things that are attributed. I think
22 we want to see veterans housed as quickly as possible. And our
23 -- even though we don't necessarily measure this goal, we shoot
24 for 90 days from the time of, you know, admission to the
25 program to housed.

1 There are challenges, particularly the efforts that
2 veterans have to put into completing applications. And, you
3 know, some of the documents that they need to provide and
4 obtaining those documents. That can take a little bit of time.

5 You know, it's -- when someone is experiencing
6 homelessness, you don't always have all of your documents right
7 there, accessible. You might have had something stolen or you
8 may have lost something because you don't have a safe place to
9 store it.

10 And so, that contributes to the delays because you have
11 to have certain documentation to be able to even be referred to
12 the housing authority.

13 There is also a shortage of affordable housing, and
14 rents are really high.

15 So, you not only have veterans that are trying to find
16 housing, but in Los Angeles you have a lot of renters that are
17 trying to find housing. So, landlords have to be willing to
18 rent. Things like that.

19 Q And once an individual is admitted into HUD-VASH program
20 but is waiting to use their the voucher on the unit, does CERS
21 have strategies to get those individuals into housing and off
22 the streets while they wait to use their voucher?

23 A We do.

24 And could I ask you just to repeat that question
25 one more time so I'm sure I got it right.

1 Q Are there strategies that you implement or programs that
2 you implement to ensure that veterans aren't on the streets
3 while they wait to find an apartment they can use their voucher
4 in?

5 A Yes, there are.

6 And, in fact, we talked about several of the emergency
7 and transitional housing programs. But I mentioned SSVF
8 previously, Supportive Services for Veteran Families, and SSVF
9 is a critical tool. In fact, that is why we deployed a SSVF,
10 HUD-VASH collaboration work group under One Team, because SSVF
11 can provide financial assistance and get veterans into a unit
12 right away. They can also provide emergency hotel and motel
13 assistance for veterans while they wait to go into their
14 permanent housing.

15 So, let's just say that a veteran -- we have identified
16 a unit that is available for a veteran. SSVF can pay for the
17 rent until that voucher is obtained and kicks in.

18 And so we have deployed that strategy, and vouchering
19 fast is another strategy that we are deploying. Because we
20 know that if SSVF knows how to refer to the housing authority,
21 and they can work with the veteran directly on housing
22 navigation and preparation of getting those applications
23 together, and then submitting that application to the housing
24 authority. We know that that works quicker because we're all
25 working together on the same goal.

1 In fact, our public housing authorities have developed
2 trainings and our SSVF grantees have been invited to these
3 trainings so they understand how to complete these applications
4 and work directly with the housing authorities.

5 Q Is there a term that you use whenever you get someone into
6 housing through SSVF while they wait to then use their HUD-VASH
7 voucher?

8 A We call that rapid rehousing.

9 MR. KNAPP: Your Honor, we're going to bring up
10 Exhibit 1213.

11 BY MR. KNAPP:

12 Q Ms. Hammitt, do you have Exhibit 1213 in front of you?

13 A I do.

14 Q Do you recognize Exhibit 1213?

15 A I do.

16 Q What is this document?

17 A This is a guidance that the Homeless Program Office put
18 out around SSVF HUD-VASH collaborative case management. This
19 document talks about the importance of expediting veterans'
20 ability to move into housing.

21 And we have identified that there is delays in being
22 able to do that, and so this document talks about a creative
23 way to partner with SSVF when the resources aren't immediately
24 available. Like, for example, the voucher is taking a long
25 time to process, the application is taking a long time to

1 process, SSVF can come in and house that veteran immediately
2 and provide temporary financial assistance while VA provides
3 the case management. And in this case we're talking about
4 coenrollment, so you would actually see in a documentation
5 system that a veteran is coenrolled in SSVF and HUD-VASH.

6 This is fairly new in what we're working on in Los
7 Angeles. But what we have been doing for a while is called
8 bridging back.

9 So, rapid rehousing is used significantly to place
10 someone quickly in housing, and then if we determine that their
11 case management needs are elevated, they can always be bridged
12 back to HUD-VASH. So that's a partnership that we have been
13 deploying, but we're working hard to change what we're doing
14 right now and actually coenroll people in HUD-VASH and SSVF at
15 the same time.

16 Q And how long can someone remain housed with SSVF while
17 they wait for a voucher?

18 A So, I believe that is up to two years. I'm not exactly
19 sure of that. I would have to look at a document to be sure.

20 But we -- you know, if you are doing this collaborative
21 case management, we want that coenrollment and movement back to
22 HUD-VASH relatively quickly so that they can engage in the case
23 management.

24 MR. KNAPP: Your Honor, I would move that
25 Exhibit 1213 be admitted into evidence.

1 THE COURT: Received.

2 (Exhibit 1213 received into evidence.)

3 BY MR. KNAPP:

4 Q Ms. Hammitt, do you have an estimate of how many veterans
5 are currently being served through CERS programs?

6 A So, it's a tough question. But I know about 7,000 so far
7 this fiscal year have been served by specialized homeless
8 programs.

9 So, all of those programs on our org charts are included
10 -- well, some aren't because they are not captured in that
11 database system. But pulling a report, I have seen 7,000
12 served by specialized homeless programs.

13 Now, that won't include someone that we encounter, but
14 that -- so, we provide services to that person, but they don't
15 actually go into a program. But for those that actually are
16 served by our specialized program, so far this year, 7,000.

17 MR. KNAPP: I think I might be done, Your Honor. If
18 I may have a moment to consult.

19 THE COURT: Consult your team for just a moment.

20 While you are doing so, my comments don't have
21 anything to do with you folks with the VA and HUD.

22 I'm just saying you might check the present history and
23 the treasurer of the State of California and non
24 accountability, allegedly, from the state treasurer's office
25 concerning vast amounts of HUD funds that you have supplied

1 graciously to the State of California.

2 Number 2, don't get yourself in a box representing how
3 we're doing here in California.

4 There are some audits coming out. They may be virtuous;
5 they may be less than virtuous. I don't want you involved in
6 that kind of box.

7 Number 3, trust but verify. Whatever your records are,
8 going forward in the future, not to do with this lawsuit but
9 just from kind of a help because you are supplying the majority
10 of the money, from HUD at least, make sure these aren't
11 sign-ups, that these are beds that are actually occupied or do
12 some spot checking, if you will, because you can't be out there
13 on a daily basis.

14 Long after this lawsuit is done, but probably a short
15 time after this lawsuit is done, there could be some very
16 interesting audits coming out. I have no idea what those are
17 going to show. Mayor Bass has been very cooperative. Counsel
18 has been cooperative. But if you take a little bit of history,
19 I'm just imploring you, don't get mixed up in that whirlwind
20 right now. In the future, you are supplying the HUD money. I
21 think you will find it very interesting the position of Newsom,
22 very interesting the position of the treasurer and the lack of
23 accountability, and the inability to trace a lot of this money
24 you have supplied, okay?

25 So it has nothing to do with -- this lawsuit has nothing

1 to do with the facts, but I don't want you to getting in a box
2 of never verifying what the State, the County, and the City are
3 doing right now, okay? I don't know how that is going to turn
4 out, but I don't want you in that milieu.

5 All right. Now, one other thing while you are
6 checking with your team. You wanted me to go out to the site.

7 Here are my conditions, and I will repeat them next
8 Monday.

9 You both have to agree and stipulate that you want me to
10 go out to the site, and you have to stipulate what those
11 specific areas are you want me to look at.

12 And without that stipulation, I'm unwilling to do that
13 because that assumes, in a sense -- I don't want to -- strike
14 that.

15 I don't want to assume we're getting to injunctive
16 relief. It's as simple as that. Everything is on the table
17 right now.

18 I can go out -- if we do get to injunctive relief and
19 we're trying to decide what remedies are appropriate, I can go
20 out then. I can go out in your case in chief, because we may
21 never reach that decision, but if there is, I need a
22 stipulation from the other side.

23 I'm willing to go out there twice. Once if there is
24 some kind of finding by the Court that is adverse to you, and I
25 wanted to go out again if we get to injunctive relief of what

1 is a fair remedy of that injunctive relief. But here are my
2 conditions.

3 One is at 5:30 or 6 o'clock in the morning. Why?

4 Why would I go at that time? First of all, you have got
5 construction going out there that you alluded to in your
6 opening statement. I don't want to disturb that construction.

7 Number two, I'm going to want to see certain sites. One
8 of those is going to be the Brentwood School area with about 20
9 to 22 acres out there, and I don't want to disturb the young
10 people going to school.

11 Number three, I don't want a parade of people coming up
12 to me, and nobody gets up at 5:30 or 6 o'clock in the morning
13 so I won't have.

14 Number four, I don't want any input out there. I
15 don't want a court reporter. I don't want my clerk. I don't
16 want testimony. All of that takes place back here.

17 So throughout the -- when the sun comes up, quite
18 frankly, we attract very little attention. You can bring
19 everybody you want from each side, okay?

20 Number three, if I'm out there, then I'm looking at
21 everything. I'm looking at 209, 208, 205, 297, but I'm also
22 looking at the Brentwood School which is going to come up in
23 this and already has, so get those gates unlocked up there so
24 can I see it.

25 I want to see the oil areas, whatever acreage you folks

1 out at Bridgeland, same trip.

2 I want to see the two parking lots along Barrington.

3 I want to see Heroes Golf Course.

4 I want to see the dog park.

5 And also, I want to see UCLA baseball diamond and the
6 practice field.

7 Now, if you can't accomplish that, I'm not going.

8 Because, eventually, all of that is coming in in some form into
9 this case, so I'm at your disposal.

10 But, first, let me repeat.

11 No testimony.

12 Number two, all of you are present so it's not *ex parte*.

13 And I have my two primary counsel walking with me, so if one
14 counsel says something, the other counsel knows what that is.

15 Number three, if we're going, you're going to be
16 exhausted. We are going to do a lot of walking. And I want to
17 see a lot of that complex, and then be back in court,
18 hopefully, by 8:30 or 9 o'clock that day.

19 Last, if you can arrange all of that, I don't tell you
20 when we're going. I call you after hours at 5:00 to 7 o'clock
21 and I tell you it's the next day.

22 The reason for that, I don't want to have a parade of
23 people walking up to me. Got it? If you can't meet those
24 conditions, I'm not going. But if you can't meet those
25 conditions, these maps are helpful but they are totally

1 inadequate -- inaccurate.

2 I want aerial views now. I want to see the complex from
3 209, 208, 205, et cetera, from an aerial view, currently, as
4 well as these old-timer maps that you have got up there with
5 the building numbers on them.

6 I want to see the UCLA baseball field and try to get an
7 idea of the acreage out there.

8 I want to get Brentwood School.

9 I want to see the permanency or non-permanency of the
10 structures that were put in there and how much that
11 encompasses.

12 I want to see the golf course, the Heroes Golf Course.

13 I want to see the dog park.

14 I want to see the two parking areas on Brentwood, and I
15 want to see where you folks are drilling. I think you are
16 right across from 297. If you look at the map at 297, you go
17 across the street. I think you are right there, but I don't
18 want to guess, okay.

19 Now, you two get together and you have to lay all of
20 that out and you have to request and stipulate that I'm going
21 out there. Otherwise, I'm not going out there just at one
22 party's request, okay? And you tell me the timing, but then I
23 tell you what day you are getting up at 4 o'clock.

24 Have a nice lunch. We will see you at 1 o'clock.

25 (Lunch recess.)

1 THE COURT: Counsel, have you finished your direct
2 examination?

3 MR. KNAPP: Yes, Your Honor. We are done with
4 direct.

5 THE COURT: This would be cross-examination or
6 redirect examination. It doesn't matter how we label it.

7 MR. DU: Thank you, Your Honor.

8 THE COURT: Once again, would you identify yourself
9 for the record?

10 MR. DU: Tommy Du on behalf of the plaintiffs'.

11 THE COURT: Thank you.

12 REDIRECT EXAMINATION

13 (Plaintiffs' redirect examination)

14 BY MR. DU:

15 Q Good afternoon, Ms. Hammitt.

16 A Good afternoon.

17 Q Ms. Hammitt, I wanted to first talk to you about your
18 experience at the Cincinnati VA.

19 You mentioned that you were there in 2020, correct?

20 A Correct.

21 Q And in 2020, when you were there, what was the number of
22 homeless people in Cincinnati?

23 A The total number, I believe, at that time, that we
24 identified by name -- so this is not the total -- was about
25 200.

1 Q Homeless individuals?

2 A Homeless veterans.

3 Q What about individuals overall?

4 A I want to say that it was about 5,000 homeless individuals
5 in Cincinnati.

6 Q And you said that the number of homeless veterans was
7 around 200, correct?

8 A Correct.

9 Q A lot fewer than the number of veterans we have here in
10 LA, right?

11 A Correct.

12 Q You also indicated that when you were in Cincinnati, you
13 would go out to the encampments and talk to the veterans,
14 right?

15 A Correct.

16 Q Have you gone out to talk to the veterans here in LA?

17 A I have spoken with veterans around the campus. My job,
18 primarily, is an administrative role, and so I don't typically
19 do street outreach in this role.

20 Q So, Ms. Hammitt, if I understand your testimony correctly,
21 you don't typically go out to encampments here in LA, correct?

22 A I do not.

23 Q Let's take a look at our favorite exhibit, Exhibit 1214.

24 I think you have that in front of you. I'm going to flip to
25 page 4. And let's blow up the SPA 5 and 8 in the top left

1 corner, the two boxes.

2 Ms. Hammitt, I know you indicated earlier that you are
3 not familiar with these service planning areas. But I just
4 wanted to check if you are now familiar with what service
5 planning area 5 is?

6 A SPA 5 is West Los Angeles. So it includes the VA medical
7 center campus but also Santa Monica and, I believe, a part of
8 Culver City.

9 Q And SPA 8 covers the south bay, correct?

10 A Correct.

11 Q Including Catalina Island, correct?

12 A Correct.

13 Q And here in SPA 5 and 8, we have eight social workers,
14 correct?

15 A That's correct.

16 Q Or the full-time equivalent of eight social workers,
17 right?

18 A That's correct.

19 Q Then for SPAs 5 and 8, we have a total of four peer
20 specialists, correct?

21 A That's correct.

22 Q Let's take a look at the bottom corner for SPA 5 -- sorry,
23 SPA 4. Are you familiar with what SPA 4 covers?

24 A SPA 4 is downtown LA.

25 Q So in downtown LA, you have the equivalent of eight

1 full-time social workers, right?

2 A That's correct.

3 Q That is a same amount as for both SPA 5 and SPA 8,
4 correct?

5 A That's correct.

6 Q And in SPA 4, you have five peer specialists, correct?

7 A That's correct.

8 Q That's one more peer specialist than you have for both 5
9 and 8, correct?

10 A That's correct.

11 Q You also indicated that these employees either worked
12 on-site or at home, correct?

13 A Correct.

14 Q And you indicated that if they were working from home,
15 they would be working within the specific SPA area that they
16 service, correct?

17 A I do believe I said that. And it may not be all the time.

18 Q So is there any way for you to be certain that every
19 employee who works from home lives and works within that SPA
20 area?

21 A There is a way to look at their addresses. I don't have
22 access to their personal addresses here or don't have that in
23 my knowledge base, but I think there could be a way to
24 determine if they are living closely to the area that they
25 work.

1 Q But you don't know as of this point, correct?

2 A I don't.

3 Q And it's also possible that they could be teleworking from
4 a different country, correct?

5 A That would not be correct. If they are doing that, they
6 are doing that without our knowledge.

7 Q But they can do that, right, without your knowledge?

8 A They are not permitted to telework unless -- the telework
9 agreement actually stipulates the address of their location
10 where they are teleworking.

11 And, so, we would not permit that to happen out of state
12 or out of country or, frankly, out of the area because they
13 need to serve the veterans in the community that they work in.

14 So before an employee can telework, they have to have a
15 telework agreement that is approved, and that would be
16 reviewed.

17 Q And I understand what your testimony is about what is
18 permitted versus what is not.

19 But have you ever confirmed whether someone is actually
20 working within the area they were supposed to work?

21 A Have I ever physically confirmed --

22 Q Yes.

23 A -- that they are working where their telework agreement
24 says? I have not physically confirmed that.

25 Q You can take this exhibit down.

1 Earlier, you talked about how the PIT count
2 overestimates veterans. Do you recall that?

3 A Vaguely. I think I remember saying that I wasn't actually
4 sure that the PIT count was accurate.

5 Q You also testified that you have no proof that the PIT
6 count overestimates veterans, correct?

7 A I do not have proof that it overestimates, other than just
8 our work in the Vet Connect project and seeing that some people
9 that were originally considered veterans did not show that
10 status after we varied.

11 Q So during the Veteran Connect pilot program, you are not
12 going out and talking to every single individual to determine
13 whether they are a veteran or not, correct?

14 A I'm not. But my team is working with a team, and they are
15 going out to connect with each veteran and talk to them.

16 Not all of the veterans in the PIT count but the
17 veterans that they connected with during that vet connect. And
18 they are connecting them with medical services and other
19 services.

20 Q And you are telling me that they are speaking with every
21 single individual they see in the encampments?

22 A So, they are with a team of individuals that are also
23 non-VA attempting to speak with everyone that they encounter in
24 those areas.

25 Q And, Ms. Hammitt, you would agree with me that there are

1 times when a person does not want to identify themselves as a
2 veteran, correct?

3 A I would agree with that.

4 Q For example, if someone was previously incarcerated, they
5 may feel ashamed such that they don't want to identify
6 themselves as a veteran, correct?

7 A That happened when I would visit veterans sometimes in
8 jails. Sometimes they wouldn't want to say that they were a
9 veteran while they were incarcerated.

10 And I'm not sure the same holds true with outreach in
11 the community, but I do think maybe some people feel shame
12 around being homeless and identifying as a veteran.

13 Q On direct examination, you testified about behavioral
14 flags.

15 Do you remember that?

16 A I do.

17 Q You testified that someone can make an objective report in
18 the veteran's file whenever there is an incident. Do you
19 recall that?

20 A I do.

21 Q You would agree with me that when these reports are made,
22 veterans do not have an opportunity to present their side of
23 the story of what happened, correct?

24 A I do not believe that the veterans actually meet with that
25 committee that decides whether or not to put a flag in their

1 chart.

2 I know there is a discussion and notification to the
3 veteran, but I'm not sure that the veteran's involved in
4 determining whether that flag occurs.

5 Q So I understand you correctly, whether a veteran receives
6 a behavioral flag is based solely on the report made by that VA
7 employee, correct?

8 A Would you mind repeating that again?

9 Q So if I understand you correctly, whether a veteran
10 receives a behavioral flag is based on what the VA employee
11 puts in that report, correct?

12 A I don't think it's based solely on that because there is a
13 team of individuals that come together and they look at the
14 individual case.

15 They also look at history of other reports being filed
16 on a certain individual. So all of that is part of the
17 discussion.

18 Q And so the team that is looking at the reports is only
19 looking at the reports made by the VA employee and other VA
20 employees, right?

21 A That is my understanding.

22 Q You also testified that a veteran shouldn't be prevented
23 from housing by a behavioral flag, correct?

24 A That's correct. There are some cases where a veteran may
25 be prohibited from certain areas. I have seen behavioral flags

1 that indicate that person is not to be housed within a certain
2 amount of distance from a particular area where care is
3 provided.

4 Q But it's your testimony that that shouldn't happen,
5 correct?

6 A It's my testimony that veterans may have disruptive
7 behaviors, and their disruptive behaviors should not prohibit
8 them from being in permanent housing.

9 They deserve permanent housing, and they deserve to be
10 sheltered. And, so, I -- even if individuals have disruptive
11 behavior, they still, I believe, have a right to housing.

12 Q Has a veteran ever been kicked out back to the street
13 because of a behavioral flag?

14 A So veterans have been discharged from programs due to
15 disruptive behavior. Because of flags -- I'm not certain if
16 they have been discharged because of a flag, but they have been
17 discharged from housing due to disruptive behavior.

18 Q Ms. Hammitt, earlier you testified that you were proud to
19 report that the number of HUD-VASH referrals increased. Do you
20 recall that?

21 A I do.

22 Q You mentioned then a time period between October 22 and
23 June 23, there were approximately 600 referrals, correct?

24 A I think it was a little bit higher, like 600 -- mid 600.

25 Q During this time, you still met with the Public Housing

1 Authorities, correct?

2 A Yes. The frequency was a little bit different. And they
3 weren't involved in our One Team efforts during that time.

4 Q But you were still regularly meeting with them, correct?

5 A Correct.

6 Q And during this time, the Public Housing Authorities
7 informed you that they weren't receiving enough referrals,
8 correct?

9 A Yes. That they had said that during that time.

10 Q Had they said that at a time prior to October '22?

11 A My understanding is that's always been a concern of the
12 Public Housing Authority wanting to receive more referrals than
13 we were sending their way.

14 Q And it was only recently, during this past nine-month
15 period, that you were able to increase the number of referrals,
16 according to you, correct?

17 A I think we have seen more success. I can't speak to
18 before I started in this role, but it definitely has shown,
19 when you look at the two time frames, that those referrals have
20 increased.

21 Q Let's talk a bit about A Bridge Home. You talked about it
22 with Mr. Knapp, and we talked about it yesterday. I just
23 wanted to make sure I understand this clearly.

24 In 2024, A Bridge Home, right now, currently has 32
25 available units, correct?

1 A Correct. They are contracted for 32 beds at A Bridge
2 Home.

3 Q How many units were available in 2023?

4 A I am not certain about this number, but I want to say that
5 there were 50 -- close to 50 beds in each tent.

6 So A Bridge Home had two tents, and I believe there were
7 50 in each bay.

8 Q In 2023, A Bridge Home had the capacity for 100 emergency
9 shelter beds, correct?

10 A I believe that's correct.

11 Q And in 2023, there were only capacity for 50 as a result
12 of understaffing, correct?

13 A That's my understanding.

14 Q And prior to 2023, A Bridge Home could fit up to 80, even
15 when accounting for COVID social distancing rules, correct?

16 A I'm actually not certain about that number.

17 Q You also testified about the duration someone stays in
18 CTRS or the tiny shelters. Do you remember that?

19 A I do.

20 Q What is the longest time an individual has stayed in the
21 tiny shelter?

22 A I believe that there have been a couple of individuals
23 that have stayed there for over 200 days. In a couple of
24 cases, someone was residing there for a year.

25 I am not exactly sure how many veterans or what that

1 time frame was, but it's my understanding that the length of
2 stay was quite lengthy prior to what it is now.

3 Q And is that length of stay in CTRS related to the lack of
4 permanent supportive housing?

5 A I, actually, don't think so.

6 I don't think it's due to the lack of permanent
7 supportive housing. Perhaps maybe, you know, an individual may
8 not have been interested or willing to use one of our
9 tenant-based vouchers and working with a private landlord, or
10 perhaps the individual had medical complexities and wanted to
11 focus on mental health treatment or medical treatment.

12 I don't know that that would necessarily be true that it
13 was due to the lack of permanent housing.

14 Q Well, you are just not sure, right?

15 A I mean, I think there is a lack of affordable housing in
16 general.

17 It's not due to the lack of vouchers; that is for sure.
18 But I'm not sure if it was due, at that time, to the lack of
19 permanent supportive housing because we have ability to bring
20 people into case management and utilize vouchers.

21 Q Are there enough permanent supportive housing units on the
22 West LA VA campus to house everyone who is currently living in
23 the tiny shelters?

24 A Available units now to house everyone in CTRS on our
25 campus? There are not.

1 Q Earlier, you talked about the number of people who are
2 part of the leadership of the One Team approach. Do you recall
3 that?

4 A I do.

5 Q You mentioned LAHSA. That's L-A-H-S-A, correct?

6 A Correct.

7 Q You mentioned Public Housing Authorities like HACLA,
8 correct?

9 A Correct.

10 Q Regional coordinators?

11 A Correct.

12 Q Mental health people, right?

13 A Social workers, yes. Yes.

14 Q Are there homeless veterans that are part of this
15 leadership committee?

16 A So our committee is chaired -- I mentioned James Zenner.
17 So Jim is a veteran. He's a veteran, and he was once homeless.
18 And so that was really important for us to have someone with
19 lived experience guiding our work.

20 I am not certain -- anecdotally, I can say that there
21 are some people that are involved in the leadership team that
22 have experienced homelessness. They are not sitting on that
23 board in a lived experience seat. They bring that with them,
24 that experience or knowledge.

25 But one thing we have been talking about in One Team is

1 creating a veteran advisory committee and how important that is
2 to make sure that we get veterans' voices at the table when
3 we're making our decisions.

4 Q You don't currently engage any veterans who are currently
5 homeless in the leadership team, correct?

6 A So not as part of that space.

7 We don't do that formally on the committees. But all of
8 us have mechanisms in our agencies where we have gatherings of
9 veterans who are able to share their experiences.

10 At the VA, we call those veteran engagement committees.
11 Grant and Per Diem programs require that individuals that are
12 working in their agencies are formerly homeless. They have to
13 have a little bit of a representation for lived experience.

14 I don't know in terms of them holding actual leadership
15 advisory committees, but I do know their boards, it's required
16 as part of the grant that they have -- offer employment
17 opportunities for veterans who were formerly homeless and that
18 they get that stakeholder engagement.

19 Q Ms. Hammitt, my question was much simpler. You don't
20 currently have any veterans experiencing homelessness on this
21 leadership committee, correct?

22 A Currently experiencing homelessness? No, we do not.

23 Q You also testified that you are currently staffed at
24 87 percent, correct?

25 A Yes. It's about 87 -- it might be a little bit higher.

1 Q And that is ten positions short of the 90 percent goal,
2 right?

3 A Just for HUD-VASH.

4 So, in HUD-VASH, we need ten more positions to get to
5 that 90 percent.

6 Q How many more positions do you need to fill to get to
7 100 percent?

8 A I believe that it's 60 positions across all general
9 purpose funding and special purpose funding to get to that 90
10 -- I'm sorry, to get to 100 percent.

11 Q How many veterans would be served by the addition of 60
12 positions?

13 A So those positions that are called out aren't all direct
14 clinical positions.

15 It's really hard to estimate how many additional
16 veterans would be served. But, certainly, even ten in HUD-VASH
17 and filling that to that 90 percent would help.

18 Previously, we talked about one clinician to 25
19 veterans. And I know that is really, kind of, tough to parse
20 out, and it's complex because there is a lot of staff that
21 serve that veteran. But we could say -- if we did that math
22 and did one staff for every 25 veterans, I guess that would be
23 250 veterans served.

24 Q Or ten positions, right?

25 A I mean, I think if you use the 1 to 25 ratio, even though

1 it's difficult to parse that out, that -- that could be
2 reasonable, if they were all social workers or all clinicians
3 that were serving the veterans.

4 Q So if you use the 1 to 25 ratio, for the six hundred --
5 for the 60 remaining positions, that would be equivalent of an
6 additional 1,500 veterans served, right?

7 A So those other positions -- I would focus mainly on the
8 ten positions for HUD-VASH because that's where we do that
9 ratioed care. The additional positions could be serving in
10 HPACT in a clinic that provides medical care. Or it could be
11 serving as a substance abuse treatment subspecialist, a SUD
12 specialist, or an employment specialist, or an administrative
13 staff member that helps with taking minutes for our meetings
14 with the PHAs or things like that.

15 So it would be hard to capture a number of veterans
16 based on how many positions, unless I knew exactly where those
17 positions were.

18 Q So somewhere between 250 and 1,500, then?

19 A I actually would not agree with that methodology because I
20 think you would have to look at each position. For HUD-VASH,
21 it's a little less complex than looking at the whole service
22 and looking at the specific positions.

23 For example, we have a position vacant at CTRS. That
24 individual serves as a part of a treatment team and doesn't --
25 we don't count specific veterans that are assigned to those

1 individuals in CTRS, just like Grant and Per Diem or some other
2 programs, because of their responsibilities in that program
3 that they work.

4 Q Ms. Hammitt, this year is the first time you have
5 surpassed the 80 percent staffing level since you joined the
6 West LA VA, correct?

7 A I'm not sure what the staffing was when I was not in this
8 role. But since I have been in this role, I -- this is the
9 highest that we have been.

10 Q It's the first time you surpassed 80 percent, correct?
11 Since you have been in this role?

12 A I can't say that with certainty. But I do recall -- I do
13 recall being in the low 80s. I would have to look back on HR
14 staffing grids to tell you for sure since I started.

15 Q But as you said, this is the highest you have ever -- this
16 is the highest percentage you have ever been at, correct?

17 A Since I have been in this role as chief, we're at the
18 highest percentage of filled positions than we have been in the
19 past.

20 Q But that is still short of your goal of 90 percent,
21 correct?

22 A Yes. We're not quite at 90 percent yet.

23 MR. DU: Thank you, Ms. Hammitt. No further
24 questions, Your Honor.

25 THE COURT: Redirect or --

1 MR. KNAPP: No redirect, Your Honor.

2 THE COURT: Okay. Counsel, any other questions that
3 anybody would like to ask while she's on the stand?

4 Do you want her left on call just in case? We will be
5 polite. I doubt she's coming back but --

6 MR. DU: No, Your Honor.

7 MR. KNAPP: Yeah. I think we're happy to let
8 Mr. Hammitt go free.

9 THE COURT: Thank you very much for your courtesy.
10 You may step down.

11 THE WITNESS: Thank you, Your Honor.

12 THE COURT: Counsel, call your next witness, please.

13 MR. SILBERFELD: Thank you, Your Honor. Roman
14 Silberfeld for the plaintiffs.

15 We will call John Kuhn.

16 THE COURT: Thank you very much.

17 MR. SILBERFELD: Your Honor, just while we're
18 waiting for the witness, I brought a flip chart.

19 THE COURT: Great.

20 MR. SILBERFELD: And I want to illustrate some of
21 the witnesses' testimony. My question is, where would you like
22 it?

23 THE COURT: No. You put them any place you like
24 them.

25 I can actually walk around and view them. If you want

1 to put them right here in front of them, that's fine.

2 MR. SILBERFELD: May I question from there?

3 THE COURT: Absolutely.

4 MR. SILBERFELD: Thank you.

5 THE COURT: Just get a microphone closer so we
6 can -- we can do away with the formality, as long as each side
7 wants to make a presentation. That's fine.

8 Sir, if you would like to step forward. Would you raise
9 your right hand, sir.

10 THE COURTROOM DEPUTY: Do you solemnly swear that
11 the testimony you are about to give in the cause now pending
12 before this Court shall be the truth, the whole truth, and
13 nothing but the truth, so help you God?

14 THE WITNESS: I do.

15 THE COURT: Thank you. Would you please be seated
16 here in the witness box that's just to my right. The steps are
17 closest to the wall.

18 And, sir, after you are comfortably seated, would
19 you state your full name, please.

20 THE WITNESS: My name is John Kuhn.

21 THE COURT: Would you spell your last name, sir.

22 THE WITNESS: K-U-H-N.

23 THE COURT: Thank you. This is direct examination.
24 Counsel, once again, would you identify yourself.

25 MR. SILBERFELD: Certainly. Roman Silberfeld.

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JOHN KUHN,
having been duly sworn,
testified as follows:
DIRECT EXAMINATION
(Plaintiffs' Direct)
BY MR. SILBERFELD:
Q Good afternoon, Mr. Kuhn.
A Good afternoon.
Q Let's begin here. You have been with the VA since
approximately 1990; is that correct?
A That is correct.
Q And you have been in Los Angeles since approximately the
fall of 2022; is that right?
A That's correct.
Q And you came to Los Angeles for the first time as part of
a detail. Do you recall testifying about that at your
deposition?
A Yes.
Q Would you explain to the Court what a detail is.
A A detail is when you assume a position on a temporary
basis. You are filling in for a vacant position.
Q Okay. And when you came to Los Angeles in -- I think it
was September of 2022, was it not?
A Yes.
Q What position were you filling in for on a detail basis?

1 A I had -- was the national director for SSVF, and I was
2 coming into a detail for the deputy medical center director of
3 Greater Los Angeles.

4 Q You mentioned SSVF. We have heard testimony about this
5 already today. Did you have something to do, Mr. Kuhn with the
6 creation of SSVF?

7 A Yes. I was the original national director. I helped
8 write the regulations, helped -- led the development of the
9 program rules, policies, procedures, so forth.

10 Q Is it an overstatement to say it was your idea?

11 A Yes. That would be an overstatement.

12 Q I was trying to give you credit.

13 A Thank you.

14 Q And when you came to the West LA VA in the fall of 2022,
15 it was for the position of deputy director of the medical
16 center?

17 A Correct.

18 Q Is that the number two position?

19 A It sounds like it's a number two position. There is
20 actually a leadership team of seven people, the director, of
21 course, being the top person of that leadership team. But of
22 the other six people, roles are sort of co-equal.

23 Q All right. I'd like to make a chart with you of the
24 organizational structure at the West LA VA.

25 When you became the deputy director, which was exactly

1 when, sir?

2 A I became deputy director in April of 2023.

3 Q That was in April of 2023?

4 A Yes.

5 Q All right. And the medical director of the medical center
6 is the highest officer for the entire facility; is that right?

7 A That's correct.

8 Q And that title is medical director?

9 A Yes. Medical center director.

10 Q Medical center director?

11 A Yes.

12 Q And then you, in the position of deputy medical center
13 director, are directly under the medical center director; is
14 that right?

15 A That's correct.

16 Q Now, I know that there are probably other functions that
17 you have responsibility for. But there are two that are
18 involved in this lawsuit.

19 One is issues around homelessness. You understand that?

20 A Yes.

21 Q And the other is issues around housing. Correct?

22 A Correct.

23 Q You have responsibility, do you not, for at least those
24 two functions through other people?

25 A That is correct.

1 Q And you may have other responsibilities which don't bear
2 on the issues in this case. But as to those two, you have a
3 chief of each one of those, do you not?

4 A That is correct.

5 Q All right. And for the homelessness issues for which you
6 have responsibility, what is the title of the person who has
7 that chief role?

8 A Chief of CERS.

9 Q C-E-R-S?

10 A Correct.

11 Q We know what that means now.

12 And that is Ms. Hammitt; is that right?

13 A Yes.

14 Q And then for the housing issues, Mr. Kuhn, there is
15 another chief, right?

16 A Yes.

17 Q And that is the chief of planning?

18 A Yes. It's SFMP, strategic facility master plan is the
19 formal title.

20 Q Say that one more time.

21 A SFMP is for short.

22 Q Strategic --

23 A Facility master plan.

24 Q That is Ms. Black?

25 A She's acting, correct.

1 Q Chelsea Black?

2 A Correct.

3 Q So the chief of CTRS is responsible for the homelessness
4 issues, correct?

5 A Yes.

6 Q And the chief of strategic --

7 A Let's call it planning. It will be easier.

8 Q Let's call it planning. The chief of planning, Ms. Black,
9 she's responsible for housing; is that right?

10 A Yes.

11 Q Among other things?

12 A She's involved in helping support the master plan.

13 So developing housing is going to be more involved than
14 that. So she's not the only person involved in developing
15 housing on the campus.

16 Q Okay. Great. We will leave that up for a second.

17 Let me just review a little bit about your educational
18 background.

19 I'm sure on direct examination, counsel will go into
20 this a little bit further.

21 You have a bachelor degree in psychology, yes?

22 A Yes.

23 Q And that's from Brown University?

24 A Yes.

25 Q And roughly when did you get that, sir?

1 A 1984.

2 Q And you have two master's degrees, correct?

3 A Yes.

4 Q You have a master's in social welfare?

5 A Social work, yes.

6 Q Social work. And that is from Columbia?

7 A Yes.

8 Q And you have another master's degree in public health?

9 A Yes.

10 Q And you got that from Rutgers?

11 A Yes.

12 Q All right. Without any undue modesty, Mr. Kuhn, have you
13 innovated since you became the deputy director here at the West
14 LA VA?

15 A I would like to think I have innovated my entire career.

16 Q All right. And, in particular, I want to talk about some
17 of the accomplishments you have brought to the West LA VA since
18 you have been here. All right?

19 A Okay.

20 MR. SILBERFELD: I suppose, Your Honor, at the
21 appropriate time, at the end of the day, we can either
22 photograph these flip charts or mark them, as the Court may
23 wish.

24 THE COURT: Sure.

25 BY MR. SILBERFELD:

1 Q I know it takes a village to accomplish anything.

2 A Yes.

3 Q And, again, without any undue modesty on your part, you
4 have, in fact, innovated some of the systems and processes at
5 the West LA VA since you arrived, correct?

6 A I have helped set a vision for the program. But as you
7 have already shared, it takes a village.

8 Q Okay. One of the things you innovated since you arrived
9 less than two years ago was a hotline, correct?

10 A Correct.

11 Q Would you describe to the Court what the hotline is all
12 about?

13 A The idea behind the hotline is we wanted to establish
14 same-day access for veterans who were unsheltered. The most
15 dangerous place for a veteran is on the street.

16 There is significant mortality and morbidity risks to
17 veterans on the street. And we wanted to be able to offer an
18 easy pathway for veterans with a simple phone call where they
19 could get safe housing.

20 Q When was the hotline started?

21 A December of 2022.

22 Q Was there anything particularly revolutionary about a
23 hotline in December of 2022?

24 A No.

25 Q And was this hotline that you instituted the first time

1 that you are aware of in the history of the VA that it had a
2 hotline in West LA?

3 A So there is a hotline for the national -- there is the
4 national call center --

5 Q Yes.

6 A -- where veterans can call and get assistance. This is a
7 specific purpose to get unsheltered veterans immediate access
8 to emergency housing. So that, yes, it's the first time that
9 type of hotline had been established.

10 Q In the history of the VA, as far as you know here in West
11 LA?

12 A As far as I know.

13 Q All right. You innovated, as well, a program around
14 SQUARES. Right?

15 A Yes.

16 Q Please tell the Court what SQUARES is.

17 A That actually occurred before I was at West LA. That is
18 while I was the national director of SSVF. We have a --
19 veterans, generally, don't carry their DD214 on their back
20 pocket when they are homeless. And we have what can be,
21 certainly at that time, a sometimes cumbersome process to
22 establish eligibility if you are a veteran. It's easier now.
23 There are more electronic options available.

24 But at that time, if you are a veteran, we wanted to be
25 able to help our grantees establish eligibility immediately, so

1 that way, there was no delay waiting for veterans to determine
2 whether they are eligible for care or not. SQUARES allowed our
3 grantees to go online, put in basic information, and get
4 immediate confirmation of eligibility to begin services
5 immediately.

6 Q Okay. And when was SQUARES rolled out for the vets?

7 A I think it was around 2016. I'm not exactly sure.

8 Q 2016?

9 A I certainly could be wrong.

10 Q Here in LA?

11 A Oh, no. This is nationally. So this was done before I
12 got to LA.

13 Q Okay. Was it available and used in Los Angeles before you
14 arrived?

15 A Yes. It was used nationally.

16 Q Okay. Was it effective?

17 A Yes.

18 Q Okay. The hotline that you founded resulted in a number
19 of people, veterans, homeless veterans, coming in from
20 homelessness, isn't that right?

21 A As of last week, 503 veterans had been brought in from the
22 streets into temporary housing.

23 Q Okay. Another one of your accomplishments since you
24 arrived less than two years ago was to expand the tiny shelters
25 on the campus, correct?

1 A Yes.

2 Q And that is CTRS, right?

3 A CTRS are the tiny shelters. We have other shelter
4 programs on the campus as well.

5 Q You were able to accomplish an expansion of the CTRS tiny
6 shelters, right?

7 A Yes, although CTRS existed before I got there.

8 Q Yes. And the expansion that you were able to accomplish
9 was from 120 units to 135; is that right?

10 A It's actually closer to 147 now, if you count the drop-in
11 units.

12 Q I was going to talk about drop-in separately.

13 A Yes.

14 Q Okay. So CTRS went from 120 to 135?

15 A Yes.

16 Q And then you mentioned drop-ins. Please tell the Court
17 what a drop-in is.

18 A Drop-in units are for veterans who are not ready to engage
19 in the program or come too late to be enrolled into the
20 program, late in the evening. It's -- we have 12 units. It
21 used to be six. And the idea is to use these drop-in units,
22 first, to provide a safe place for the veterans, but also an
23 opportunity for engagement.

24 We want veterans who maybe are hesitant to commit to the
25 full programming of CTRS to at least be able to connect to

1 staff and to services. And, hopefully, we can engage them in
2 the full program.

3 Q And the expansion of the drop-in units that you are able
4 to accomplish was from 6 to 12?

5 A Yes.

6 Q Is that right?

7 A Yes.

8 Q Having accomplished the expansion of the CTRS tiny sheds,
9 are you aware of any reason why this couldn't have happened
10 sooner, this expansion?

11 A There wasn't sufficient staff.

12 So one of the challenges with any program, you need both
13 the physical infrastructure to do it, but you also need the
14 staffing levels to make it possible.

15 Q Okay. And when did this expansion of CTRS take place?

16 A It was about a year ago, I guess.

17 Q So summer of '23?

18 A Roughly.

19 Q And with respect to the drop-in units, expanding those
20 from six to 12, why wasn't that done earlier, as you understand
21 it?

22 A Same reason.

23 Q Staffing?

24 A Yes.

25 Q And when was the expansion of the drop-in units

1 accomplished?

2 A More recent. Let's say six to eight months ago.

3 Q Call it January of this year?

4 A Why not.

5 Q Okay.

6 A I could get exact dates for you, if that was necessary.

7 Q That's okay.

8 Another one of your accomplishments is that you had
9 something to do with the Bridge Home, correct?

10 A Yes.

11 Q Tell the Court, please, what the Bridge Home is and what
12 you had to do with it.

13 A All -- what all of these initiatives have in common is to
14 improve access. We want veterans to be able to, with the
15 minimum possible number of barriers, come into our program and
16 be engaged in services and, of course, have the safety of being
17 in temporary housing.

18 We have had A Bridge Home, which was dating back to
19 Mayor Garcetti's initiative of some years ago, on the grounds
20 for years.

21 Unfortunately, the previous vendor had a screening
22 process that was burdensome and wasn't responsive to the needs
23 of our veterans.

24 We brought in a new vendor with a contract that
25 stipulated they had to offer same-day access and they,

1 essentially, couldn't turn any anyone down with -- unless there
2 was -- it was a very high bar to turn people away.

3 And this has proven to be quite successful.

4 And the other thing --

5 THE COURT: I'm sorry. Would you move that mic just
6 a little bit closer.

7 THE WITNESS: Oh, sure.

8 THE COURT: My apologies.

9 THE WITNESS: I also tend to speak very fast I'm
10 told because I'm a New Yorker, so if I need to slow down, tell
11 me.

12 The other thing we did with A Bridge Home is we
13 attempted, in response to what veterans had told us, to
14 introduce some privacy. It's a congregate area. You can't
15 avoid the fact that there are people in one big tent.

16 But we created bays with different kind of furniture so
17 that way people had a greater experience of privacy. We shrunk
18 the bay from 50 units to 32 as a result. But it's proven to be
19 much more attractive to veterans who are coming in for
20 services.

21 BY MR. SILBERFELD:

22 Q The Bridge Home that exists today, as far as the inside of
23 it is concerned, how would you compare it to the size of this
24 courtroom?

25 A Probably comparable. Maybe even a little bigger. One

1 bay -- I would say it's about this size.

2 Q Okay. And today, there are how many beds in that space?

3 A 32.

4 Q And when was it you accomplished re-imagining, if you
5 will, of the Bridge Home?

6 A It reopened, I believe, in April.

7 Q Of this year?

8 A Yes.

9 Q How long had it be not functioning terribly well before
10 you decided to re-imagine it, sir?

11 A Probably years. And part of the challenge is we had a
12 contractor that we had attempted to work with, as is required.
13 We can't just get rid of contractors without cause. So we
14 attempted to work with them unsuccessfully. Ultimately, they
15 left.

16 Q Other than your vision to re-imagine the Bridge Home, was
17 there anything about reopening it this year that couldn't have
18 been done a year ago or two years ago or three years ago?

19 A I can only comment on the period of time I was there so
20 I --

21 Q Okay. What do you think?

22 A I think it could have been changed earlier.

23 Q Okay.

24 A But the -- there were efforts being made to probably
25 improve and fix what was going on.

1 Q Mr. Kuhn, when you arrived in the fall of '22, I gather
2 that one of the first things you did was learn about the master
3 plan for the West LA Campus, correct?

4 A Certainly one of the things on my -- yes.

5 Q And just to be clear, you had nothing to do with writing
6 it?

7 A Correct.

8 Q But it is a guidance document for you and your work; is
9 that fair to say?

10 A Yes.

11 Q Okay. Let's pull up, if we can, Exhibit 42.

12 And, Your Honor, just for the record's sake and for
13 clarity, these are excerpts from the master plan, which is
14 Exhibit 1. But because the master plan itself is almost 700
15 pages, we have excerpted certain portions of it, and counsel
16 have all of these.

17 THE COURT: Thank you. Thank you very much. I
18 appreciate it.

19 And I'm going to have this put up on the board at
20 the same time, Counsel, so you can --

21 MR. SILBERFELD: We have it up.

22 THE COURT: Oh, there it is right there. I'm sorry.

23 BY MR. SILBERFELD:

24 Q So, Mr. Kuhn, you became familiar with the master plan as
25 your guidance document as you came from being a detailed deputy

1 director to the actual deputy director in the spring of '23,
2 right?

3 A Yes.

4 Q And you work with this document, do you not?

5 A Yes.

6 Q Okay. You have already said that the most dangerous place
7 for a person to be is on the street. You believe that, right?

8 A I do.

9 Q And is it the first job of VA to get people off the
10 streets, to get veterans off the streets?

11 A It is.

12 Q And do you read the master plan as addressing those
13 issues?

14 A It is a partial effort to address those issues because it
15 was never meant to be the entire effort.

16 Q And, in fact, if every single thing that is described in
17 the master plan was accomplished, it would not have a robust
18 impact on veteran homelessness in this community, right?

19 A It would have the impact it needs to have.

20 Q It would not have a robust impact?

21 A No. It would have the impact it needs to have.

22 The master plan is not designed to end homelessness in
23 Los Angeles.

24 It's designed to have a contribution to that goal.

25 Q Is it intended to end veteran homelessness in this

1 community?

2 A It is intended to contribute to the end of homelessness in
3 this community.

4 Q But not at the robust impact level?

5 A Well, no. It's part of an overall plan. The master --
6 there is a vision to end homelessness in California and -- in
7 Los Angeles. Part of what will get us there is the master
8 plan. But 90 percent of all of the work that needs to happen
9 happens outside of the campus.

10 Q All right. Do you have Exhibit 42 in front of you, sir?

11 A I do.

12 Q And you will remember, I showed you these at the time of
13 your deposition?

14 A I recall.

15 Q And that I took excerpts from a very large document and
16 attached --

17 A That was very helpful. Thank you.

18 Q Okay. Sure.

19 So Exhibit 42, page 2 of it -- which, for reference
20 purposes, is page 25 of the master plan -- do you have that in
21 front of you, sir?

22 A I do.

23 Q And do you see Figure 2.2 -- or 2-2, rather, at the bottom
24 of that page?

25 A I do see it.

1 Q Can you describe to the Court what that is, please.

2 A It describes the point-in-time count in 2018, '19, and '20
3 that -- point-in-time count is the number of veterans
4 experiencing homelessness.

5 Q And across the very bottom, although it's very small and
6 very hard to see, it provides data for each of the geographic
7 areas that are part of the catchment area that the West LA VA
8 serves; is that right?

9 A Yes. That's correct.

10 Q Okay. And so the figures there -- and understanding that
11 this was in 2022, these are three years of data -- we have
12 3,886 homeless veterans in 2018, correct?

13 A That's correct.

14 Q A slight decrease to 3,537 in 2019, right?

15 A Yes.

16 Q And a slight increase in 2020 to 3,681. Do you see that?

17 A Yes.

18 Q In your view, when you first came to California to work at
19 the West LA VA, did these figures represent to you an urgent
20 need to do something about veteran homelessness?

21 A It's why I came.

22 Q So yes is the answer?

23 A Yes.

24 Q Thank you.

25 As you assumed your job as the deputy director, did you

1 familiarize yourself with the history of this property?

2 A Yes.

3 Q And if you'd turn to page 5 of Exhibit 42, rather, which
4 is page 98 of the master plan itself, do you see the title
5 there at the top, West LA Historic Preservation Priorities?

6 A Yes, I do.

7 Q And then in the first bullet point in that column, there
8 is a description of this property. Do you see that, sir?

9 A Yes, I do.

10 Q And the description is that the West LA veteran community
11 and surrounding neighborhoods recognize the history of the West
12 LA Campus as a site of veteran healthcare and residency.

13 Do you see that, sir?

14 A Yes.

15 Q Is that consistent with what you understand the history of
16 the property was?

17 A It's the current use of the property. It depends on how
18 far back we go in history to say whether that's a part of the
19 history.

20 Q You understand that at some point in the past, this
21 property was used for residential purposes by veterans?

22 A Yes.

23 Q And in the same document, Exhibit 42, on page 6, which is
24 page 122 of the master plan, do you see a page that is titled
25 Future Redevelopment Opportunity Areas?

1 A I do.

2 Q And what is your understanding -- having reviewed the plan
3 and having now worked on the plan for a number of years
4 yourself to bring it to fruition, what does the future
5 redevelopment opportunity areas refer to?

6 A So there are a number of areas on the campus that are both
7 undeveloped, unused, that can be used for housing development.
8 There is also areas on the campus that are used for activities
9 that are not directly related to healthcare or housing that
10 could potentially be made available for other development.

11 Q All right. And further down on that page, there are a
12 series of opportunity areas described. Do you see that, sir?

13 A Yes.

14 Q One of them is Brentwood School?

15 A Yes.

16 Q One of them is the Brentwood Village opportunity area?

17 A Yes.

18 Q Another is the Veterans Barrington Park?

19 A Yes.

20 Q The golf course?

21 A Yes.

22 Q The stadium? That is the UCLA baseball stadium?

23 A Yes.

24 Q And other areas, right?

25 A Yes.

1 Q In fact, you used this information yourself, did you not,
2 in designing an idea for modular housing on the campus last --
3 earlier this year, correct?

4 A It might have been last year, but, yes, I did.

5 Q Okay. We will talk about the modular housing in a little
6 while.

7 And when you first took on your role, did you come to
8 understand what the planning principles were that were adopted
9 in the master plan that you were going to be asked to carry
10 forward to fruition?

11 A I'm not quite sure I understand the question.

12 Q Are you aware that there are planning principles in the
13 master plan, sir?

14 A There are guiding principles, if that's what you are
15 asking me, about what is going to be done through the master
16 plan to develop housing.

17 Q Take a look at page 8 of Exhibit 42, which is page 130 of
18 the master plan itself.

19 A Yes. I'm aware of these.

20 Q Okay. These planning principles are the guiding
21 principles for planning the campus, correct?

22 A Yes.

23 Q Now and into the future, true?

24 A Yes.

25 Q All right. The first planning principle right below the

1 heading there says what, sir? Could you read that first
2 sentence to us?

3 A Development? Is that what you want me to read?

4 Q No. Right below the heading of planning principles. It
5 begins to establish.

6 A Oh, to establish a true community for resident and
7 nonresident veterans alike requires that the West LA Campus
8 embody the elements of a healthy community as understood
9 through today's best practices in community design.

10 Q Do you have an understanding of what healthy community
11 refers to?

12 A I would like to think I do.

13 Q Okay. Tell us, please.

14 A We want to develop a community that is not just
15 apartments. Certainly, housing veterans requires apartments,
16 but all of us want to live in communicates that are vibrant,
17 that have active socialization, commercial activity, retail
18 space, places that make it feel like a neighborhood, not just a
19 place you go into to close the door.

20 Q So a sense of community?

21 A Yes.

22 Q That embodies not just housing but everything that makes a
23 community a community?

24 A Exactly.

25 Q Services. Yes?

1 A Yes.

2 Q Stores?

3 A Yes.

4 Q The ability for people from outside the campus to come
5 into the campus --

6 A Yes.

7 Q -- and engage with the people there?

8 A Yes.

9 Q And, similarly, the people who live at the campus to leave
10 campus and not feel as if they have, you know, left the
11 compound?

12 A Yes.

13 Q I'm going to go back to the board with you and just ask
14 you about the housing inventory that exists today. Okay?

15 And we won't hold you to the exact numbers.

16 We will just call it August of '24. Okay?

17 A Okay.

18 Q We know from other testimony, Mr. Kuhn -- just verify this
19 for us -- that there are 233 units of permanent supportive
20 housing on campus today?

21 A That's correct.

22 Q There are 135 tiny shelters?

23 A 147.

24 Q Plus the 12. All right. Fine. 147.

25 There are project-based units in the community, correct?

1 A Uh-huh.

2 Q Yes?

3 A Yes.

4 Q How many of those are there, sir?

5 A There is a total of 1,722 units, of which 233 are on the
6 campus. So 1,722 minus 233 will give you the number. What is
7 that? About --

8 Q Call it 1,500.

9 A Yeah.

10 Q Roughly 1,500?

11 A Roughly 1,500.

12 Q And do those units have a particular designation? Are
13 they project-based units?

14 A They are project based.

15 THE COURT: Just one moment, please. Explain this
16 1,500 again to me.

17 THE WITNESS: Sure.

18 BY MR. SILBERFELD:

19 Q Mr. Kuhn, putting these two first categories aside, the
20 1,500 project-based units are what?

21 A There are two --

22 THE COURT: I'm listening.

23 THE WITNESS: Okay. There are two types of housing
24 that are developed through HUD-VASH, which is one of two
25 housing programs operated by VA, the other being SSVF.

1 In HUD-VASH, you could have a project-based voucher
2 unit, and you can have a tenant-based voucher. So, for short,
3 we call them PBVs for project based and TBVs for tenant based.
4 Project based, PBVs, are apartment buildings that are dedicated
5 to the use of veterans who have been unhoused.

6 So these projects are set aside. And they are created,
7 like the housing on the grounds at the VA, in the community in
8 different areas of our catchment area to create housing
9 opportunities.

10 THE COURT: Let me repeat back what I just absorbed
11 so you can correct me.

12 Besides the 233 presently existing units -- and I know
13 more are in development -- and the 35 plus 12, the 147, of what
14 I'm going to call tiny homes, you have got 1,500 other
15 project-based units existing?

16 THE WITNESS: Yes.

17 MR. SILBERFELD: In the community?

18 THE WITNESS: Yes.

19 THE COURT: And, obviously, the next question is
20 going to be where? Where?

21 BY MR. SILBERFELD:

22 Q Where?

23 THE WITNESS: Your Honor, I thought that was a very
24 good question. Before I answer, can I stand up on occasion? I
25 have sciatica.

1 THE COURT: Absolutely.

2 THE WITNESS: Thank you. I saw you, so I thought
3 I'd give myself permission.

4 THE COURT: Forget the formality.

5 You don't have to pinpoint each one. But are they in
6 the UCLA community over on Mayfair? Over on Kiowa Street?
7 Where are they?

8 THE WITNESS: So they would be located all over our
9 catchment area. Many would be in LA County.

10 But our projects are located throughout the LA area.

11 THE COURT: Hold on. I have got all day, and you
12 have got all night.

13 I'm going to get a general idea of where these are from
14 and how far away they are from the West LA VA center. You have
15 got to help me with that.

16 When I see 1,500, could be in Victorville. It could be
17 South Central. Could be right around the campus. Help me.

18 THE WITNESS: I actually think we have a map on our
19 website that shows -- let me make sure it's up to date.

20 THE COURT: Somebody find it. I want to see the
21 map.

22 I don't want to leave this until I understand where some
23 of these or most of these are, okay?

24 Somebody pull up the map.

25 I hate to do this to you, but as I go, I need to absorb

1 it. And if I don't understand it, I'm going to ask you.

2 THE WITNESS: And the other piece is that we also
3 have other buildings --

4 THE COURT: No matter about the other piece.

5 I want to know where those 1,500 units are,
6 approximately. I will let you continue questioning.

7 I won't move past this.

8 Okay. I won't pass it. But we have got 1,500 units out
9 there someplace?

10 MR. SILBERFELD: Right.

11 THE WITNESS: Those are just our project based.
12 There are many other units we have.

13 THE COURT: I understand. We could have
14 tenant-based. We have lots of things. But what I need to know
15 eventually is where these are located in terms of accessibility
16 to the West LA VA center, okay?

17 THE WITNESS: Understood.

18 THE COURT: All right. Why don't you continue on,
19 Counsel.

20 BY MR. SILBERFELD:

21 Q Please stand and use that. I will speak up.

22 The 233 units of permanent supportive housing on the
23 campus are how occupied, percentage-wise?

24 A They are almost entirely filled. There are a few
25 vacancies. We have some turnover.

1 But, essentially, they are filled.

2 Q 100 percent? 95 percent?

3 A More than 95 percent.

4 Q Okay. I'm going to give you 100 percent on that one.

5 The 147 CTRS tiny shelters, again, if we took a snapshot
6 today, are occupied at what levels, sir?

7 A We probably have about 10 to 12 openings today.

8 Q 90 percent?

9 A Sure.

10 Q The 1,500 project-based units are occupied, if we took a
11 snapshot today, at approximately what percent?

12 A About 90 percent.

13 Q And so we don't lose the point here, these units could be
14 an entire building, correct?

15 A They are all entire buildings.

16 Q Some of them are not floors of buildings?

17 A I don't -- well, there are couple of them -- that is
18 true -- that are floors, yes.

19 Q Okay. So these could be entire buildings or portions of
20 buildings?

21 A Correct.

22 Q And the total is about 1,500?

23 A Yes.

24 Q And they are occupied, roughly, at the 1,350 level today?

25 A That's correct.

1 Q Okay. And I hope somebody is searching for the map.

2 THE COURT: And I don't mean to have you stray from
3 your examination. Just eventually, while you are here, I would
4 like to --

5 THE WITNESS: If you want, you can text Andrew.

6 MR. HARRIS: I already tried.

7 THE COURT: Okay.

8 MR. HARRIS: He was my first one. I tried four
9 others as well.

10 THE COURT: Okay.

11 THE WITNESS: Let me move on. I will circle back.
12 Promise.

13 BY MR. SILBERFELD:

14 Q We're creating a chart called housing inventory.

15 What other housing is available for homeless veterans
16 today?

17 A We have buildings that we have obtained through master
18 leasing.

19 Q One I know about.

20 A One through master leasing. One called RPSS -- I should
21 call them bulk leasing. So two buildings --

22 (Reporter clarification.)

23 A Let's call it bulk leasing. It's a simpler catchall. So
24 two bulk lease buildings.

25 BY MR. SILBERFELD:

1 Q Two. Since there are only two of them, where are they?

2 A One is in West Hollywood, and one is in Burbank.

3 Q The Burbank building, Mr. Kuhn, how many units are in that
4 building?

5 A 38.

6 Q And how about the one in West Hollywood, sir?

7 A 13.

8 Q And how occupied is the Burbank building?

9 A 100 percent, both.

10 Q Is there any other housing that is currently available, if
11 we took a snapshot today, for homeless veterans other than what
12 we have recorded here?

13 A Yes. So if we're including CTRS, there are many other
14 units of temporary housing on the grounds.

15 So we have ABH, which is 32 units.

16 A Give me a second to catch up.

17 Q ABH is the Bridge Home?

18 A Yes.

19 Q That is 32?

20 A Yes.

21 Q What else?

22 A We have Oasis, which is a --

23 Q Women's shelter?

24 A -- women's shelter. That is 18.

25 THE COURT: And where is that located?

1 THE WITNESS: On the grounds of West LA.

2 THE COURT: All right.

3 THE WITNESS: We have New Directions, which is a
4 Grant and Per Diem program.

5 They are currently undergoing construction, but once the
6 construction is done, it is 120, also on the West LA Campus.

7 And then there are plans to expand ABH to add another
8 32 units, probably second quarter of -- somewhere between
9 January and March of next year.

10 Q Okay. But --

11 A That's what -- that's what we have now.

12 Q The snapshot today is 32 at the Bridge Home?

13 A Yes.

14 Q And it's 18 at Oasis?

15 A Yes.

16 Q New Directions is not open yet, correct?

17 A It's partially open. There are a hand -- there are some
18 units that have not been opened because of the construction.

19 So, their capacity now may be closer to 100.

20 Q Do you mind if I change this to 100?

21 A Go ahead.

22 Q The Bridge Home is occupied at what percent?

23 A 80.

24 Q And Oasis is occupied at what percent?

25 A 40.

1 THE COURT: 40 percent?

2 THE WITNESS: 40.

3 BY MR. SILBERFELD:

4 Q And the New Directions, 100 spaces?

5 A 80.

6 Q Is this now all of the housing that is available on the
7 West LA Campus, if you took a snapshot today?

8 A On the West LA Campus, and there is housing in the
9 community beyond that.

10 THE COURT: There is the 1,500, counsel, is it West
11 LA Campus?

12 THE WITNESS: So for including -- the 1,500 is not
13 on the West LA Campus.

14 We have probably about 600 units of temporary housing
15 off the West LA Campus.

16 BY MR. SILBERFELD:

17 Q You refer to those as temporary housing?

18 A Both emergency housing and transitional so --

19 Q Say that again?

20 A Emergency housing and transitional housing.

21 So -- call it temporary for all of it.

22 THE COURT: Is that through providers, for instance,
23 PATH or Volunteers of America?

24 THE WITNESS: Yes.

25 THE COURT: Okay. So when you refer to that, these

1 are through the same providers that the city/county are using.

2 THE WITNESS: But we contract with them, so we have
3 direct control over them, contract or grants.

4 BY MR. SILBERFELD:

5 Q So an example would be PATH?

6 A Yes, Volunteers of America, Salvation Army. There are
7 several.

8 Q We won't --

9 A Yeah.

10 Q -- write them all down.

11 What is the level of occupancy in those units?

12 A 60 percent.

13 Q And just staying on this page for a moment --

14 A Maybe closer to 70 percent.

15 I'm trying to do my math here in my head.

16 Q For the 600?

17 A Because we have a -- we keep a total of about -- on any
18 given night, there is probably 150 to or 200 units vacant
19 temporary housing.

20 So if we add them all up so -- just looking at the
21 numbers, it's probably closer to 70 percent occupancy.

22 Q For the 600?

23 A Yes, for the 600.

24 Q Do you have an understanding as to why Oasis is only
25 occupied at the 40 percent level?

1 A There are not as many women as we expected demanding
2 these -- requesting these resources, so that's part of it.

3 Part of it is, I think, they have maybe a more
4 challenging screening process than some other programs.

5 Q Okay. And the 70 percent level for the contracted
6 600 units with PATH and BOA and others, what explains the
7 70 percent level, sir?

8 A Part of the realization -- or part of the change we're
9 making is trying to create more units of housing that are
10 responsive -- you can have your mic back.

11 THE COURT: Okay. You can have it back any time you
12 want.

13 THE WITNESS: Thank you.

14 THE COURT: If you need to stand up and get it any
15 time, just --

16 THE WITNESS: I appreciate that, Your Honor.

17 So part of what we have been doing in our --
18 re-imagining our services is creating more units of housing
19 that are accessible on the -- during the same day of housing.

20 So we want to create transitional and temporary housing
21 that veterans want to use.

22 Part of the vacancy rate is because we have created
23 historically housing that veterans don't want.

24 Congregate housing, housing with lots of rules, and
25 veterans, given a choice, don't want it.

1 And they have voted with their feet, and you can see the
2 higher occupancy rates in some of the programs which have lower
3 barriers.

4 Now, we have made progress on some of those other
5 programs, Grant and Per Diem, particularly, where it's been
6 a -- much more of a -- sort of a service-oriented culture.

7 We have now -- of those beds, 81 of them are now
8 same-day access beds, where before it was probably close to
9 zero.

10 So we're making progress and creating an environment and
11 an -- accessible beds that veterans can easily get into and
12 want.

13 So -- but that is part of it.

14 And part of it is, honestly, we aren't seeing the --
15 we're seeing the demand starting to drop off.

16 Early on, for instance, in the emergency housing, the
17 call center, the call volumes were quite high.

18 We were getting a lot of people off the street.

19 That call volume has dropped. And I think it's
20 reflected in the point-in-time count, that there are fewer
21 unsheltered veterans.

22 Q Okay. I just wrote the word "where" on here to remind
23 myself that we've got to come back and answer that question.

24 I'm going to leave this for you because I'm going to
25 work from the podium.

1 A Okay.

2 Q I want to return to the master plan for a moment with you,
3 Mr. Kuhn.

4 If we could show Exhibit 41, please.

5 And hand it up, Tommy, if you could? Thanks.

6 Do you have Exhibit 41 there, sir?

7 A Yes, I do.

8 Q This is another excerpt. If you turn to page 2, which is
9 page 17 of the master plan.

10 In the left-hand column, the first full paragraph
11 describes the vision, does it not, of what the master plan was
12 intended for?

13 A Yes, it does.

14 Q Could you read us the first sentence there, sir?

15 A This master plan 2022 describes a vision of how West LA --

16 THE COURT: Talk just a little slower, please.

17 THE WITNESS: This master plan, 2022, describes a
18 vision of how the West LA Campus can once again provide a home
19 for those veterans most in need by offering on-site housing
20 with individualized support to augment its resources at the
21 medical center campus.

22 BY MR. SILBERFELD:

23 Q Did you subscribe to that vision, sir?

24 A I did.

25 Q You still do?

1 A I do.

2 Q It goes on to say: Of paramount importance to the vision,
3 therefore -- tell me if I have read this correctly -- is the
4 development of various campus-based options for permanent
5 supportive housing as well as temporary triage-based housing,
6 emergency, bridge, and transitional, in adequate quantities to
7 have a robust impact on the overall housing challenges in Los
8 Angeles.

9 Do you see that?

10 A Yes.

11 Q I asked you earlier about whether the master plan's
12 purpose was to have a robust impact, and you didn't quite agree
13 with me.

14 Do you agree with me now?

15 A I don't want to quibble about a word.

16 The -- what I wanted to convey was the master plan is
17 the -- is a part of the solution to the goal of ending
18 veterans' homelessness.

19 Q All right. It goes on to say that such inventory of
20 housing -- it's referring to housing -- will need to be
21 co-located on West LA Campus with state-of-the-art care for
22 homeless, elderly, and women veterans, including robust mental
23 health and addiction services that are easily accessible.

24 Do you see that, sir?

25 A Yes.

1 Q Having permanent supportive housing on the campus is
2 intended, at least in part, to provide access to those most in
3 need of those medical services, correct?

4 A Having permanent housing on the campus is designed to
5 solve homelessness for those veterans.

6 As part of any permanent supportive housing, whether in
7 the community or on the campus, we provide supportive services
8 and access to those healthcare and mental healthcare needs that
9 constitute services in a permanent supportive housing program.

10 Q I want to change topics a little bit, Mr. Kuhn, and talk
11 about the HUD-VASH voucher system with you.

12 You have a familiarity with that, do you not?

13 A I do.

14 Q Okay. And the, sort of, high-level view of it is that
15 there are project-based vouchers and tenant-based vouchers,
16 correct?

17 A Yes.

18 Q And as to both, it's correct, is it not, that the process
19 for getting a voucher begins with a referral from VA to a
20 housing authority?

21 A That's correct.

22 Q And there are, in your catchment area, the five counties,
23 19 Public Housing Authorities, correct?

24 A Yes.

25 Q And the two largest are the Housing Authority of the City

1 of Los Angeles, correct?

2 A Yes, HACLA and LACDA.

3 Q And the Los Angeles County Development Authority.

4 A I'm sorry.

5 Q Okay. You understand that there has always been
6 historically, long before you came, but including your time
7 here, a problem of the adequate -- inadequate number of
8 referrals from VA to the housing agencies, correct?

9 A Yes.

10 Q What is your understanding of what the housing agencies
11 ask of VA in terms of the number of referrals?

12 A They are looking to fill every voucher they have. That is
13 their objective.

14 We would love to see every voucher used as well. And
15 we're currently at about 90 percent for those project-based
16 vouchers in terms of utilization, with the remaining 10 percent
17 largely filled with referrals.

18 The challenge is the tenant-based factors. That is
19 where we see the real shortfall.

20 And our percentage of utilization there is in the 50s.

21 THE COURT: Just one moment. And I will come back
22 to you. I want to make some notes.

23 Counsel, just one minute, please.

24 Thank you, counsel. And thank you, sir.

25 Counsel?

1 BY MR. SILBERFELD:

2 Q I think we may have been talking past each other,
3 Mr. Kuhn, inadvertently.

4 I was asking about referrals, and I think the answer you
5 gave us, in part, at least, had to do with the utilization of
6 vouchers overall.

7 I know that utilization depends on referrals, but I was
8 just focused on referrals.

9 You understand, do you not, that the Housing Authority
10 of the City of Los Angeles, for example, wants to receive 25
11 referrals a week, week in and week out, each and every year,
12 from the VA in order to utilize the vouchers that have been
13 allotted to that agency?

14 A I'm aware that they want more referrals, yes.

15 Q They what?

16 A I am aware that they would like more referrals, yes.

17 Q Well, they have told you in meetings that they would like
18 to get 25 referrals a week so that they can push out and have
19 used the vouchers that have been allocated to them by HUD,
20 correct?

21 A Yes.

22 Q And in the year 2023 -- I think you know this -- the
23 average referrals for the entire year of calendar year 2023 was
24 four referrals from the VA to HACLA for that year.

25 You know that to be true, correct?

1 A I don't know what the exact average is. I know it was
2 low.

3 Q And what is the explanation for why that was so?

4 A Well, first, let me go back to 2023 and compare it to this
5 year.

6 Our referral rate is up to all of the Public Housing
7 Authorities by a third.

8 In the first nine months of FY24 compared to the first
9 nine months of '23, so we are seeing a significant increase in
10 the number of referrals.

11 Part of our challenge is we have a housing market where,
12 on the tenant-based referrals, as I was describing earlier,
13 which is where the lower utilization exists, we face challenges
14 getting landlords to take vouchers, so we don't want to create
15 -- we want to be able to get a veteran into housing, that's the
16 goal. The goal isn't getting a veteran a voucher.

17 So, we typically want to -- we typically lead off with
18 SSVF.

19 By the way, SSVF does at least half of the placements in
20 the community.

21 We typically want to be able to create an environment
22 where that voucher holder is going to be successful.

23 We have a problem in Los Angeles with very high rents.
24 Roughly half of all vouchers outside of HUD-VASH -- I mean,
25 just the general vouchers in the community, half are returned

1 unused, in part, because you have discrimination against
2 voucher holders.

3 You have landlords who don't want vouchers also for
4 economic reasons, that there is delays in renting places
5 because you have to go through an inspection process where
6 landlords can just flip the unit for often much faster.

7 And, finally, those vouchers often don't pay as much
8 rent as the landlord could collect privately.

9 So there are a number of barriers to voucher use on the
10 tenant-based vouchers that we don't have on project base.

11 And we have taken steps to try to increase voucher
12 utilization, which I am more than happy to explain, although
13 that may not be -- this may not be the time for it, but there
14 are a number of steps we have taken to increase voucher
15 utilization.

16 We are seeing an increase in the number of vouchers
17 using -- we're using, and, most importantly, we're seeing
18 increases in placement rates.

19 And that is what is the important piece. The important
20 piece is ending homelessness, not numbers of vouchers that
21 we're referring.

22 So we want -- our success is measured by declines in
23 homelessness, not how many referrals we make for vouchers.

24 Q I appreciate the answer. That entire answer, though,
25 Mr. Kuhn, is about utilization of vouchers, not about whether

1 VA is doing its job to refer homeless veterans to the housing
2 agencies.

3 Can we agree about that?

4 A I agree that we would like to make more referrals for
5 vouchers, certainly.

6 Q And the average weekly referral from VA to the Housing
7 Authorities in the City of Los Angeles in 2023 was four?

8 A It's not that now, though.

9 If you -- I can pull the numbers. I am sure it is
10 higher than that now.

11 Q And the explanation for why it was four per week instead
12 of 25 in 2023 is a lack of adequate staffing, correct?

13 A That is part of the explanation.

14 Also, part of the explanation is different PHAs work
15 with us differently.

16 Sometimes it's easier to work with a certain PHA, and
17 they end up getting more referrals.

18 So LACDA, for instance, has received significantly more
19 referrals than HACLA.

20 Q When was it, Mr. Kuhn, that Buildings 205, 207, and 208,
21 opened, roughly?

22 A It was in the spring.

23 Q Spring of what year, sir?

24 A '23. Late spring.

25 Q It's true, is it not, that even for those brand new

1 permanent supportive housing buildings on the campus at West
2 LA, there were issues about VA referring homeless veterans to
3 use those units?

4 A It wasn't -- the issue wasn't for VA referring. The issue
5 was the buildings weren't ready to accept tenants.

6 As a result, we did make many referrals. Because the
7 buildings weren't ready, the paperwork on the referrals timed
8 out, and we had to make all new referrals for many of these
9 veterans.

10 Q Let me see if this helps.

11 If we could show the witness Exhibit 111.

12 So Exhibit 111 is series of e-mails.

13 Do you recognize that, Mr. Kuhn?

14 A Reading them now. I don't recall them, no.

15 Q Well, you are welcome to look at all of it. Where you
16 appear is at the bottom of page 3 of 111.

17 It's an e-mail from Mr. Zenner to you dated
18 February 10th, 2023. And I would be happy to have you read the
19 whole thing, but that is the e-mail I'm going to ask you about.

20 THE COURT: It begins, Good morning?

21 MR. SILBERFELD: Sorry?

22 THE COURT: It begins: Good morning?

23 MR. SILBERFELD: It begins, Good morning and then
24 goes over to the next page, correct.

25 THE WITNESS: Okay. I have read the e-mail.

1 BY MR. SILBERFELD:

2 Q Do you recognize this e-mail as having been sent by
3 Mr. Zenner at or about February 10th, 2023?

4 A Yes.

5 MR. SILBERFELD: We offer 111, Your Honor. Offer
6 Exhibit 111, Your Honor.

7 THE COURT: Received.

8 (Exhibit 111 received into evidence.)

9 BY MR. SILBERFELD:

10 Q We will skip the bottom of page 3 and go right to the
11 substance of it on page 4.

12 If we could highlight the paragraph at the top.

13 Mr. Zenner writes to you and says, I want to raise an
14 issue with filling Building 207 for the No Place Like Home
15 funded beds through the LA County Department of Mental Health.
16 Do you see that, sir?

17 A Yes.

18 Q Would you explain to us what is going on in this e-mail?

19 A So there are requirements in Building 207 for some of the
20 units. There are various requirements that some veterans had
21 to be -- first, all veterans had to be over 62.

22 There was an AMI requirement, alternative -- excuse me,
23 an income requirement that limited income to 30 percent of the
24 area of median income.

25 There is also a requirement for some veterans to be

1 chronically homeless. There's also a requirement for some
2 veterans to have a serious mental illness.

3 What Mr. Zenner is raising here is concerns about doing
4 the paperwork related to one of these requirements.

5 Q And the e-mail goes on to say, I just learned that there
6 is pushback from VA clinical staff to filling out the attached
7 form in order for veterans to get access to those beds.

8 Do you see that, sir?

9 A I do.

10 Q Is that part of the entire process of getting people into
11 housing?

12 A I don't recall the -- for 207 what was being asked. I
13 don't remember the e-mail.

14 My guess is for -- from this e-mail for No Place Like
15 Home, because we had to document a serious mental illness, that
16 VA staff were probably being asked to do that.

17 And there may have been confusion about who was supposed
18 to document that.

19 Q The sentence above says, I started engaging CERS three
20 years ago about the requirements around these beds and how they
21 require a verification of severe mental illness.

22 Do you see that?

23 I realize it was before your time.

24 A I don't doubt if Mr. Zenner said he did that, he did that.

25 Q Is this an example of a referral problem getting someone

1 into housing on the campus at West LA?

2 A Well, if it's a problem, it wasn't much of one because we
3 filled 207 pretty quickly, despite all of the requirements.

4 In fact, one of my concerns for 207, when it opened, was
5 because you had so many layers of requirements, very few
6 veterans actually qualified for 207.

7 I think it was -- I remember getting -- hearing an
8 analysis, it was in single digits percentage of veterans who
9 would actually qualify because of these overlapping
10 requirements, yet we filled 207 within weeks.

11 Q All right.

12 A Which I think is actually a success considering how
13 difficult it was to meet the requirements.

14 Q Were there similar problems, Mr. Kuhn, in referrals of
15 veterans to fill Buildings 205 and 208?

16 A Again, as I shared a moment ago, the problem for us wasn't
17 referrals. It was capacity of the developer to accept those
18 referrals.

19 As a result, many of the referrals timed out, and we had
20 to do the process all over again.

21 Q Let me see if this helps refresh your memory.

22 Let me ask that Exhibit 110 be shown to the witness and
23 provided to the Court.

24 I know that is a series of e-mails as well, Mr. Kuhn.
25 I'm only going to be asking you about the last two e-mails that

1 appear on page 4 and 5.

2 And another one on page 2 -- sorry, three e-mails.

3 All right. Let me start with the oldest e-mail at the
4 back, which begins at the bottom of page 4, Exhibit 110.

5 It's from Mr. VanNatter sent July 6, 2023, and the
6 subject is KTLA press request.

7 Do you see that, sir?

8 A Yes, I do.

9 Q And as of July 2023, Buildings 205 and 208 were complete,
10 were they not, and open for business?

11 A As far as I know, yes. In July, they were both open.

12 Q Okay. And the e-mail from Mr. VanNatter -- you know who
13 that is, do you not?

14 A Yes.

15 Q He's the head of the Section 8 Housing Program at the
16 Housing Authority of the City of Los Angeles?

17 A Yes.

18 Q And Mr. VanNatter writes to Courtney Gladney -- do you
19 know who that is?

20 A The name is not familiar. No.

21 Q But in any event, Mr. VanNatter writes: Here is the
22 information we have on the number of approved applications for
23 these two VA buildings, Building 205 of the 53 PBVs -- that is
24 project-based vouchers, right?

25 A Correct.

1 Q Nineteen referrals have been received, and 13 of the 19
2 referrals have been approved for move-in.

3 Do you see that, sir?

4 A Yes.

5 Q Does that indicate to you that there was a VA referral
6 problem with respect to Building 205 as of July 2023?

7 A As I described, there was a problem. The problem was not
8 on the VA side.

9 Q Because --

10 A We had made --

11 Q -- referral vouchers expired or what?

12 A They expire, and so they have to all be redone.

13 And what happens is veterans -- we have to go back to
14 veterans. They have to collect now all updated information,
15 and this is not a small thing.

16 Bank information, I mean, everything -- you have got to
17 collect IDs, all has to be done again. It has to be current.
18 It can't be resubmitting the old statements.

19 So for veterans who are homeless, it's not like -- for
20 many of them, it's not as easy as clicking on your electronic
21 bank statement to print out what you have.

22 These can be a time-consuming processes. So when Step
23 Up says -- or Shangri-La said that they were open and ready to
24 take referrals, and we sent them the initial referrals, and
25 they all timed out, and then we had to do them all over again;

1 that takes time.

2 Q Okay. So this is all about vouchers expiring and having
3 to be redone?

4 A The applications were expiring, yes.

5 Q And when --

6 A I don't know if it was all about it, but that was a
7 significant issue.

8 Q Okay. Were there also staffing issues which prevented the
9 earlier completion of this paperwork?

10 A I think for those buildings, staffing was not an issue.
11 No, those were prioritized.

12 Q Okay. All right.

13 Let's switch from talking about referrals to talking
14 about attrition.

15 You are familiar with the concept of attrition, right?

16 A Yes.

17 Q Are we talking about attrition of people in their
18 apartments or attrition of staff?

19 Attrition of people in their apartments. In other
20 words, people leaving the HUD-VASH system?

21 A Yes.

22 Q Over time, more people left the HUD-VASH program than
23 entered it in the last four years, isn't that true?

24 A I don't know if it was more, but we have had periods where
25 a disconcerting number of veterans have left.

1 Q And attrition -- that is, people leaving their apartments,
2 leaving the HUD-VASH program, attrition is due to any number of
3 things, fair?

4 A Yes.

5 Q One of the key drivers of attrition is program violations,
6 correct?

7 A One of the drivers. There are other reasons people leave
8 the program.

9 People leave the program because they no longer qualify
10 for the voucher, their income exceeds it, they move, they elect
11 to leave the program because they have left the area.

12 So there are many reasons why people leave the program.

13 Q All I said is one of them.

14 A Yes.

15 Q Okay. Program violations can be ameliorated or cured or
16 lessened by adequate case work management, true?

17 A I will make an admission right now that may speed things
18 up.

19 So when I arrived, we did not have enough staff. We had
20 a choice to either continue placements, knowing services would
21 not be adequate, or say to our veterans that we're not going to
22 place you because we don't have adequate services.

23 I chose -- I made the decision to continue placing
24 people, despite knowing we didn't have services, because I felt
25 it was more dangerous to leave people homeless than to place

1 them in housing and provide what services that we could, even
2 knowing it was not up to the level we wanted.

3 So that was a calculated risk I took because I felt the
4 risk to leaving people homeless was greater.

5 MR. SILBERFELD: This is a convenient point, Your
6 Honor, if the Court wishes for the court reporter's sake --

7 THE COURT: I'm fine.

8 MR. SILBERFELD: Can we take an afternoon break
9 perhaps?

10 THE COURT: Oh, absolutely. Just tell me when.
11 Now?

12 MR. SILBERFELD: Sure.

13 THE COURT: Okay. 15, 20 minutes?

14 MR. SILBERFELD: Sure.

15 THE COURT: We're in recess. Thank you very much,
16 sir. You may step down.

17 We will see you about 5 or 10 after, okay.

18 (Afternoon recess.)

19 THE COURT: We're back in session. All counsel and
20 parties are present.

21 If you would like to continue direct examination,
22 please.

23 MR. SILBERFELD: Thank you, Your Honor.

24 BY MR. SILBERFELD:

25 Q Mr. Kuhn, just before the break, we were talking about

1 attrition and whether that relates in any way, even partially,
2 to staffing shortages.

3 During all of your time here as the deputy director in
4 West LA, there have been staffing shortages in the HUD-VASH
5 program on the VA side, correct?

6 A That has largely ended. It has up to this point, but
7 those staffing shortages have been largely resolved.

8 Q As of last week? This week?

9 A As I would say within the last several weeks, yes. It's
10 not like flipping a switch that happens overnight.

11 It's a gradual process, so it's been improving for
12 months, getting better and better.

13 I can't say all of a sudden three weeks ago it changed,
14 but we are very close to the 90 percent goal now.

15 Q Okay. What is your understanding of what is encompassed
16 within program violations, sir?

17 A Lease violations are often what ends up having somebody
18 leave an apartment.

19 Q One of the things that has to happen in a voucher-based
20 unit is renewal of paperwork, isn't that right?

21 A Yes.

22 Q And it's your experience, isn't it, that sometimes
23 veterans, especially those with mental health issues, often
24 have difficulty completing those forms?

25 A Yes.

1 Q And that's what case workers are intended to help with,
2 isn't that right?

3 A Yes.

4 Q Is that right?

5 A Yes.

6 Q Okay.

7 I think we found where the 1,500 units are. This may
8 not come off quite as smoothly, Your Honor, as I might like.

9 THE COURT: Well, that's okay.

10 MR. SILBERFELD: But we can put up -- and this is,
11 with thanks from counsel, we have located the locations here.

12 BY MR. SILBERFELD:

13 Q Are you generally familiar with this, Mr. Kuhn?

14 A I have seen it.

15 Do I have detailed knowledge of what is going to be on
16 the map? Probably not.

17 Q Okay. Let me start with all of the green dots.

18 And what we will do, Your Honor, is we will print a set
19 of this and make it an exhibit so that the record will reflect
20 what we're talking about.

21 And I would say let's call this Exhibit 215, which is
22 the next in order for the plaintiffs.

23 THE COURT: Okay.

24 MR. SILBERFELD: We will mark it, at least for now,
25 for identification only.

1 BY MR. SILBERFELD:

2 Q Mr. Kuhn, do you recognize the dots or the, sort of,
3 bubbles there, the green ones, as being locations of the
4 1,500 units that are scattered throughout Southern California?

5 A Yes. The one caveat that I need to add --

6 Q Sure.

7 A -- and this would be unusual, but this map lists only
8 buildings with available units.

9 So, in a building that had no available units, it would
10 not appear.

11 Now, most of the buildings would likely have at least
12 one available unit and should appear.

13 But it is possible we have some buildings with no -- in
14 fact, I'm sure we will have at least some buildings with no
15 available units and so would not appear.

16 Q So we may not, on this map, actually be able to identify
17 the location of each and every building if it's a full
18 building?

19 Is that what you are saying?

20 A Right. That's correct.

21 Q All right.

22 A So most of the buildings should appear on this map.

23 Q Because most have at least one vacancy?

24 A Correct.

25 Q So let's start in Atascadero, California, which is north

1 of San Luis Obispo.

2 Is that building -- which looks like it's in Templeton,
3 is that building one of the buildings in the list of 1,500?

4 A If it's on the map, yes.

5 Q And can we tell by looking at that building how many units
6 there are?

7 A I don't -- you would have to -- if you click on the "see
8 listing" perhaps, it should show.

9 All right. So it just says vacancies available. So I
10 guess, we don't get a number.

11 Q There is a description on the screen there. Is that a
12 description, you think, of the vacancies or the whole building?

13 A Of the building.

14 Q Of the building?

15 A Yes.

16 Q All right. So maybe this does tell us how many units.
17 Would you say that that's correct?

18 A Honestly, I'm not sure.

19 Q All right.

20 THE COURT: Just a moment. Go down further. Let me
21 see the whole document.

22 Thank you very much.

23 BY MR. SILBERFELD:

24 Q While we're at this stage, there is eligibility criteria
25 there.

1 Do you see that, sir? 30 percent of AMI, 30 percent of
2 AMI, and so forth.

3 A Yes.

4 Q Is that true of all 1,500 of these units, wherever they
5 are located, that they have some sort of eligibility
6 requirements?

7 A It will be likely -- the eligibility requirements will
8 vary.

9 So in this building, it appears those units have, as
10 described, certain AMI limits. It's going to vary by building
11 though.

12 Q I'm going to forgive you for being relatively new to
13 California, but do you know how far Templeton is from West Los
14 Angeles?

15 A It's not close.

16 Q The next one down, it looks like there is a cluster --
17 well, let's take the one in Lancaster that is shown there, sir.
18 It appears to be one -- let's click on that.

19 And if we go down -- it seems to describe only the
20 vacancy.

21 Would you agree with that, Mr. Kuhn?

22 A That is what it appears.

23 MR. LOWENSTEIN: Objection. Foundation to the
24 extent that the witness is being asked to verify the accuracy
25 of the information on a website that isn't a Veterans Affairs

1 website.

2 THE COURT: How are we going to resolve this?
3 Because whether it's a Veterans Affairs website or not, we
4 could easily verify this or call this into question.

5 If it's not a website, it still is a VA entity, isn't
6 it?

7 MR. ROSENBERG: No.

8 MR. LOWENSTEIN: This is a LAHSA website. And,
9 again, the witness hasn't confirmed that he has seen these
10 pages before.

11 THE COURT: Do you feel like driving a little bit?

12 MR. LOWENSTEIN: I can.

13 THE COURT: Watch me. Think very carefully about
14 this because you are about to drive and verify this for the
15 Court this weekend.

16 Do I make that order or not? Because I'm going to find
17 out very quickly.

18 If this is false information, I'm not going to consider
19 it, but if this is accurate, you are wasting my time.

20 MR. ROSENBERG: Your Honor, if I could speak on
21 this.

22 THE COURT: No, no. You can't. All of you have a
23 little conference because my next order is you are getting in
24 the car and you are driving.

25 Have a seat. Have this discussion.

1 This is where it starts wasting my time now.

2 And guess what? One of the plaintiffs gets to go with
3 him so we're co-equal. Happy weekend.

4 First place you are going is you are going up to
5 wherever this place is Templeton or Atascadero jointly and then
6 you are heading for good old Victorville or wherever --
7 Lancaster.

8 MR. ROSENBERG: Your Honor, the issue is this is a
9 third-party website, and there is no effort to establish --

10 THE COURT: Counsel, I know that. I could take the
11 drive myself. Don't waste my time. You don't have to
12 stipulate to this.

13 My next order is drive out and find it.

14 MR. ROSENBERG: This is plaintiffs' examination,
15 Your Honor.

16 THE COURT: I know that. And I'm going to have both
17 of you out there, but it's your objection.

18 Now, you two get together. I'm not joking about this.
19 This is what wastes my time.

20 You can take it subject to a motion to strike. You can
21 verify it later on. If it's not accurate, I will strike it,
22 but somebody sure is advertising this for a veteran to go out
23 there.

24 And if it's not accurate, think how silly we all look.

25 So, counsel, listen to me, if this is not accurate, I

1 want to know this right away because this is where our veterans
2 are going.

3 So you better resolve it.

4 MR. SILBERFELD: I think it's resolved, Your Honor.

5 THE COURT: Okay. Tell me the resolution because
6 I'm happy to take this subject to a motion to strike.

7 But hear me very clearly, if this isn't accurate, I want
8 to know that right now because then we're sending veterans out
9 to some God forsaken place, whoever put this up -- and I don't
10 know if you put it up or not. I don't know who put this up.

11 So I will sustain the objection. There is no problem.
12 But then you are ordered to get in your car and report back to
13 me Sunday because I work all weekend.

14 Now, you two resolve this very quickly, or you are
15 getting in your cars.

16 MR. SILBERFELD: We have resolved it that we can
17 continue subject to a motion to strike, Your Honor.

18 THE COURT: Okay. Subject to a motion to strike.
19 If you disagree with it, get out there and tell me that this
20 isn't true because that would be a blockbuster for all of this.

21 That's in the VA's self-interest. If we had false
22 information going up, for goodness' sakes. That's not what
23 we're going to do.

24 Subject to motion to strike, counsel.

25 MR. SILBERFELD: All right.

1 BY MR. SILBERFELD:

2 Q So, Mr. Kuhn, with respect to the information that is on
3 the screen here, are there eligibility requirements in this
4 particular unit that you can see on the screen?

5 I'm not asking you to vouch for the accuracy of it quite
6 yet.

7 A There are eligibility restrictions based on this
8 description, yes.

9 THE COURT: And are you using this to refer -- I
10 mean, I know it's their exhibit.

11 Are you using these documents to refer, because you are
12 the one who said to me, Judge, we have all of these off-site
13 locations.

14 Well, let's bear down on you. Is this one of your
15 off-site locations that you refer veterans to?

16 THE WITNESS: It is, but we --

17 THE COURT: Is this accurate information or not?

18 THE WITNESS: It should be accurate information.

19 THE COURT: No, not should be. Is it or not?

20 THE WITNESS: I would believe -- I can't personally
21 attest right now --

22 THE COURT: Guess what you are doing this weekend,
23 then?

24 THE WITNESS: What we would do is with all these
25 descriptions is we don't just send veterans out there.

1 THE COURT: By Monday, I have a stipulation that
2 this is accurate or not. Understood?

3 THE WITNESS: I can verify it with my --

4 THE COURT: You verify it by either personally going
5 there with your staff and one party from each side or you get
6 me a stipulation on Monday, so I'm not wasting my time.

7 THE WITNESS: I can do that.

8 THE COURT: Clear?

9 THE WITNESS: Yes.

10 THE COURT: Any miscommunication between us?

11 THE WITNESS: No. I will find out by Monday whether
12 all these are accurate.

13 THE COURT: This will be resolved by Monday.

14 BY MR. SILBERFELD:

15 Q Let's move away from the one in Lancaster, other than to
16 ask, Lancaster is a good distance from West Los Angeles, is it
17 not?

18 A Can we pause for just a moment so I can instruct my staff
19 to start working on this before we --

20 THE COURT: Go make a phone call. I think it will
21 save you a weekend driving around.

22 MR. ROSENBERG: And just so the record is clear --

23 THE COURT: We're going to take a recess now.

24 MR. ROSENBERG: I was going to ask that the website
25 that is being used that we create a hard copy of this website

1 as it exists now.

2 THE COURT: Absolutely. And you can go to the
3 Wayback machine and see if it's different also. Use it all the
4 time.

5 But it's in both of your self-interests, because if this
6 is inaccurate information, I think that on the VA side, we
7 would want to know that right away.

8 For goodness' sakes, I think this is silly, frankly.
9 I'm taking a recess. Be back in five minutes.

10 (Recess.)

11 THE COURT: Please continue.

12 MR. SILBERFELD: Are you ready to continue?

13 THE WITNESS: I am.

14 BY MR. SILBERFELD:

15 Q Fair to say, Lancaster is not exactly adjacent to the West
16 Los Angeles VA Campus?

17 A Fair to say.

18 Q All right. There is two bubbles up near San Fernando.

19 Do you believe those are two of the buildings that
20 comprised the 1,500 units.

21 A Yes.

22 Q And then moving down the map, there is buildings in
23 Glendale.

24 Do you see that?

25 A Yes.

1 Q And Lincoln Heights?

2 A Yes.

3 Q And then moving over east along the freeway there, there
4 appear to be three buildings in Rosemead, El Monte, and North
5 El Monte?

6 A Yes.

7 Q Those three would be 20 miles? 25 miles?

8 A I'm sure we could find out on Google Maps.

9 Q We can do that.

10 Then coming back towards downtown Los Angeles, there
11 appear to be three buildings in the City Terrace and East LA
12 area, right?

13 A Yes.

14 Q And those would be roughly 15-plus miles from the West LA
15 Campus?

16 A Again, I would suggest Google Maps.

17 Q All right. Then there is a cluster of maybe five
18 buildings in downtown Los Angeles near or adjacent to Skid Row?

19 THE COURT: Could you blow that up?

20 MR. SILBERFELD: Sure.

21 THE COURT: Just a minute. Could you blow it up
22 just a little bit more? Thank you.

23 Could you move it -- I don't know how to describe it --
24 this way. So you move down San Pedro.

25 MR. SILBERFELD: To the south, Your Honor, or to the

1 north?

2 THE COURT: That's good. Now, if you could take me
3 up to Fifth Street, and if you could move down Fifth Street
4 toward Central.

5 Thank you very much. I appreciate it.

6 BY MR. SILBERFELD:

7 Q And those -- that cluster of roughly five buildings,
8 again, would be approximately 15 miles from the westside?

9 A Again, Google Maps.

10 One question I would have for this -- also, this map is
11 when it was last updated. So we have added projects recently.
12 I don't know the frequency of the updates that are done to this
13 map.

14 THE COURT: Just get me something verifiable that
15 you are comfortable with by Monday, okay?

16 THE WITNESS: Yep. We are working on it.

17 THE COURT: Get me an updated map.

18 THE WITNESS: We are working on it.

19 THE COURT: This says 8/6/2024.

20 THE WITNESS: Okay.

21 THE COURT: But that doesn't mean anything. It's
22 hearsay.

23 THE WITNESS: Uh-huh.

24 BY MR. SILBERFELD:

25 Q If you could zoom out a little bit.

1 So we have done the ones downtown. Let's go up the
2 Hollywood Freeway there.

3 There appears to be a building on Beverly Boulevard.

4 Do you see that, sir?

5 A Yes.

6 Q Are you familiar with that building?

7 A If I saw pictures of it. The addresses, I'm not familiar
8 with.

9 Q And then further up the 101, there is a building on
10 Melrose Avenue.

11 Are you familiar with that one?

12 A I don't -- I don't think I could tell you the address of
13 any of the buildings.

14 I recognize some of the photos, and that's about it.

15 Q Okay. Then zoom back out if you could, Tom.

16 And then moving down the 110 Freeway, there is three
17 buildings sort of on either side of the freeway there.

18 THE COURT: That's going to be current prices,
19 Counsel?

20 MR. SILBERFELD: I'm sorry?

21 THE COURT: It's going to be current prices?

22 MR. SILBERFELD: Yes.

23 The South Figueroa Corridor. And then there is one
24 over on Western and 54th.

25 Do you see that, sir?

1 THE COURT: Dawson's District.

2 MR. SILBERFELD: Let's go back out.

3 THE COURT: Over here, you see that Ben Marte's old
4 district on these other two.

5 Just -- for you folks who aren't familiar with this,
6 these are council districts.

7 And you can see that historically these are located
8 along what I am going to call the old minority corridor, quite
9 frankly.

10 It's also part of the -- for your history, part of the
11 idea that Los Angeles had about encapsulating the homeless in
12 Skid Row and literally building barriers and floodlights. And
13 this is a predominant -- or it was a predominantly black
14 ethnicity population with about 88 to 92 percent black heritage
15 that, quite frankly -- well, it was an attempt to, quite
16 frankly, put a minority population in this area. I can't say
17 it any more bluntly.

18 That's why you are going to have -- no fault of either
19 of your parties -- this historic conglomeration of shelters,
20 Skid Row Housing Trust, et cetera, congregate, like the Union
21 Mission, et cetera, located along what I call this 110
22 Corridor.

23 You can trace the history of this city in terms of
24 racism right on this map.

25 If you look over at the west side of LA, besides your

1 establishment over there, tell me what exists in Santa Monica,
2 Redondo Beach, Hermosa, any of these other places, including
3 Venice.

4 This has nothing to do with you, but this is a real mark
5 of what occurred in this city historically.

6 There is a black population here.

7 All right, counsel.

8 BY MR. SILBERFELD:

9 Q So, Mr. Kuhn, as we're heading south on the map here -- we
10 have talked about the units along the 110 Corridor. There is
11 one east of Lynwood there.

12 Do you see that, sir?

13 A Yes.

14 Q And another one near Willowbrook?

15 A Yes.

16 Q These are largely very low income areas, are they not?

17 A They are.

18 Q And there is a building over in Inglewood or near
19 Westchester.

20 Do you see that?

21 A Yes.

22 Q And there is one in Culver City along Jefferson Boulevard?

23 A Uh-huh.

24 Q Baldwin Hills, really?

25 A Yes.

1 Q Right?

2 And then I think there is one or maybe more than one in
3 the Brentwood area, right?

4 A Yes.

5 Q Tell us about those buildings. Have you been there?

6 A I have been past them. I haven't been in them.

7 Q And these are apartments?

8 A Yes.

9 Q So we will do more to identify the exact location of these
10 1,500 or so units.

11 But going back to the housing chart, sir, have we now
12 identified all of the existing housing, as of today anyway,
13 that the VA has either ownership of or access to for homeless
14 veteran housing?

15 A For projects, yes. Not for tenant-based.

16 Q Not tenant-based. All right.

17 There are buildings being constructed on the campus now,
18 correct?

19 A Correct.

20 Q And when is the next building scheduled to open?

21 A This month.

22 Q This month?

23 A Yes.

24 Q And where on the campus is that building?

25 A That is known as MacArthur.

1 Q Sorry?

2 A MacArthur Field it's known as.

3 Q Okay. Is that building at all implicated by this landfill
4 issue that came up in the last week or so?

5 A It may be, yes.

6 Q Okay. Would you describe to the Court what that landfill
7 issue is?

8 A So, I would need to defer details to our expert, but I can
9 talk generally.

10 Q Yes.

11 A The County notified us, the Department of Public Health
12 notified us just weeks ago that there is a landfill on the
13 grounds that -- because they -- 2023 --

14 THE COURT: Could you show me that building on the
15 map? Could you help me? I don't know by number -- is it
16 referred to as MacArthur Field?

17 Thank you. I really appreciate that.

18 MR. SILBERFELD: I will pull it closer.

19 THE WITNESS: It would be up here.

20 THE COURT: There's a building up there?

21 THE WITNESS: There will be. There are several
22 being built, MacArthur Field.

23 THE COURT: Oh, so this is not opening next week?
24 It's starting construction next week?

25 THE WITNESS: No, no. It's opening.

1 THE COURT: Because this is an old map.

2 THE WITNESS: This is from 2022.

3 THE COURT: Hold on.

4 MR. SILBERFELD: So it would be lot number 28.

5 THE COURT: Do we have a newer map?

6 All right. So let me just -- here. This came out of, I
7 think, Exhibit 1.

8 Do you see it on this, sir? Do you see it on this map?

9 MR. SILBERFELD: This is a large version of that.
10 Maybe this will help.

11 THE COURT: Can you folks see this? I have no idea
12 where this building is.

13 THE WITNESS: These are the buildings of MacArthur
14 that are being developed right now. And two of these will open
15 very shortly.

16 THE COURT: Do you know which ones? It doesn't
17 matter. You don't have to, but if you know.

18 THE WITNESS: I believe it's these two.

19 THE COURT: Okay.

20 THE WITNESS: But I could be wrong.

21 THE COURT: At capacity?

22 THE WITNESS: Well, we have several -- we have a
23 couple hundred opening. The first building is -- I should know
24 the number. I don't remember offhand, 50.

25 THE COURT: Okay. You will probably be back Monday

1 so you can tell me Monday.

2 THE WITNESS: Yeah. I will tell you Monday.

3 THE COURT: Well, first of all, congratulations.

4 That's great.

5 THE WITNESS: Thank you.

6 BY MR. SILBERFELD:

7 Q So the question was: Will the opening of that building or
8 the next two buildings be delayed, as far as you understand it
9 today, by this landfill issue?

10 A We hope not, but it is a possibility. It's up -- the
11 County right now is being engaged.

12 We hope that they do not block the opening of these
13 buildings.

14 From our perspective, these building permits were
15 already given.

16 The landfill was known when the per -- when the county
17 issued the permits. And now, the County, a different part of
18 the County, has decided that maybe there is a problem after
19 millions have been spent and -- because of public health
20 concern.

21 Well, isn't it a public health concern leaving people
22 homeless?

23 So, needless to say, we're working very hard to address
24 the County's concerns.

25 Q And this is something that came to your attention

1 approximately when?

2 A It was in the past month or so.

3 THE COURT: Is this the notice I got from counsel
4 that you --

5 MR. ROSENBERG: Yes. This was the notice of recent
6 development from about a week ago.

7 THE COURT: Thank you.

8 BY MR. SILBERFELD:

9 Q What is being done in connection with that landfill issue,
10 sir?

11 A There had been multiple meetings with the County. We have
12 hired a contractor to start the process that might do whatever
13 testing is necessary.

14 We hope that the County will allow us a concurrent
15 process because the risks seem to be very low. It may not even
16 be a landfill as defined by the County.

17 So we're hoping we can resolve this without delay.

18 We will see.

19 THE COURT: The county actually knew about this
20 before this landfill?

21 THE WITNESS: The County has known about this for
22 decades. This is not a new thing.

23 This has already been cleared.

24 But there is a new law that came out in 2023, which the
25 County didn't tell the -- which they still permitted the

1 buildings to go ahead and build.

2 They didn't notify anyone of their concerns until the
3 buildings were essentially completed, so anyway. Frustrating.

4 BY MR. SILBERFELD:

5 Q And this is something that the VA has known about for a
6 year?

7 A No. The VA has known about it for weeks. The County has
8 a letter they say they sent to us in 2023, but it isn't
9 addressed to anybody.

10 It's sort of like, here, VA -- addressed generally to
11 the VA. And, of course, we're not developing the buildings.

12 If there was a concern, it should have been sent to the
13 people building the buildings, not us.

14 And the County is the permitting authority.

15 We're not the permitting authority.

16 Q And depending on how that comes out, there might be a
17 delay with respect to the opening of one building or more than
18 one?

19 A More than one building. The three buildings are very
20 close -- I mean, there are more than three under construction,
21 but there are three very close to opening.

22 In fact, one of the buildings we already have made
23 referrals, and veterans are expecting to move in. We're that
24 close to opening them.

25 Q And the zone that is affected by this landfill issue is

1 anything within 1,000 feet or so?

2 Is that your understanding?

3 A That's correct.

4 Q Depending on how this landfill issue comes out, are any
5 building permits potentially implicated for future
6 construction?

7 A Not yet.

8 Q What does that mean, sir?

9 A We had one building that was about to start. There was
10 some concern expressed, Building 210, which is about to start,
11 which the County has now released and allowed construction to
12 continue.

13 But until we get final clarity from the County, we can't
14 be sure of where they stand on other buildings.

15 THE COURT: Show me where 210 is.

16 What I think happens is you won't find 210 up there. I
17 think that they may have switched to a street address.

18 You see this ledger off to the right hand, sir?

19 THE WITNESS: Yeah. It should be around here.

20 THE COURT: See that ledger on the right-hand side?
21 That supposedly gives us our buildings.

22 But I think as they were constructed, we got street
23 addresses on it.

24 And what is confusing is that you refer to 210 --

25 THE WITNESS: I will find out for Monday.

1 THE COURT: I'm not sure which -- I think it's
2 probably near MacArthur Field. I think it's probably in the
3 same area, but I don't know.

4 BY MR. SILBERFELD:

5 Q Speaking of building housing, Mr. Kuhn, the VA can build a
6 hospital, can it not?

7 A Yes.

8 Q It can construct it, it can pay for it, it can do all of
9 the construction activities surrounding it?

10 A That's correct.

11 Q And, in fact, there is a plan to put a new medical center
12 tower next to the existing hospital on the south portion of the
13 campus, correct?

14 A That's correct.

15 Q And that project will take approximately six years, I
16 think?

17 A That sounds about right.

18 Q And that new tower is expected to open roughly in 2030?

19 A I don't remember the exact date, but that sounds about
20 right.

21 Q And what is the authority of the VA to build a medical
22 center based on?

23 A I would have to defer to our attorneys to give you the
24 statutory authority.

25 I don't know what the authority is.

1 Q And is it your belief that the VA is not authorized to
2 build permanent supportive housing itself?

3 A That's correct.

4 Q And what is that based on, sir?

5 A Again, I would have to defer to our attorneys who have
6 advised me that we do not have the statutory authority.

7 Q Does it have anything to do, as far as you understand it,
8 with the language of the West Los Angeles Leasing Act of 2016?

9 A I think it's the authority -- again, I would have to defer
10 to our attorneys.

11 My understanding, though, this is a broader injunction
12 that we -- the VA does not build permanent housing.

13 Q But you can build a medical center?

14 A Yes.

15 Q And the medical center words, or the concept of a medical
16 center, has a particularized meaning at the VA, does it not?

17 A Yes.

18 Q And can you tell me what that meaning is?

19 A A place where people get medical care.

20 Q Well, it provides, does it not, in a VA Handbook that
21 medical center has a very specific definition?

22 Are you familiar with that?

23 A No, I'm not.

24 Q A medical center as defined in a VA Handbook is a point of
25 service for inpatient care, outpatient care, residential care,

1 and skilled nursing care.

2 Does that seem reasonable to you?

3 A It sounds fair.

4 Q And residential care is also a defined term in a VA
5 Handbook.

6 Do you know what that means?

7 A As defined in the VA Handbook, I don't know offhand, no.

8 Q If I suggest to you that residential care includes
9 services related to homelessness, would that seem reasonable to
10 you?

11 A Well, we provide domiciliary care. Those are certainly
12 services -- residential services provided to veterans who have
13 experienced homelessness, correct, yes.

14 Q And so to the extent that the VA has authorized to build a
15 medical center that provides residential care having to do with
16 homelessness, why is it you can't build permanent supportive
17 housing, sir?

18 A I would not be the person to pose that question to.

19 Q Who should I ask?

20 A I would defer to our VA attorneys.

21 Q All right. You are aware of the plaintiffs' urging that
22 the VA erect temporary housing on the campus while the 1,200
23 housing units that will take them until 2030 to be completed
24 are, in fact, completed.

25 You are aware of the claim, are you not?

1 A Yes.

2 Q And you are satisfied that putting up temporary housing
3 does not implicate any environmental impact concerns, correct?

4 A Not at this time because we're not at the limit of our
5 permitting authority.

6 Q Well, there is a distinction between temporary and
7 permanent facilities, is there not?

8 A My understanding is for the permitting authority, if we go
9 beyond the -- I think it's 1,622 units, whether it's temporary
10 or permanent, there could be further review required.

11 Q Okay. Did you consider that when you put together your
12 modular housing idea earlier this year?

13 A I didn't have to because we were so far under the limit.

14 Q Describe to the Court, please, what your modular housing
15 idea for temporary housing was?

16 A So my concern was the current resources we have available
17 for temporary housing meet the needs of a large majority of our
18 veterans, but not all of them.

19 We want to create opportunities for everyone to be able
20 to come onto the campus and not have winners and losers.

21 One of my concerns was that families could not be
22 adequately served by the resources we had available, which are
23 really geared towards individuals.

24 And we wanted -- and right now, the way we serve
25 families, is if they come and we want to keep them together, we

1 have them go to hotel rooms and we have asked if SSVF can pay
2 for hotels, which is adequate.

3 But a family should have a better environment than that,
4 if you have children who are going to school, need an
5 environment where they can do their homework, you need to be
6 able to carry out functions as a family.

7 We wanted a better environment.

8 Now, we don't have a lot of demand from families, but
9 maybe part of the reason we don't have a lot of demand is we
10 don't have the kinds of resources we should have to meet their
11 needs.

12 So I wanted to make sure we had that capacity.

13 The second thing I was concerned about is there are some
14 veterans with disabilities who may find it difficult to manage
15 our environment at CTRS.

16 Getting back and forth between the tiny homes and a
17 trailer to use showers and the restrooms can be challenging. I
18 was also concerned that certain groups of veterans,
19 particularly women who suffered from military sexual trauma,
20 might not be comfortable in that environment. Even though we
21 have separate areas, it's still pretty close quarters.

22 So for all of those situations, I wanted to be able to
23 offer, again, another pathway.

24 We want as many pathways, as many openings as possible
25 so that no one feels like they can't come to us and get their

1 needs met and engage in services.

2 So there should be no barrier. And this was a way of
3 eliminating a barrier.

4 Q Thank you.

5 And just as an overview, this modular idea of yours was
6 to build roughly 46 units?

7 A We were looking at about 40 to 50 units.

8 Q 40 to 50. All right.

9 A Which was, I think -- well, more than we needed, but I
10 would rather have more than we need than not enough.

11 Q Okay. And, so, when did you first have this idea?

12 A Almost as soon as I got there. I mean, shortly after I
13 arrived.

14 Q And you had some work done to design what these units
15 might look like?

16 A Initially, it was a permanent housing plan. But since we
17 can't build permanent housing, we adjusted it to transitional
18 housing.

19 And, yes, we looked at the -- we contacted a number of
20 vendors who could create the housing we wanted, which was,
21 again, creating a family environment.

22 Apartments -- they are almost like mobile homes -- that
23 you could put up quickly, relatively inexpensively, and without
24 taking a lot of time to prep.

25 We thought it would be important to do this quickly, in

1 part, because the funding stream I was trying to tap, the
2 American Rescue Plan, we knew that was going to go away. So we
3 were trying to move this very quickly to take advantage of a
4 funding stream that will go away.

5 And, also, there was some authorities at that time that
6 came with the COVID crisis that I was trying to sort of thread
7 the needle to make work for us to be able -- so that we would
8 be permitted to do this.

9 Q And in addition to funding, you had to find a place on the
10 campus?

11 A Yes.

12 Q And it was your view then, and hopefully now, that there
13 is adequate room?

14 A There is absolutely more room for a development, yes.

15 Q Okay. So there is adequate open space that would not
16 interfere with any existing permanent housing?

17 A Correct. We identified a number of parcels.

18 Q Let me ask you to take a look at Exhibit 56, which we will
19 put in front of you, sir.

20 And this was construction and completion of these units
21 that VA was going to undertake by itself, not through --

22 A That's correct.

23 Q -- any contractor, correct?

24 A That's correct.

25 Q All right. So Exhibit 56 is titled White Paper, Modular

1 Housing Development Initiative. And it has a last modified
2 date of March the 29th, 2023.

3 Do you see that at the top, sir?

4 A I do.

5 Q Did you create this document?

6 A It was created by our planning group under my direction.

7 MR. SILBERFELD: Okay. Offer 56, Your Honor.

8 THE COURT: Received.

9 (Exhibit 56 received into evidence.)

10 BY MR. SILBERFELD:

11 Q On page 3 of Exhibit 56 and following, do you see there
12 sir, that a preliminary site analysis and options was done for
13 places to put these 40 to 50 temporary units?

14 A Yes.

15 Q And how were these choices made?

16 A We were trying to develop a broad range of options as
17 possible. And then, ultimately, it would be a decision, you
18 know, based on the engineering of the site and leadership as to
19 which way to go.

20 But, again, this was a planning document, an early stage
21 planning document.

22 So more analysis would have had to have been done to
23 determine which site or which sites would be ideal or
24 preferable.

25 Q And you identified nine sites, as shown on the bottom of

1 page 3 there, sir?

2 A Yes.

3 Q Including the golf course?

4 A I think these were options next to or adjacent to the golf
5 course, not actually taking the golf course.

6 THE COURT: Just a moment. It sounds like you are
7 destroying the golf course.

8 THE WITNESS: No, no. I think it was adjacent to
9 the golf course.

10 THE COURT: You are only looking at 1.55 acres of
11 that golf course, correct?

12 THE WITNESS: Yes.

13 THE COURT: So with the Veterans Barrington Park,
14 that parking lot, you're not taking the whole parking lot?
15 It's a portion of 1.44 acres?

16 THE WITNESS: Correct. Correct.

17 THE COURT: Same thing, obviously, with the golf
18 course.

19 What about the Japanese gardens? Is that a large
20 section of that?

21 THE WITNESS: I don't recall. I don't recall on
22 the --

23 THE COURT: The Veterans Garden behind B210.

24 THE WITNESS: That is a large area. We wouldn't
25 need to take the whole thing. 7.11 was the space potentially

1 available, but we wouldn't take the whole thing.

2 THE COURT: The baseball field near MacArthur Field.
3 Is there another baseball park up there besides the boy's
4 school and the UCLA facility?

5 THE WITNESS: There is a -- outside of the fence,
6 there is an unused baseball field, which belongs technically to
7 Brentwood.

8 THE COURT: And the Great Lawn, I don't what that
9 is.

10 THE WITNESS: That is the area near CTRS. There is
11 a big lawn.

12 THE COURT: Where is it near?

13 THE WITNESS: It's near CTR- -- it's at the -- if
14 you go to sort of the -- I'm trying to describe it.

15 On the front end, away from CTRS, there is a huge grass
16 area. It's proximate to CTRS.

17 THE COURT: If you drive in past the chapel, is it
18 off to the left? There is a grass area, and you used to have
19 some bridge homes in there?

20 THE WITNESS: It would be -- my sense of direction
21 is so poor. It would be to the left, yes.

22 THE COURT: To the left. And there is a big --
23 grass there?

24 THE WITNESS: Yes.

25 BY MR. SILBERFELD:

1 Q Is the Great Lawn, Mr. Kuhn, if you are driving west along
2 Wilshire Boulevard and you turn --

3 A It's along Wilshire.

4 Q -- right onto San Vicente, is that the Great Lawn on your
5 right?

6 A Yes.

7 THE COURT: Yeah.

8 THE WITNESS: And, again, the size of these areas,
9 that is the potential area. We wouldn't use the entire thing.

10 THE COURT: I'm almost done. But what is parking
11 lot 16? Is that one of the two parking lots?

12 THE WITNESS: I don't recall.

13 THE COURT: Okay. And the southwest corner of the
14 North Campus.

15 THE WITNESS: Again, I don't recall. It should be
16 on the maps, though.

17 THE COURT: Okay. If I added all of this acreage
18 together -- and I know there may be environmental concerns, you
19 didn't get far enough -- how much acreage is here?

20 Hold on for a second.

21 About 25, roughly. About 25?

22 THE WITNESS: Yes.

23 THE COURT: A little less. Okay. Thank you.

24 BY MR. SILBERFELD:

25 Q So --

1 A And these are areas we felt would be accessible fairly
2 quickly. Wouldn't take --

3 THE COURT: And I understand this is a draft.

4 THE WITNESS: Yes.

5 THE COURT: There could be landfill, environmental
6 problems. I understand that.

7 BY MR. SILBERFELD:

8 Q Let me ask you to take a look at Exhibit 57.

9 Do you have it in front of you, sir?

10 A Yes, I do.

11 Q Can you tell us what this is?

12 A So this looks like -- looking at the first page -- the
13 different possible units we were looking at for modular housing
14 or designs.

15 Q This was a PowerPoint used for evaluating the modular
16 housing temporary housing idea you had?

17 A Yes.

18 Q You recognize this as a document you used in the normal
19 and ordinary course of your business?

20 A Yes.

21 MR. SILBERFELD: Offer 57, Your Honor.

22 THE COURT: Received.

23 (Exhibit 57 received into evidence.)

24 BY MR. SILBERFELD:

25 Q On the second page of the PowerPoint, under project

1 summary, we have President Lincoln's quote. You are familiar
2 with that I know.

3 What is the vision that is described there, Mr. Kuhn?

4 A As I just shared, we want to be able to create as much
5 access as possible to every veteran. There is not a one side
6 fits all.

7 We need to be able to be creative in our ability to
8 develop services and housing designs that are going to get
9 people off the street, and this was one of them.

10 Q The execution box is the description of the 40 or
11 50 units, correct?

12 A Yes.

13 Q And the need is described as based on 3,456 veterans
14 experiencing homelessness in Los Angeles, correct?

15 A That's correct.

16 Q That was sort of the operating premise behind this idea as
17 of March of 2023?

18 A Yes.

19 Q And you had authority to do it and --

20 A Well, we are saying -- we are advocating we had the
21 authority to do it.

22 We never got to the point to see whether it would pass
23 that test.

24 Q And you thought it would cost 10 to \$13 million, correct?

25 A Yes.

1 Q Where would VA have gotten the money to do that?

2 A Again, the American Rescue Plan. There was unspent money
3 at that time nationally in the American Rescue Plan, and we
4 were trying to make a pitch to get it.

5 Q And then if you turn to page 4 of this Exhibit 57, there
6 was a budget overview, which had, I guess, competitive bids
7 from three vendors; is that right?

8 A We would call it market research. We weren't at a point
9 yet where we were doing competitive bids.

10 Q Okay. But you did some research --

11 A Research, yes.

12 Q -- to figure out what three different vendors might
13 charge --

14 A Correct.

15 Q -- for a like-to-like comparison of modular housing?

16 A Yes.

17 Q And that was roughly between 11 and \$12 million or so?

18 A Yes.

19 Q Okay. All in?

20 A We hoped.

21 Q And if it was 40 units, that would be \$300,000 a unit,
22 roughly?

23 A Right.

24 Q And that was considered to be a reasonable expenditure?

25 A Incredible bargain. If, in fact, we could have done that.

1 I mean, the issue always with market research is when the bids
2 come in and it's an actual contract, they can be considerably
3 different than what you learned in market research.

4 Q Okay. I want to change subjects with you and talk about
5 eligibility requirements for HUD-VASH housing. All right?

6 The eligibility requirements are complex, are they not?

7 A I don't know that I would describe them as complex, no.

8 The application for a voucher is a pain in the neck.

9 But I don't know what -- complex in what way, would you
10 say?

11 Q Well, let me show you Exhibit 113, and maybe this will
12 help.

13 For the record, Your Honor, Exhibit 113 is a document
14 consisting of seven pages. It is a series of e-mails.

15 And, Mr. Kuhn, the e-mails I want to talk with you about
16 are on page 3 and page 6 and 7, okay? Some of those are to you
17 or have been sent to you.

18 A I think I have the wrong document. I have the VCOEB
19 recommendations. If you show it on the board, it will be fine.

20 Okay. I'm good.

21 Q All right. So let me point you to the very first e-mail,
22 which begins at the bottom of page 6 of Exhibit 113 and runs
23 over to the first half of page 7.

24 All right?

25 A Uh-huh.

1 THE COURT: Just a moment. I want to disclose to
2 you that I know the first recipient on this, Steve Peck, to all
3 parties. That relationship goes back a long ways. I recognize
4 this name, and I know who this person is.

5 And, in fact, I received a phone call when this case
6 started, and he wanted to give me input about the position that
7 the builders would be in.

8 I immediately shut off that conversation. I said I
9 couldn't talk to him anything about the case because we were in
10 session.

11 He said if he could be helpful to let the parties know
12 because it had, he believed, a detrimental effect on the
13 ability of the construction to go forward.

14 And I immediately cut off that conversation and said,
15 Steve -- the reason I know him is from the Marine Corps. And I
16 also know him because of his father and Harry Pregerson's
17 efforts involving the freeway interchange that he shut down
18 when a number of minority families, 10,000, were being moved in
19 the Century Interchange.

20 I also know him because he came to Santa Ana seven years
21 ago or six years ago to testify on behalf of homeless veterans.

22 I think he belongs -- I think he's the president of the
23 U.S. Vets or something.

24 THE WITNESS: Yes.

25 THE COURT: And on the occasion I was there with

1 Braverman, and on one other occasion, he has shown me a
2 building that he's involved in, and I can't remember the number
3 or the location, and a semi-tour of some of the areas that you
4 are pointing out to me.

5 I would rather over-disclose than under-disclose, but I
6 know who that person is.

7 The rest of the folks here, besides, you now, I don't
8 recognize.

9 Okay. All right, counsel.

10 MR. SILBERFELD: Thank you, Your Honor.

11 BY MR. SILBERFELD:

12 Q Mr. Peck wrote to you, Mr. Kuhn, on Friday, January 27th,
13 2023. And the subject is AMI and SMI.

14 Do you see that, sir?

15 A Yes.

16 Q What does AMI and SMI refer to?

17 A AMI is area median income. So, in this case, he was
18 writing about limits imposed as a criteria.

19 You have a -- it's not unusual for some of these
20 developments to have limits. In fact, all of them have some
21 limits on the income of the applicant, and that is connected to
22 the AMI, the area median income.

23 SMI is serious mental illness.

24 Q All right. And if you turn the page to the subject of
25 e-mail. Mr. Peck writes: On the call yesterday -- apparently,

1 you and he must have had a call the day before -- you --
2 meaning you, Mr. Kuhn -- pinpointed a significant issue as we
3 screen veterans for Building 207.

4 As we search for veterans over 62 with SMI, we will
5 likely find that many of them have a service-connected
6 disability income that will put them over the 30 percent AMI,
7 thus making them ineligible for a bed.

8 Do you see that, sir?

9 A Yes.

10 Q So let's just unpack that a little bit.

11 Building 207 is one of the three buildings that
12 comprised the 233 units, correct?

13 A That's correct.

14 Q And by reason of the way that building was financed, there
15 are strings attached to who may live there; is that correct?

16 A That's correct.

17 Q And one of the strings that is attached to Building 207 is
18 that only people over the age of 62 may live there, correct?

19 A Correct.

20 Q And there are disability restrictions, too. They have to
21 have a serious mental illness in order to live in that
22 building; is that right?

23 A That's correct.

24 Q And adding complexity to complexity, there is the question
25 of their service-connected disability income counting against

1 their percent of AMI, correct?

2 A That's correct. Fortunately, at least, that last piece,
3 thanks to the incredible work of Dr. Harris, AMI is not going
4 to be as strong an issue any longer.

5 Q You are reading ahead, and we will get there.

6 But I do want to talk to you about that in just a
7 moment.

8 Before the announcement that HUD made yesterday, what
9 would have happened to a 100 percent service-connected
10 disability 62-year-old with serious mental illness who wanted
11 to live in Building 207?

12 A Incredibly, we would not have been able to send them
13 there.

14 Q And that's because of what?

15 A Because of the AMI restriction. AMI, meaning that their
16 service-connected disability payment, a disability payment they
17 got because they got injured in the military, made them
18 ineligible for care -- or housing in a place where they could
19 get care because of their disability.

20 So it was mind boggling, yes, that they could not get
21 in.

22 Q And Mr. Peck's e-mail goes on in the second paragraph to
23 say that service-connected veterans with serious mental illness
24 are frequent users of the VA system and would seem to be the
25 ideal target for our beds at the VA, giving them ready access

1 to psych services.

2 You agree with that, don't you?

3 A I agree with that.

4 Q Okay. That is part of the cruel irony of what had
5 existed --

6 A Yes.

7 Q -- correct?

8 A Yes.

9 Q Okay. So what changed yesterday?

10 A There was a lot of advocacy work and education. And,
11 again, I want to publicly thank Dr. Harris for his incredible
12 work on this.

13 You know, it's heartening to be able to see something
14 like this.

15 THE COURT: And who is Dr. Harris?

16 THE WITNESS: Raise your hand. You have done a
17 wonderful job.

18 And it took a lot of cross-agency work across HUD,
19 across treasury, and with VA partners to be able to get the
20 advocacy to a point where HUD finally listened.

21 And I think the advocates on the plaintiffs' side had
22 something to do with this as well -- so thank you -- to get
23 this to change, and it's an important event.

24 BY MR. SILBERFELD:

25 Q What is your understanding -- I'm not asking for a legal

1 opinion, believe me.

2 What is your understanding, Mr. Kuhn, as to when that
3 rule change or policy change will be effective?

4 A Well, we have to wait for the formal guidance to come to
5 the PHAs, the Public Housing Authorities. And they will notify
6 us, but I assume that will happen very quickly.

7 Q Is there any sort of --

8 THE COURT: Wait a minute. Counsel --

9 MR. SILBERFELD: Sorry. I didn't hear you, Your
10 Honor.

11 THE COURT: Before this trial ends? We don't know,
12 do we?

13 THE WITNESS: I can't speak for the Public Housing
14 Authorities. I would like it to have happened yesterday.

15 THE COURT: All right. Counsel, please continue.

16 BY MR. SILBERFELD:

17 Q That's all right.

18 Is this change at HUD subject to a notice and comment
19 period, as you understand it?

20 A No. This is not a regulatory change. This is something
21 they can just essentially issue, which they have, an edict.

22 THE COURT: Could you explain to me a little bit
23 more about how this change would reach, you know, concreteness
24 or fruition?

25 The secretary now has made this decision. The rule

1 change, help me -- walk me through the process.

2 I'm trying to figure out what I'm going to have to
3 eventually decide and not. If it's not in place, then I have
4 to decide it.

5 THE WITNESS: I will give you my understanding.
6 Dr. Harris is the expert.

7 THE COURT: Your best -- you are welcome to chip in
8 informally any time you want to. I just need some help.

9 THE WITNESS: So my understanding of this is this
10 does not require a statutory or regulatory change. HUD can
11 simply just announce it, and what it does is it allows veterans
12 to apply for housing with their service-connected payments not
13 considered for the purpose of eligibility.

14 When they start paying rent, though, it is counted. So
15 when we say you have to pay 30 percent of your income for rent,
16 that service-connected income is counted.

17 They should be able to afford it, though. It's only
18 30 percent; however, you are not denied the housing.

19 So that way, if we have a veteran who can live on the
20 campus and wants to live on the campus, that service-connected
21 disability payment won't block him.

22 THE COURT: I see. Okay. Now, the position --

23 THE WITNESS: Now, the one -- I should. One caveat
24 I have to add. So that's for HUD.

25 What we still have to wait for is Treasury's

1 notification. Some of these -- another barrier is that these
2 units were funded, the capital construction costs were funded
3 with low-income housing tax credits.

4 Those tax credits are ruled by Treasury. They also need
5 to change their policy.

6 THE COURT: I will wait for counsel. I know that
7 there is a request that I take judicial notice from the
8 plaintiffs.

9 You docketed almost -- I think yesterday. We saw that
10 literally while we were in session; it came up. I'm going to
11 leave that to each of you deciding what is still on the table
12 for the Court or not at that time.

13 So I won't go any further.

14 I won't presume -- I will wait for each party to come to
15 the Court whether this is adequate or not or whether this needs
16 to be decided by the Court, okay.

17 I will need some guidance on that. I don't want to
18 decide something that doesn't need to be decided.

19 By the same token, if it's still on the table, the case
20 is going to conclude some time, I hope, in August so --

21 All right, Counsel.

22 BY MR. SILBERFELD:

23 Q So, Mr. Kuhn, looking at the -- I think it's the press
24 release from yesterday.

25 You have read that, have you not, sir?

1 A Yes.

2 Q Let me just -- rather than even showing it to you, let me
3 just read you one part of it.

4 It sort of gives the history. It says, HUD has been
5 working with the Treasury to determine the effect of an
6 alternate income definition and so forth.

7 It says, Treasury expects to issue guidance on this
8 issue in the near term.

9 Is that something, as you understand it, that we all
10 have to wait for?

11 A Yes.

12 Q Okay. And it goes on to say, HUD will also encourage
13 state and local governments to make corresponding changes in
14 their subsidy programs to ensure that all veterans experiencing
15 homelessness have access to supportive housing.

16 Is it your understanding -- and I realize it just
17 happened yesterday, but is it your understanding that once this
18 edict is issued by HUD that state and local entities may follow
19 it or must follow it to have a relationship with HUD?

20 MR. LOWENSTEIN: Your Honor, can I just ask for
21 counsel to please put that up on the screen? He asked it as
22 part of his question.

23 I think the witness needs to see that.

24 THE COURT: Sure. I would like to see it also.
25 It's hard for me to follow. Thank you.

1 And once again, just initially, one of the benefits I
2 saw is that if this does take effect -- this is nationwide; it
3 doesn't involve Southern California -- it goes nationwide.
4 That's much better, hopefully, than a Court ruling on this
5 issue in a limited lawsuit in Southern California. Tremendous
6 change.

7 It also saves an appeal on this matter, which, in all
8 likelihood, would go up. And, hopefully, it's not something
9 that the Court has to decide, that this could be decided
10 quickly, taking one more thing, but it may not be adequate from
11 the plaintiffs' standpoint. You still may be examining this.
12 So I can't presume that this has virtue other than the
13 nationwide edict that would be handed down, rule.

14 It may not be satisfactory. You still may be asking for
15 a ruling from the Court.

16 Why don't we just leave this on the table without
17 further input by me.

18 Let's see what Treasury does, et cetera, but I think all
19 of you ought to be thanked for making the effort.

20 Counsel.

21 BY MR. SILBERFELD:

22 Q So we had an objection asking to put the document up. I'm
23 not sure you answered my question, though, Mr. Kuhn --

24 A Well, I can't --

25 Q -- as to whether or not --

1 A You would have to ask HUD.

2 I would hope it has teeth that this is a requirement. I
3 don't know how this is defined.

4 Again, we'd have to go to HUD.

5 Q All right. Let's change subjects.

6 When you first became the detail deputy director in the
7 fall of 2022 to the present, you have attended, have you not,
8 meetings of the VCOEB?

9 A Yes.

10 Q And what does the VCOEB stand for?

11 A Veterans -- oh, my goodness. It's the advisory council.
12 I should know the acronym. It's the advisory council to the
13 secretary about homelessness in Los Angeles for the master
14 plan.

15 Q Veteran and Community Oversight and Engagement Board?

16 A See, you know it better than I do.

17 Q Sound about right?

18 A That sounds about right.

19 Q All right. And within weeks of coming to Southern
20 California, you attended your first VCOEB meeting, did you not?

21 A I did.

22 Q Let me ask you to look at Exhibit 51.

23 Got it?

24 All right. Do you recognize this as being the minutes,
25 essentially, of the VCOEB meeting that occurred on

1 October 19th, 2022, Exhibit 51?

2 A I will take your word for it.

3 Q Okay. If you turn to page 47 of the exhibit.

4 Do you have that, sir?

5 A I do.

6 Q It has Dr. Bamberger's name at the top.

7 Do you see that?

8 A Yes.

9 Q All right. We are on the same page.

10 You spoke at this meeting, did you not?

11 A Yes.

12 Q Sorry?

13 A Yes.

14 Q Okay. And describe to the Court what the back and forth
15 is here between questions and answers.

16 How are these meetings conducted such that a person like
17 Dr. Bamberger could pose questions to people from VA?

18 A I presented at that meeting. Something about my
19 presentation, which is lost in the fog of my memory, obviously
20 elicited some response from Dr. Bamberger.

21 Q Do you know who Dr. Bamberger is?

22 A Yes.

23 Q Who is he?

24 A He's a well-known, well-respected housing advocate who --
25 based out of the bay area who was part of the VCOEB.

1 Q And he posed a question or a comment to you saying you
2 cannot have -- and this is at the top.

3 If we could blow that up, please, Tom.

4 You cannot have emergency rooms full of people
5 traveling. Why haven't all of those people in CTRS and tiny
6 homes been housed yet by now?

7 Do you see that?

8 A Yes.

9 Q And what did you say in response?

10 A It says my response was: Many of those individuals do not
11 want to go to some of these other programs.

12 Q How did you know that?

13 A I have no idea the context of that conversation. I don't
14 know.

15 Q Was it based on your many years of experience with
16 homelessness elsewhere, or was it based on whatever you knew in
17 the three weeks that you were here?

18 A I don't even know what the context of this conversation
19 is. I don't know what happened before that quote.

20 I don't know -- I don't remember what we were talking
21 about, so I just have no context.

22 Q Okay. You go on to describe Maslow's hierarchy of needs.

23 Do you see that, sir?

24 A Yes.

25 Q And what did you intend to convey with that?

1 A Typically, when I'm talking about Maslow's hierarchy of
2 needs, I use it as a basis for justifying Housing First.
3 Sometimes as a way of helping people understand Housing First,
4 I talk about Maslow's hierarchy of needs and how Housing First
5 is built upon a field of research and psychological knowledge
6 that is well-established.

7 This is not something that came out of thin air. There
8 is strong evidence base.

9 Q And even at this early time in your tenure, you were
10 already reporting to the VCOEB about staffing challenges at the
11 VA, correct?

12 A As I generally recall that early meeting, I was trying to
13 share my vision of where I thought the program could go to be
14 more successful.

15 Q And at the bottom of that page, you spoke about adding
16 staffing?

17 A Yes.

18 Q And over onto the next page, you described to the VCOEB in
19 the fall of '22 what the staffing vacancy situation was at CERS
20 at the time as 76 percent, correct?

21 A Correct.

22 Q And that 76 percent amounted to 108 vacancies as of the
23 time you first arrived?

24 A That's correct.

25 Q And it's your view you've made substantial progress since

1 then?

2 A We have. It's in the upper 80s now.

3 THE COURT: Well, just a moment. You also, though,
4 had 29 positions in the pipeline at that time; is that correct?

5 THE WITNESS: Yes.

6 THE COURT: That would be the 108 minus the 29?

7 THE WITNESS: No. The vacancies -- so there would
8 be -- of the 28 -- of the 108, 29 were probably being close to
9 recruited.

10 So I guess there would be 81 -- or, excuse me, 79
11 positions it would be. Yeah.

12 THE COURT: Because you had 29 of the 108 --

13 THE WITNESS: That we -- right -- hoped would be.

14 THE COURT: About 79 or 80.

15 THE WITNESS: Yes.

16 BY MR. SILBERFELD:

17 Q And the HUD-VASH positions were at about the same staffing
18 vacancy rate --

19 A That's correct.

20 Q -- in the middle 70s, right?

21 A Yes.

22 Q Do you recall at this meeting a presentation about
23 proposed projects for fiscal year '23?

24 A I need more details. I don't know what the --

25 Q Sure. Take a look at page 85 of this meeting minutes.

1 A Yes. These would be projects that were being talked about
2 for lease revenue, I think.

3 Q Using lease revenue for these projects?

4 A None of them were done except for the access road.

5 Q Okay. But what was reported for fiscal year '23 was
6 spending six and a half million dollars on phase 1 and 2 of a
7 domiciliary garden, correct?

8 A These were ideas. These were not projects.

9 Obviously, we didn't do them. And they were projects
10 that never got past the possibility stage.

11 Q And at least somebody was recommending four and a half
12 million dollars be spent to renovate the Wadsworth Theatre?

13 A Yes.

14 Q And a million dollars to be spent to do something to the
15 CTRS access road?

16 A Right.

17 Q Do you see that, sir?

18 A That was done. That was the only project that was done.

19 Q Okay.

20 A It's our responsibility to report to VCOEB things that are
21 under consideration. It doesn't mean we're going to do them.

22 And we didn't do, obviously, most of these because they
23 just weren't priorities.

24 Q No recommendation for fiscal year '23 to do anything to
25 construct temporary housing, correct?

1 A At that time, we were -- we had no -- I mean, that is,
2 essentially, what the modular housing proposal was. We were
3 trying to get authority to do just that.

4 That temporary housing we had created at CTRS was
5 created through donations.

6 Q Right. Let me ask you to look at Exhibit 160, which will
7 be brought to you, sir.

8 Mr. Kuhn, Exhibit 160 is a two-page document. It's a
9 series of e-mails between you, Mr. Reynolds, and Dr. Braverman.
10 Do you see that, sir?

11 A Yes.

12 Q If you go to the first e-mail, which appears on the second
13 page of Exhibit 160, Mr. Reynolds is someone you know, correct?

14 A Yes.

15 Q How do you know Mr. Reynolds?

16 A Mr. Reynolds is an advocate for veterans who are unhoused.

17 Q He's what?

18 A He's an advocate for veterans who are unhoused. He is
19 very active in doing outreach, has played a critical role in
20 helping many veterans get off the streets and into housing.

21 MR. SILBERFELD: Offer Exhibit 160, Your Honor.

22 THE COURT: Received.

23 (Exhibit 160 received into evidence.)

24 BY MR. SILBERFELD:

25 Q In his e-mail to you -- actually, this one is to

1 Dr. Harris.

2 Mr. Reynolds refers back to the proposed projects for
3 fiscal year '23.

4 Do you see that?

5 A Yes.

6 Q And he writes: I need help understanding how there is a
7 request for six and a half million dollars for a garden at the
8 domiciliary -- and I'm skipping a little bit.

9 A Uh-huh.

10 Q Was that ever explained?

11 A Well, I'm not sure what you are asking. Was what ever
12 explained?

13 Q Was that allocation, according to his question, ever
14 explained to him?

15 A I don't recall. But we never moved ahead with it.
16 Certainly, Rob has a lot of good input.

17 Mr. Reynolds' input is taken very seriously. He is
18 thoughtful. He is always looking out for the best interests of
19 veterans. And here, again, is an example of that.

20 It didn't move ahead. I don't recall if it didn't move
21 ahead because, ultimately, you know, these comments or we just
22 realized that we didn't have the money for it or it just didn't
23 make any sense. I just don't remember.

24 Q Well, did it make any sense to you?

25 A There is value in it. We want to -- you know, earlier, we

1 talked about creating a community.

2 Part of a community is having places where people want
3 to go. We like parks. I don't know about -- you know, I like
4 to go to a park for walks. Other people, our veterans like it
5 too, places for calm repose and enjoying nature. So would
6 gardens and a park be nice? They absolutely would be nice.
7 They would add to the community. They would add to the qualify
8 of life.

9 But is that the priority for this? Obviously, it
10 wasn't. We didn't spend the money.

11 Q Okay.

12 THE COURT: Is the serenity garden a Japanese
13 garden? I don't know what a domiciliary garden is.

14 Could you help me? Could you show me --

15 THE WITNESS: There is none. It was never built.
16 This is --

17 THE COURT: The one that was contemplated. Where
18 was it supposed to go?

19 THE WITNESS: I don't know. I don't even know if we
20 got to that point.

21 THE COURT: Well, we didn't have a garden at the
22 time it was contemplated.

23 THE WITNESS: Yes.

24 THE COURT: But there had to be a location that --

25 THE WITNESS: I assume there was. I just don't know

1 where that would have been.

2 THE COURT: Do you know how much acreage was
3 involved?

4 THE WITNESS: No idea.

5 THE COURT: Okay. Thank you.

6 BY MR. SILBERFELD:

7 Q Ultimately, Dr. Braverman pulled the plug on the idea,
8 didn't he?

9 A He would be the approving authority. And if he wanted to
10 do it, it would have been done. If he didn't want to do it, it
11 didn't get done so --

12 Q Well, he wrote to you the top e-mail in Exhibit 160. And
13 he said, quote: We probably and justifiably need to move the
14 garden to the bottom of the list.

15 A Yes.

16 Q I would like to show you Exhibit 54, Mr. Kuhn, which is
17 another advisory board meeting, September 28, 2023.

18 Do you have it, sir?

19 A Yes.

20 Q You attended this meeting?

21 A I assume so.

22 Q Well, take a look at bottom of page 2, and you will see
23 your name.

24 A Then I attended.

25 MR. SILBERFELD: Okay. Offer Exhibit 54, Your

1 Honor.

2 THE COURT: Received.

3 (Exhibit 54 received into evidence.)

4 BY MR. SILBERFELD:

5 Q At that time, at the bottom of page 54 and the top of
6 page 53, this is approximately a year into your tenure here at
7 West LA, you were still addressing the shortfall in staffing.

8 Do you see that, sir?

9 A On page 4, you are saying?

10 Q Bottom of -- well, it's the second page of the document.
11 It's page 25 of the exhibit and page 26.

12 May I approach, Your Honor? And I will show the
13 witness.

14 THE COURT: Yes.

15 THE WITNESS: I have it now.

16 MR. SILBERFELD: You have it?

17 THE WITNESS: Yes.

18 BY MR. SILBERFELD:

19 Q Is it correct, sir, that as of September of '23, you were
20 still reporting to the board about staffing issues?

21 A Yes. The staffing issues, again, were improving, but they
22 were still a cause of concern.

23 Right about that time, we began, finally, awarding some
24 contracts, so we had a process for a number of months.

25 Contracting processes are not necessarily fast, but they did,

1 finally, come out shortly after that and have contributed
2 significantly in addition to the additional staffing to our
3 capacity.

4 Q Right. And if you turn to page 33 of this set of minutes,
5 do you see the section entitled, Barriers to Voucher Use?

6 A Yes.

7 Q You reported on a couple of important points from the
8 slide.

9 Do you see that, sir?

10 A Yes.

11 Q And one of the things you reported was that -- in the
12 bottom half of the page, the second -- sorry, the third bullet
13 point, is that utilization of tenant-based vouchers is around
14 60 percent.

15 Do you see that?

16 A I do.

17 Q That figure has not much changed --

18 A No, it hasn't.

19 Q -- in a long time?

20 A It's frustrating.

21 Q A decade or more, right?

22 A Yes. I don't know about a decade, but in the years I have
23 been here and shortly before that, yes, that's correct.

24 Q And then just below the last bullet there, you write:

25 "Some veterans suffer from learned helplessness due to trauma."

1 What did you mean by that?

2 A Well, this goes back to why we want to make access
3 barriers as low as possible.

4 Veterans who come to us, and this isn't just HUD-VASH,
5 this is veterans unhoused seeking services, need to feel like
6 we respond quickly to their needs.

7 So if you are unhoused veteran and you are coming for
8 help, we can't give you an appointment for screening and, you
9 know, tomorrow or the next day or put you off.

10 We can't -- we need to be available when you need the
11 help.

12 So what happens is when we're not available when you
13 need the help, the veteran, unfortunately, can give up.

14 They have already learned by living on the street that
15 there is nothing for them. That's how many of them feel, that
16 they have been forgotten.

17 Q The housing navigator reference there a little further
18 down, that would be a VA staff person, would it not?

19 A It could be a VA staff person, it could be a grantee.

20 SSVF has actually been probably the leader for housing
21 navigation, and we often lean into SSVF grantees to do this
22 work.

23 Q And over on the next page.

24 THE COURT: Just a moment, who is making this
25 comment, I don't understand.

1 The bullet point says: "Some veterans suffer from
2 learned helplessness due to trauma and it's hard for them to
3 engage in some of these process."

4 That is your input, correct?

5 Below that -- I'm not assuming anything, it says: If
6 they want to ensure veterans stay in housing they need to
7 ensure that they hire enough housing navigators and people
8 involved in the process of placing veterans and helping
9 veterans find housing.

10 They don't have enough VA staff to move aggressively.
11 Now, that can be you talking.

12 A It sounds like it.

13 THE COURT: It's VA, enough VA staff to move
14 aggressively to increase the use of the vouchers.

15 They have contracted staff to fill in gaps. They have
16 gone from 16 million and contracting to 36 million to get more
17 staff.

18 They are hiring staff that know LA and who could parlay
19 that awareness of the community knowledge into effectiveness
20 and partnerships, that they may be able to leverage through
21 that.

22 That doesn't sound like you speaking. Who is that
23 coming from?

24 THE WITNESS: I don't know.

25 THE COURT: Is that someone from the committee?

1 THE WITNESS: Must have been.

2 THE COURT: I didn't take that to be your comment.

3 MR. SILBERFELD:

4 Q Over on the next page, which is page 34 of Exhibit 54, you
5 see this section entitled, veteran homeless populations
6 increasing vulnerability, sir?

7 A Yes.

8 Q Is that a slide you presented on?

9 A It's likely.

10 Q Sorry?

11 A It is likely my slide, yes.

12 Q Okay. And as of September of 23, roughly a year ago now,
13 you reported about the fact that the veteran population was
14 aging?

15 A And continues to.

16 Q And continues to.

17 And that greater levels of disabilities were being
18 presented.

19 A Yes. That's a trend we have been observing for at least
20 the last decade.

21 Q And do those factors, among others, make the need for
22 housing on the campus and off campus an urgent matter as far as
23 you are concerned?

24 A Anyone who is homeless needs housing.

25 The health risks for people who are unhoused are well

1 documented, regardless of age.

2 We don't need extra incentive to do whatever we can to
3 provide these services.

4 Q I want to change topics with you and talk about the leases
5 that are on the West LA VA grounds.

6 All right. You have read, I gather, the West Los
7 Angeles Leasing Act?

8 A I'm generally familiar with it, yes.

9 Q I'm not asking for a legal opinion, but you understand
10 that in order to have leases on the property, according to the
11 act, the leases and the activities around the leases must
12 principally benefit veterans, correct?

13 A Correct.

14 Q And you also understand that at least as to UCLA and its
15 baseball stadium, there is a different standard, namely, that
16 the activities of the regions on the property have to have as
17 their predominant purpose, benefiting veterans.

18 Do you understand that?

19 A Yes.

20 Q Okay.

21 THE COURT: Just a moment. Thank you, counsel.

22 BY MR. SILBERFELD:

23 Q Let me ask you about UCLA, Mr. Kuhn.

24 Do you believe that the use of the baseball stadium by
25 UCLA has, as its predominant focus, the provision of services

1 to veterans?

2 A I do not.

3 Q And with respect to Brentwood School, they have a lease
4 that essentially provides for a payment of some money in rent,
5 correct?

6 A Correct.

7 Q And the provision of in-kind services that are valued by
8 them, correct?

9 A Correct.

10 Q The in-kind services that, over the years, Brentwood
11 School has counted as part of its consideration for the lease
12 is the maintenance of property that is essentially its leased
13 property, right?

14 A That's correct.

15 Q And in one year, at least, they said the value of them
16 taking care of their own property that was leased from the VA
17 was \$520,000.

18 Do you recall that?

19 A I do recall that.

20 Q Did you regard that in-kind contribution as making any
21 sense whatsoever?

22 A So, a couple of things.

23 I don't want to defend the in-kind contributions but the
24 logic behind it is, first, their giving in-kind contributions
25 above and beyond what's required.

1 So even if you subtract that out, I still think they
2 meet their contractual obligations, and that if we own the
3 property, we would have to maintain it.

4 That said, no, it does not primarily benefit veterans.

5 Q Well, if you had the property, yes, you would have the
6 obligation to maintain it, but you would also have the use of
7 it?

8 A Again, I don't want to defend it, I'm just trying to
9 explain what the logic is from their viewpoint.

10 Q It doesn't make any sense to you, does it, sir?

11 A Not particularly.

12 Q Pardon me?

13 A Not particularly.

14 Q Thank you.

15 Last topic, then I will sit down, you can stand up.

16 A Thank you.

17 Q Are you familiar, Mr. Kuhn, with the term "functional
18 zero"?

19 A Yes.

20 Q Please explain to the court what functional zero is?

21 A A functional zero is a term used by community solutions to
22 describe getting to a point where any person that is for
23 homeless population, who is homeless can quickly go back into
24 housing, that they are not going to stay homeless. You have
25 the capacity to rehouse them, and you have essentially ended

1 homelessness for anyone who needs housing.

2 So there is no point where you actually get to zero,
3 because there is always people who are going to need services,
4 but when people enter services, you can serve them quickly and
5 get them onto a path to housing quickly.

6 Q Is another aspect of functional zero to say that fewer
7 people enter homelessness than exit it?

8 A Certainly no more enter homeless than exit.

9 Q And because you mentioned community solutions, I gather
10 you are aware of the cities in this country who have reached
11 functional zero, namely, ended homelessness and some
12 specifically with regard to veteran homelessness.

13 You aware of that, are you not?

14 A Yes. We plan to be one, too.

15 Q You are not one today?

16 A No, we're on the way, though.

17 Q There are 12, right?

18 A I don't know the exact number, but that sounds right.

19 Q So if you look at the community solutions website, Norman,
20 Oklahoma, eradicated veteran homelessness in January of 2017.

21 Are you roughly aware of that?

22 A No, but I take your word for it.

23 Q Have you ever looked in the course of your duties as
24 deputy director at what was done in Norman, Oklahoma, more than
25 seven years ago --

1 A No, I have not.

2 Q -- to eradicate homelessness?

3 A No, I would not.

4 Q Would that be true of any of the cities I can list for
5 you?

6 THE COURT: Counsel, I don't think you have those
7 cities, in mind, do you?

8 THE WITNESS: No.

9 THE COURT: I don't either.

10 So if you want to go down them, that is fine.

11 BY MR. SILBERFELD:

12 Q Abilene, Texas, have you ever studied Abilene, Texas?

13 A No.

14 Q Eradicated veteran homelessness in November of 2018.
15 Chattanooga, Tennessee?

16 A No.

17 Q Eradicated homelessness in November 2019.

18 Montgomery County, Maryland, have you ever looked at
19 that?

20 A No.

21 Q Eradicated veteran homelessness in December of 2015.

22 Is there any model, Mr. Kuhn, that the West Los Angeles
23 VA is looking at to eradicate homelessness and reach functional
24 zero here?

25 A We do look at models that are evidence-based.

1 When you are asking about particular cities to apply
2 what Chattanooga has done has value in that we have absorbed
3 through evidence-based practices that are shared widely what
4 can be done to drive the count down.

5 And there are some basic principles that we're applying
6 here.

7 Have I gone to Chattanooga to see what Chattanooga does
8 and try to replicate it?

9 No, because what Chattanooga does isn't going to fit
10 necessarily what we do here.

11 What we need to do is get lessons learned from community
12 solutions and other technical assistance providers, other
13 researchers, and apply them as a model and a way that makes
14 sense here, and that's what we're doing.

15 Indirectly, we have absorbed the lessons from
16 Chattanooga.

17 Directly, if we try to replicate what Chattanooga does,
18 no.

19 Q Well, in fairness, without ever looking how would you know
20 if their experience wasn't transferrable and usable by you?

21 A You know, I can look at a thousand cities, and take
22 lessons learned from the ones that worked, and take lessons
23 failed and spin my wheels doing that.

24 What I have done, though, is over the 30-plus years I
25 have been in this field, and learned from experience and from

1 working with advocates and researchers, I know the practices
2 that work.

3 I don't need to go to Chattanooga.

4 I have developed some of these practices.

5 And the evidence is in what we're achieving here.

6 So, are we Chattanooga? No.

7 Have we increased housing placements? Yes.

8 Have we reduced homelessness? Yes.

9 Have we reduced unsheltered homelessness? Yes.

10 Have we brought more people in off the streets?

11 Have we increased housing voucher use, not where we want
12 to, but all of these metrics, in every single metric, we are
13 seeing decisive improvements, not just in LA, but compared to
14 our peers, compared to general population, compared to other
15 communities serving veterans.

16 So the lessons that are being applied in West LA, and
17 it's not just me, it's a collective effort undertaken by our
18 partners, the County, our nonprofit partners, have been
19 working, so the evidence is in the outcomes.

20 Q I didn't mean to interrupt you.

21 When can we expect functional zero at the West LA VA
22 Campus?

23 A Two years.

24 Q Two years?

25 A Two years.

1 MR. SILBERFELD: Thank you, sir.

2 THE COURT: That is functional zero for veterans?

3 THE WITNESS: Yes.

4 THE COURT: I don't want you taking on the whole
5 population of Southern California.

6 THE WITNESS: Two years, assuming not market
7 catastrophe, environment or otherwise.

8 MR. SILBERFELD: I have no other questions, Your
9 Honor.

10 I would like to mark the flip charts as Plaintiffs' 216,
11 collectively or individual.

12 THE COURT: 216?

13 MR. SILBERFELD: 216. I will put a mark on that.

14 THE COURT: Any objection, counsel, to 216 as a
15 demonstrative being received into evidence?

16 MR. LOWENSTEIN: No objection, Your Honor.

17 THE COURT: That is received. Now, will you be
18 rejoining us Monday again?

19 THE WITNESS: Yes, I will.

20 (Exhibit 216 received into evidence as demonstrative.)

21 THE COURT: Listen, can we take the gentleman back
22 in first thing in order, so he's back in order for your cross.

23 Would that be acceptable?

24 MR. LOWENSTEIN: That makes sense. Thank you.

25 THE COURT: Do you want to take him this evening?

1 If you finish him this evening, I'm happy to do that.

2 MR. LOWENSTEIN: I don't believe we would be able to
3 get through him.

4 THE COURT: One block of time is better for you?

5 Go have a good weekend, okay. Thank you very much.

6 Counsel, let me talk to you just a little bit about some
7 of the things we can anticipate and let's get you on the road,
8 flights.

9 I'm not sure where we stand in these areas in terms of
10 decision-making.

11 One of these is this obviously new development with the
12 regulations coming down.

13 Obviously, the judiciary doesn't have to decide an issue
14 that an agency is deciding or Congress or any of the executive
15 branch, we prefer not to.

16 I just don't know the time period of that, and I think
17 coming at this stage of the proceedings, I may be left in the
18 unenviable position of having to decide this anyway, if it's
19 not some concrete form.

20 Work that out for me, and try to see where we can go
21 with that, so I am not intruding into an area that might have a
22 benefit and making a needless decision.

23 By the same token, if it's not final, then here we are,
24 then I may have to decide this.

25 I have already found facial discrimination, but I think

1 we may have a little bit more time, because if we got into that
2 area and the rule hasn't been promulgated, we still have the
3 injunctive stage in that phase, which might give us another
4 week or two.

5 Okay. The second thing is how are all of you holding
6 up? Are you okay so far?

7 MR. SILBERFELD: Yes.

8 THE COURT: Are you okay so far?

9 We have had a pretty leisurely week so far up until
10 today, but my job is to keep this as fresh as possible.

11 So therefore, I'm letting you call your own time out in
12 a sense of when we recess, so you are fresh.

13 How are we doing on time? I'm not pressing you, it is
14 just that I know, everything is good for both of you and we
15 will all make it, but I don't believe it yet.

16 I don't care, but by next week I will have that
17 discussion again, because I'm happy to put that case back.

18 I just need to make a phone call out of courtesy I want
19 to give them a couple of weeks.

20 Now, what happens if in fact we don't resolve facial
21 discrimination, and we're back into an injunctive phase?

22 I would want to take that injunctive phase almost fresh
23 in time to where we are with the litigation, because I don't
24 want 20 or 30 cases getting into the Court's way, nor your way.

25 If we ever got there, I would want to invite that

1 gentleman back, Mr. Kuhn. He might be extraordinarily helpful
2 in terms of any remedy, just common sense, where we're at.

3 And I think I'm going to want almost all of your experts
4 available just in case we get there.

5 So whether it's Dr. Braverman or the different experts,
6 I just ask you to have them available in case we get there,
7 because part of this lawsuit is, is there liability here?

8 I mean, if there is a finding against you, that is a
9 portion of it.

10 We have got to sort this out in terms of what is
11 reasonable, if we ever get there.

12 Now, we may never get there, but right now we have
13 facial discrimination.

14 I had two other thoughts. Help me with aeriels.

15 Trust me, it is hard to keep up with Exhibit 1, and
16 these building changes, so when you hit 207, you will see me
17 rush to the old map or 205, you will see me walk over the old
18 map and try to match those up, because they have changed the
19 delineation.

20 No. 4, we don't have to go at 5:30, we can go until
21 6:00, just kidding you, but the only reason for that is because
22 I just don't want to get around school kids if we go out there
23 and I want to see Brentwood.

24 I really don't want to interfere with any parking if
25 whatever time they start with the merchants.

1 I don't want to be there in what I call working hours
2 where people might recognize us and start rushing up instantly,
3 trying to give input, when they just don't know.

4 We are there, of course, we would be accessible.

5 I certainly don't want to get in the way of
6 construction. That's why the early hour, okay.

7 But please, help me by telling me where you want to go
8 and agreeing on that, so we don't get out there and somebody
9 says, whoops, let's go by the following. Fair enough?

10 And I think we could do that probably in two hours,
11 okay.

12 It means you need to pay the courtesy of contacting
13 UCLA, if they have a baseball field, I don't know if it's
14 locked or not.

15 You need to pay the courtesy of lining up the Brentwood
16 School as a courtesy. We don't want to drive in with some poor
17 gate guard or somebody sitting there, wondering what we're
18 doing.

19 I'm assuming the parking lots are somewhat accessible
20 and I'm assuming through Bridgeland the oil area there is easy
21 to access.

22 Now, I notice so far, we have gotten into these leasing
23 agreements partially with Brentwood, and you have alluded to
24 UCLA.

25 When you brought your summary judgment motion, UCLA was

1 not included, if you look in the summary judgment motions. It
2 has come up for the first time in trial.

3 So I don't know what is really before me, you know, in
4 terms of the UCLA baseball stadium, because I didn't have any
5 summary judgment motions, pertaining to the parking lot,
6 drilling, and the Brentwood School.

7 Those were the three issues.

8 Lastly, I need some aerial photographs.

9 If you decide not to go out there in the first phase
10 then I need something that can look down at the Brentwood
11 School, I need something to look down at the baseball, maybe an
12 aerial view, but a much better map than these.

13 I need them bigger.

14 Also, the drilling area you have got out there.

15 Finally, I have heard a little bit of a conversation
16 between the two of you in terms of a possible settlement.

17 I don't want to go there.

18 First of all, it's pretty late in the game, but the VA
19 has to be involved -- this is a tremendous disadvantage for
20 you, because I'm hearing about this and you are hearing about
21 that at the last moment.

22 I don't want to know where you are at, but don't assume
23 that I'm going to grant a settlement if the two of you are in
24 good faith talking; I may not.

25 I may think it's wise and we do whatever you are

1 recommending if the VA is on board, it's just too premature.

2 In other words, don't lay off each other in terms of the
3 litigation, expecting the Court to do anything except examining
4 it when it comes to me.

5 A couple of questions I would have just as I was
6 thinking through your representations, I don't know what the
7 environmental impact report would look like.

8 I don't know whether the preservation society would get
9 in the way. I don't know if there is an agency that you can't
10 control in good faith on the VA if you thought that any
11 settlement was a good idea between Bridgeland.

12 Because again, this is the time for litigation. I don't
13 want there this to come back in 5 or 10 years.

14 So those are the timing issues that are concerning me.

15 I'm not chiding you, but I have been asking you since
16 January or February if we could possibly settle the matter.

17 I'm not going to punish you in any way, but I am saying
18 in this late stage I don't know how I get those guarantees
19 that even in good faith we are all on board, how I know with
20 concreteness this is going to happen.

21 Where is my environment report, and now we have got some
22 landfill out there?

23 I don't how to say this on the record, but you have got
24 to be kidding me, through no fault of anybody here. What a
25 disaster.

1 I had a whole bunch of other things, except get on the
2 plane or get in the car and we will see you Monday.

3 Is 8:30 comfortable for everyone?

4 Now, any input from the plaintiffs, anything that would
5 make the case go smoother on your part?

6 MR. SILBERFELD: No.

7 THE COURT: How about you folks with VA or HUD, or
8 Bridgeland, is there anything that would make the case go
9 smoother?

10 By the way if you notice, I'm asking questions when I
11 don't know or I don't understand, I apologize for the
12 interruption; I have got to understand it.

13 So I will break in occasionally saying, I just don't
14 understand.

15 For you folks, is there anything that would make the
16 case go smoother?

17 All right. Go home and have a wonderful weekend.

18 MS. WELLS: Your Honor, can I raise one housekeeping
19 sort of a logistical issue?

20 We identified among our exhibits some very voluminous
21 progress note records.

22 They are part of the medical files for the six named
23 plaintiffs.

24 We are going to want to admit them into the record.

25 THE COURT: Sure.

1 MS. WELLS: It's 11,000 pages worth of documents.

2 THE COURT: Which parts do you want me to read,
3 because trust me, 11,000 pages.

4 MS. WELLS: We will intend to be pulling portions
5 that we can identify for the Court as to which ones we think
6 would focus you and help you make your decision, but we just
7 don't know logistically whether we should be bringing in 11,000
8 pages.

9 It's on the thumb drives that we have already provided
10 to the Court.

11 THE COURT: When you submit that to me, then you
12 have to assume the Court has read it.

13 Trust me, I really don't want to read 11,000 pages,
14 10,900 of which aren't relevant.

15 Why don't you work out with the other side. I could
16 receive the whole document, if you would like, but I want a
17 clear record of what I honestly and ethically read and
18 considered, so that you know if this case ever goes up on
19 appeal or to the circuit, what I actually considered.

20 I'm a little afraid of what we do. We accept it, means
21 we have read it, 11,000 pages, I'm not sure how much of that
22 would be relevant.

23 So just sort it out, pages 1 through 15, but if you want
24 the entire record in, fine, but you two tell me.

25 If you both say you want it, the answer is usually going

1 to be yes.

2 MS. WELLS: We will do our best to narrow it down.

3 THE COURT: Anything else?

4 Well, drive safely. See you on Monday.

5 (The proceedings concluded at 5:00 p.m.)

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CERTIFICATE OF OFFICIAL REPORTER

COUNTY OF LOS ANGELES)
STATE OF CALIFORNIA)

I, TERRI A. HOURIGAN, Federal Official Realtime Court Reporter, in and for the United States District Court for the Central District of California, do hereby certify that pursuant to Section 753, Title 28, United States Code that the foregoing is a true and correct transcript of the stenographically reported proceedings held in the above-entitled matter and that the transcript page format is in conformance with the regulations of the judicial conference of the United States.

Date: 10th day of August, 2024.

/s/ TERRI A. HOURIGAN

TERRI A. HOURIGAN, CSR NO. 3838, RPR, CRR
Federal Court Reporter

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